



# 2025 Children's Health Insurance Program (CHIP)

# **DRUG LIST**

## (Formulary)



**Important notice for CHIP managed care plans in Pennsylvania:** Advertised managed care plans or programs may not cover all your healthcare expenses. Read your member handbook carefully to determine which healthcare services are covered. Please call 800.KIDS.101 or the number on the back of your ID card (TTY: 711).

CHIP coverage is issued by Keystone Health Plan® Central through a contract with the Commonwealth of Pennsylvania. Capital Blue Cross Dental and Capital Blue Cross Vision are issued by Capital Advantage Assurance Company®. Capital Advantage Assurance Company and Keystone Health Plan Central are subsidiaries of Capital Blue Cross. All are independent licensees of the Blue Cross Blue Shield Association. Communications are issued by Capital Blue Cross in its capacity as administrator of programs and provider relations.

# Capital Blue Cross

## Children's Health Insurance Program (CHIP) Formulary

### January 2025

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To search for a drug name within a PDF of this document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

A searchable version of this formulary can be found on our website,  
[CapBlueCross.com/formulary](http://CapBlueCross.com/formulary).

## The CHIP Formulary

Capital Blue Cross created the Children's Health Insurance Program (CHIP) Formulary to give members access to quality, affordable prescription drugs and to provide providers with a list of preferred drugs for cost-effective prescribing.

### How the formulary was developed

The CHIP Formulary was developed and is maintained by the Capital Blue Cross Pharmacy and Therapeutics (P&T) Committee. This committee, composed of practicing providers from various medical specialties, practicing pharmacists, and other healthcare providers, reviews drugs in all therapeutic categories based on safety and effectiveness and designates the most effective agent(s) in each class. The P&T Committee regularly reviews new and existing drugs to ensure the CHIP Formulary considers our member's needs.

### Request for reconsideration (for providers)

Providers may request a reconsideration of tier status for a drug on the CHIP Formulary by completing a Formulary Status Reconsiderations form or by writing a letter indicating the significant advantage of the specific drug and mailing it to the address below:

**Pharmacy Services**  
Capital Blue Cross P&T Committee  
P.O. Box 773735  
Harrisburg, PA 17177-3735

The P&T Committee will review drug-specific requests and communicate the results of the review to the requesting provider. Review of requests concerning specific patients must follow the dispute and appeal process.

### Coverage considerations

Coverage is limited to prescription drugs approved by the U.S. Food and Drug Administration (FDA) as evidenced by a New Drug Application (NDA), Abbreviated New Drug Application (ANDA), or Biologics License Application (BLA) on file. However, any legal requirements or group-specific benefits for coverage supersede this (for example, preventive drugs under the Patient Protection and Affordable Care Act). If your provider believes that a new drug is medically necessary before the P&T Committee's evaluation, your provider may submit a nonformulary exception request for coverage.

### Additional coverage considerations

Coverage is limited to prescription drugs approved by the Food and Drug Administration (FDA) as evidenced by a New Drug Application (NDA), Abbreviated New Drug Application (ANDA) or Biologics License Application (BLA) on file. However, any legal requirements or group-specific benefits for coverage supersede this (e.g., preventive drugs under the Affordable Care Act). If your provider believes that a new drug is medically necessary before the P&T Committee's evaluation, your provider may submit a nonformulary exception request for coverage.

### Generic drugs

Generic drugs are typically the most affordable and offer a lower cost share than brand-name drugs. The active ingredient in a generic drug is chemically identical to the active ingredient in the brand-name version. To help lower your out-of-pocket costs, choose generic drugs whenever possible. This can result in long-term savings, especially in the case of drugs taken daily and refilled frequently. Choosing

a brand-name drug when the generic version is available could result in a reduced benefit and higher out-of-pocket cost.

## Restricted generic substitution

When a prescription order is filled with a generic drug, the member is responsible for the applicable copayment. When the member requests a prescription order be dispensed with a brand drug, which has an approved generic drug equivalent, the member is responsible for the applicable brand drug copayment in addition to the difference in cost between such brand and the generic equivalent.

However, if the prescriber requires such brand drug be dispensed in place of an approved generic drug equivalent, the member is responsible for only the applicable brand drug copayment.

## Patient Protection and Affordable Care Act

Some drugs may have limited or \$0 cost-sharing under the Patient Protection and Affordable Care Act (PPACA), including drugs in such categories as aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, iron supplements, statins, tobacco cessation, vaccines, vitamin D supplements, and some contraceptive drugs and devices.

## Non-prescription drug policy<sup>1</sup>

Select over the counter (OTC) drugs may be covered as determined by Capital Blue Cross or mandated by the Patient Protection and Affordable Care Act (PPACA). If a prescription drug has an available OTC equivalent, the prescription drug will not be covered. Providers and pharmacists should guide members to the OTC equivalent product, when appropriate.

## Compound drug policy

Prescribed compound drug products are considered Brand Non-Preferred (BNP) and may require prior authorization. Not all pharmacies can compound drugs. You can find a pharmacy that compounds drugs by calling the Member Services number on the back of your ID card (TTY: 711).

**Benefit Exclusions/Limitations<sup>2</sup>:** Depending on your prescription drug plan, some drugs listed may not be covered. Examples of contractual exclusions include:

- Appetite suppressants (weight loss).
- Anti-obesity (for example, Wegovy).
- Drugs used for cosmetic purposes (wrinkles, hair loss, etc.).
- Erectile dysfunction drugs.
- Non self-administered injectable drugs.
- Experimental and investigational use (including off-label use) .
- Vitamins that are not considered preventive drugs

Prescription drugs are a covered benefit as determined by your Benefits Booklet, (Certificate of Coverage). Any FDA approved medication that may not be dispensed without a prescription order. Drugs that are not approved by the FDA are not covered by your benefit plan.

<sup>1</sup> As mandated by PPACA, select OTC drugs may be covered at \$0 cost share for members.

<sup>2</sup> The listing of a drug in this formulary or search result is not a guarantee of coverage or payment. Please check your CHIP Member Handbook to verify coverage of a drug (for example, weight loss, sexual function, and fertility drugs) and for details about your benefits. Drug benefits and claim payments are subject to your drug plan's specific terms and conditions, including eligibility and medical necessity determinations.

**Specialty drugs:** Specialty drugs are used to treat medical conditions such as hepatitis, multiple sclerosis, and rheumatoid arthritis. Specialty drugs may be oral or injectable drugs and can be self-administered. Specialty drugs are distributed through your plan's specialty pharmacy provider, Accredo<sup>3</sup>. Some specialty drugs are only available via select pharmacies and are called Limited Distribution. Limited Distribution indicates if the drug is restricted, and which pharmacies can dispense them. This limits where the member may obtain the prescription. Members may be required to use another pharmacy for limited distribution prescription drugs. You or your provider can call 833.721.1626 (TTY: 711) or fax 888.302.1028 to receive information on starting service. Members can also set up service through Accredo<sup>3</sup> by logging in to their secure account at [CapitalBlueCross.com](http://CapitalBlueCross.com).

**Injectable drug policy:** Self-administered pharmacy injectable drugs are usually covered under the Capital Blue Cross prescription drug plan. Injectable drugs that are not routinely self-administered are not covered under the prescription drug plan but may be covered under your medical benefit. Select medical injectable drugs may be available from Accredo<sup>3</sup>, Capital Blue Cross' specialty medical injectable provider. For information about distribution and billing of these drugs contact Accredo<sup>3</sup> by phone at 833.721.1626 (TTY: 711) or by fax at 888.302.1028. Members can also set up service through Accredo<sup>3</sup> by logging in to their secure account at [CapitalBlueCross.com](http://CapitalBlueCross.com).

## Utilization management

**Prior Authorization (PA):** Your prescription drug plan may require prior authorization for certain drugs. This means that your provider will need to submit a request for coverage of these drugs, which will need to be approved before the drug will be covered under your plan. If a prior authorization is commonly required for a drug listed in this document, it will be noted with a dot in the prior authorization column next to that drug. Some plans may require prior authorization on additional drugs beyond those noted in this document. Refer to your prescription drug plan materials for details about your particular benefits.

**Step Therapy (ST):** Your prescription drug plan may include a step therapy for certain drugs. This means you may need to try another proven, cost-effective drug before coverage may be available for the drug included in the program. Many brand drugs have less expensive generic or brand alternatives that might be an option for you. If a step therapy is commonly required for drugs in this document, they will be noted with a dot in the step therapy column next to that drug. Some plans may have step therapy programs on additional drugs beyond those noted in this document. Refer to your prescription drug plan materials for details about your particular benefits.

**Quantity Level Limits (QLL):** Certain drugs have a quantity level limit to support safety. These drugs will be noted with a dot in the quantity level limits column next to the drug. Limits may include quantity of covered drug per prescription, quantity of covered drug in a given time period, coverage only for members within a certain age range, and coverage only for members of a specific gender. If your provider prescribes a greater quantity of drug than what the quantity level limit allows, you can still get the drug; however, you will be responsible for the full cost of the prescription beyond what your coverage allows.

<sup>3</sup> Accredo Health Group, Inc. is a specialty pharmacy that is contracted through Prime Therapeutics LLC to provide services to members of Capital Blue Cross. On behalf of Capital Blue Cross, Prime Therapeutics LLC assists in the administration of our prescription drug program. Prime Therapeutics LLC is an independent benefit manager.

## Special programs

**Medication Synchronization:** You may obtain a partial fill or refill of your maintenance prescription drugs at your option when you are taking two or more maintenance medications. This can help make it easier for you to take medications correctly as prescribed. You can work with your in-network pharmacist so that the refill syncs up with another maintenance medication. Additionally, we will prorate your applicable cost-share amounts (e.g., copay or coinsurance) to align with the reduced supply. You can initiate a synchronization up to three times per year.

Note: Some state laws may not allow a prescription drug plan to cover certain controlled substance drugs if they are dispensed in a quantity greater than the dispensing limit. You will be responsible for the full cost of the prescription, with no benefits applied, if the dispensed quantity exceeds the dispensing limit.

## How to use this list

The easiest way to find a drug on the list is to use the search function:

Use the **Control** and **F** keys on your keyboard or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

This list is organized into broad therapeutic categories. For example, Respiratory Agents is a broad category. Within most categories, drugs are sub-grouped based upon drug class, for example under Respiratory Agents you will find Antihistamines. All drugs listed, whether generic or brand, are formulary drugs. The graphic below shows the information provided in each column of the drug list and is an example only.

1	2	3	4	5	6		
Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
ANTI-INFECTIVE AGENTS							
PENICILLINS							
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg	BN						
AMOXICILLIN - amoxicillin (trihydrate) chew tab 250 mg	BN						
<b>amoxicillian (trihydrate) cap 250 mg</b>	GP						
<b>amoxicillian (trihydrate) cap 500 mg</b>	GP						
<b>amoxicillian (trihydrate) for susp 125 mg/5ml</b>	GP						
<b>amoxicillian (trihydrate) for susp 200 mg/5ml</b>	GP						
<b>amoxicillian (trihydrate) for susp 250 mg/5ml</b>	GP						

- ① Column 1 (**Drug Name**): lists the drug name. Generic drugs are listed in lowercase **boldface**. Brand name drugs are CAPITALIZED. Separate drug entries are required for some dosage forms such as extended-release and delayed-release.
- ② Column 2 (**Tier**): indicates the Tier level.
  - Preventive Health Care Drugs are marked with a “PH”.
  - Generics Preferred are marked with a “GP”.
  - Generics Non-Preferred are marked with an “GN”.
  - Brands Preferred are marked with a “BP”.
  - Brands Non-Preferred are marked with an “BN”.
  - Specialty Preferred Drugs are marked with a “SP.” These drugs are also marked with a dot in the Specialty column.
  - Specialty Non-Preferred Drugs are marked with a “SN.” These drugs are also marked with a dot in the Specialty column.
- ③ Column 3 (**Specialty**): indicates if the drug is a specialty drug and needs to be filled at a participating

specialty pharmacy in our network.

- 4 Columns 4, 5, and 6 (**Prior Authorization, Step Therapy, Quantity Level Limits**): indicate Utilization Management (UM) Program that apply to the prescription drug (e.g., Prior Authorization, Step Therapy, and Quantity Level Limits). If an indicator is present in a column, then the pharmacy program applies. Some plans may have UM on additional drugs beyond those noted in this document.
- 5
- 6

## Abbreviation key

aer .....	aerosol	nebu .....	nebulizer
cap.....	capsules	odt.....	orally disintegrating tabs
chew.....	chewable	oint.....	ointment
conc.....	concentrate	ophth .....	ophthalmic
cr.....	controlled release	osm.....	osmotic release
dr.....	delayed release	pack .....	packets
ec.....	enteric coated	powd .....	powder
equiv .....	equivalent	pttw .....	twice-weekly patch
er.....	extended release	sl .....	sublingual
gm .....	gram	soln .....	solution
inhal.....	inhaler	suppos.....	suppositories
inj.....	injection	susp .....	suspension
liqd .....	liquid	tab .....	tablets
mg .....	milligram	td .....	transdermal
ml .....	milliliter	w/ .....	with

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>ANTI-INFECTIVE AGENTS</b>															
<b>PENICILLINS</b>															
AMOXICILLIN amoxicillin (trihydrate) chew tab 125 mg, 250 mg	BN							penicillin v potassium tab 250 mg, 500 mg	GP						
amoxicillin (trihydrate) cap 250 mg, 500 mg	GP							<b>CEPHALOSPORINS</b>							
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	GP							CEFACLOR cefaclor cap 250 mg, 500 mg	BN						
amoxicillin (trihydrate) tab 500 mg, 875 mg	GP							CEFADROXIL cefadroxil tab 1 gm	BN						
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml	GP							cefadroxil cap 500 mg	GP						
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml Augmentin	GN							cefadroxil for susp 250 mg/5ml, 500 mg/5ml	GN						
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml Augmentin es-600	GN							cefdinir cap 300 mg	GP						
amoxicillin & k clavulanate tab 250-125 mg	GN							cefdinir for susp 125 mg/5ml, 250 mg/5ml	GN						
amoxicillin & k clavulanate tab 500-125 mg Augmentin	GP							cefixime for susp 100 mg/5ml, 200 mg/5ml Suprax	GN						
amoxicillin & k clavulanate tab 875-125 mg	GP							cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	GN						
AMOXICILLIN/CLAVULANATE POTASSIUM amoxicillin & k clavulanate chew tab 200-28.5 mg, 400-57 mg	BN							cefpodoxime proxetil tab 100 mg, 200 mg	GN						
AMOXICILLIN/CLAVULANATE POTASSIUM amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	BN							ceprozil for susp 125 mg/5ml, 250 mg/5ml	GN						
ampicillin cap 500 mg	GP							ceprozil tab 250 mg	GP						
dicloxacillin sodium cap 250 mg, 500 mg	GN							ceprozil tab 500 mg	GN						
PENICILLIN V POTASSIUM penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	BN							cefuroxime axetil tab 250 mg, 500 mg	GP						
								cephalexin cap 250 mg, 500 mg Keflex	GP						
								cephalexin for susp 125 mg/5ml, 250 mg/5ml	GN						
<b>MACROLIDES</b>															
								azithromycin for susp 100 mg/5ml Zithromax	GN						
								azithromycin for susp 200 mg/5ml Zithromax	GP						
								azithromycin tab 250 mg, 500 mg Zithromax	GP						
								azithromycin tab 600 mg Zithromax	GN						
								CLARITHROMYCIN clarithromycin for susp 125 mg/5ml, 250 mg/5ml	BN						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
clarithromycin tab er 24hr 500 mg	GN							doxycycline monohydrate tab 50 mg, 100 mg	GP						
clarithromycin tab 250 mg, 500 mg	GN							minocycline hcl cap 50 mg Minocin	GP						
DIFICID fidaxomicin for susp 40 mg/ml	BN	•		•				minocycline hcl cap 75 mg, 100 mg Minocin	GN						
DIFICID fidaxomicin tab 200 mg	BN							tetracycline hcl cap 250 mg, 500 mg	GN						
E.E.S. 400 erythromycin ethylsuccinate tab 400 mg	BN							<b>FLUOROQUINOLONES</b>							
ERYTHROMYCIN erythromycin w/ delayed release particles cap 250 mg	BN							ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) Cipro	GP						
ERYTHROMYCIN ETHYLSUCCINATE erythromycin ethylsuccinate tab 400 mg	BN							ciprofloxacin hcl tab 750 mg (base equiv)	GP						
erythromycin ethylsuccinate for susp 200 mg/5ml E.e.s. granules	GN							levofloxacin oral soln 25 mg/ml	GN						
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	GN							levofloxacin tab 250 mg, 500 mg, 750 mg Levaquin	GP						
erythromycin tab 250 mg, 500 mg	GN							moxifloxacin hcl tab 400 mg (base equiv)	GN						
<b>TETRACYCLINES</b>								OFLOXACIN ofloxacin tab 300 mg	BN						
demeclocycline hcl tab 150 mg, 300 mg	GN							ofloxacin tab 400 mg	GN						
doxycycline hyclate cap 50 mg	GP							<b>AMINOGLYCOSIDES</b>							
doxycycline hyclate cap 100 mg Vibramycin	GP							neomycin sulfate tab 500 mg	GP						
doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg	GN							TOBRAMYCIN tobramycin nebu soln 300 mg/5ml	SP	•	•			•	
doxycycline hyclate tab 20 mg, 100 mg	GP							tobramycin nebu soln 300 mg/5ml Tobi	SP	•	•			•	
doxycycline monohydrate cap 50 mg, 100 mg	GP							<b>SULFONAMIDES</b>							
doxycycline monohydrate cap 150 mg	GN							SULFADIAZINE sulfadiazine tab 500 mg	BN						
doxycycline monohydrate for susp 25 mg/5ml Vibramycin	GN							<b>ANTIMYCOBACTERIAL AGENTS</b>							
doxycycline monohydrate tab 75 mg, 150 mg	GN							cycloserine cap 250 mg	GN						
								ethambutol hcl tab 100 mg	GP						
								ethambutol hcl tab 400 mg Myambutol	GN						
								ISONIAZID isoniazid tab 100 mg	BN						
								isoniazid syrup 50 mg/5ml	GN						
								isoniazid tab 300 mg	GP						
								PRIFTIN rifapentine tab 150 mg	BN						
								pyrazinamide tab 500 mg	GN						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
rifabutin cap 150 mg Mycobutin	GN							COMPLERA emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	BN						
rifampin cap 150 mg, 300 mg Rifadin	GN							darunavir tab 600 mg, 800 mg Prezista	GN						
TRECATOR ethionamide tab 250 mg	BN							DESCOVY emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg	BP						•
<b>ANTIFUNGALS</b>															
fluconazole for susp 10 mg/ml, 40 mg/ml Diflucan	GN							EDURANT rilpivirine hcl tab 25 mg (base equivalent)	BP						
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg Diflucan	GP							efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg Atripla	GN						
flucytosine cap 250 mg, 500 mg Ancobon	GN							emtricitabine caps 200 mg Emtriva	GN						
griseofulvin microsize susp 125 mg/5ml	GN							emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg Truvada	GN						•
griseofulvin microsize tab 500 mg	GN							entecavir tab 0.5 mg, 1 mg Baraclude	SP	•					
itraconazole cap 100 mg Sporanox	GN							EPCLUSIA sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	SP	•	•				•
ketoconazole tab 200 mg	GN							EVOTAZ atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	BN						
nystatin tab 500000 unit	GN							famciclovir tab 125 mg, 250 mg, 500 mg	GN						
terbinafine hcl tab 250 mg	GP							fosamprenavir calcium tab 700 mg (base equiv) Lexiva	GN						
voriconazole tab 50 mg, 200 mg Vfend	GN	•						HARVONI ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	SP	•	•				•
<b>ANTIVIRALS</b>															
abacavir sulfate tab 300 mg (base equiv) Ziagen	GN							HARVONI ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	SP	•	•				•
abacavir sulfate-lamivudine tab 600-300 mg Epzicom	GN							ISENTRESS raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	BN						
acyclovir cap 200 mg Zovirax	GP							ISENTRESS raltegravir potassium packet for susp 100 mg (base equiv)	BN						
acyclovir susp 200 mg/5ml Zovirax	GN							ISENTRESS raltegravir potassium tab 400 mg (base equiv)	BN						
acyclovir tab 400 mg, 800 mg Zovirax	GP														
adefovir dipivoxil tab 10 mg Hepsera	GN														
atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv) Reyataz	GN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
LAGEVRIA molnupiravir cap 200 mg	BN				•			PREZISTA darunavir oral susp 100 mg/ml	BP						
lamivudine oral soln 10 mg/ml Epivir	GN							PREZISTA darunavir tab 75 mg, 150 mg	BP						
lamivudine tab 100 mg (hbv) Epivir hbv	GN							RELENZA DISKHALER zanamivir aerosol powder breath activated 5 mg/act	BN				•		
lamivudine tab 150 mg, 300 mg Epivir	GN							REYATAZ atazanavir sulfate oral powder packet 50 mg (base equiv)	BN						
lamivudine-zidovudine tab 150-300 mg Combivir	GN							RIBAVIRIN ribavirin cap 200 mg	SN	•					
LEDIPASVIR/SOFOSBUVIR ledipasvir-sofosbuvir tab 90-400 mg	SP	•	•		•			RIMANTADINE HYDROCHLORIDE rimantadine hydrochloride tab 100 mg	BP						
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) Kaletra	GN							ritonavir tab 100 mg Norvir	GN						
lopinavir-ritonavir tab 100-25 mg, 200-50 mg Kaletra	GN							SOFOSBUVIR/VELPATASVIR sofosbuvir-velpatasvir tab 400-100 mg	SP	•	•			•	
maraviroc tab 150 mg, 300 mg Selzentry	GN							tenofovir disoproxil fumarate tab 300 mg Viread	GN						
nevirapine tab er 24hr 400 mg Viramune xr	GN							TIVICAY dolutegravir sodium tab 50 mg (base equiv)	BN						
nevirapine tab 200 mg Viramune	GP							TIVICAY PD dolutegravir sodium tab for oral susp 5 mg (base equiv)	BN						
ODEFSEY emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	BN							TYBOST cobicistat tab 150 mg	BN						
oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) Tamiflu	GN				•			valacyclovir hcl tab 500 mg Valtrex	GP						
oseltamivir phosphate for susp 6 mg/ml (base equiv) Tamiflu	GN				•			valacyclovir hcl tab 1 gm Valtrex	GN						
PAXLOVID nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	BP				•			valganciclovir hcl for soln 50 mg/ml (base equiv) Valcyte	GN						
PAXLOVID nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	BP				•			valganciclovir hcl tab 450 mg (base equivalent) Valcyte	GN						
PEGASYS peginterferon alfa-2a inj 180 mcg/ml	SN	•	•					VIRACEPT nelfinavir mesylate tab 250 mg, 625 mg	BN						
PEGASYS peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	SN	•	•					VIREAD tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	BN						
								VOSEVI sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	SP	•	•			•	
								zidovudine cap 100 mg Retrovir	GN						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>zidovudine syrup 10 mg/ml Retrovir</b>	GN							<b>fosfomycin tromethamine powd pack 3 gm (base equivalent) Monurol</b>	GN						
<b>zidovudine tab 300 mg</b>	GN							<b>linezolid for susp 100 mg/5ml Zyvox</b>	GN		•				
<b>ANTIMALARIALS</b>															
<b>atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg Malarone</b>	GN							<b>linezolid tab 600 mg Zyvox</b>	GN						
<b>chloroquine phosphate tab 250 mg, 500 mg</b>	GN							<b>methenamine hippurate tab 1 gm Hiprex</b>	GN						
<b>COARTEM artemether-lumefantrine tab 20-120 mg</b>	BN							<b>metronidazole tab 250 mg, 500 mg Flagyl</b>	GP						
<b>hydroxychloroquine sulfate tab 200 mg Plaquenil</b>	GN							<b>nitazoxanide tab 500 mg Alinia</b>	GN						•
<b>mefloquine hcl tab 250 mg</b>	GN							<b>nitrofurantoin macrocrystalline cap 50 mg Macrodantin</b>	GN						
<b>primaquine phosphate tab 26.3 mg (15 mg base) Primaquine phosphate</b>	GN							<b>nitrofurantoin macrocrystalline cap 100 mg Macrodantin</b>	GP						
<b>pyrimethamine tab 25 mg Daraprim</b>	GN	•						<b>nitrofurantoin monohydrate macrocrystalline cap 100 mg Macrobid</b>	GP						
<b>quinine sulfate cap 324 mg Qualaquin</b>	GN							<b>nitrofurantoin susp 25 mg/5ml</b>	GN		•				
<b>ANTHELMINTICS</b>															
<b>albendazole tab 200 mg Albenza</b>	GN							<b>pentamidine isethionate for nebulization soln 300 mg Nebupent</b>	GN						
<b>EMVERM mebendazole chew tab 100 mg</b>	BN							<b>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</b>	GP						
<b>ivermectin tab 3 mg Stromectol</b>	GN							<b>sulfamethoxazole-trimethoprim tab 400-80 mg Bactrim</b>	GP						
<b>praziquantel tab 600 mg Biltricide</b>	GN							<b>sulfamethoxazole-trimethoprim tab 800-160 mg Bactrim ds</b>	GP						
<b>ANTI-INFECTIVE AGENTS - MISC.</b>															
<b>atovaquone susp 750 mg/5ml Mepron</b>	GN							<b>tinidazole tab 500 mg</b>	GN						
<b>CAYSTON aztreonam lysine for inhal soln 75 mg (base equivalent)</b>	SN	•	•		•			<b>trimethoprim tab 100 mg Trimethoprim</b>	GN						
<b>clindamycin hcl cap 75 mg, 150 mg, 300 mg Cleocin</b>	GP							<b>vancomycin hcl cap 125 mg (base equivalent) Vancocin hcl</b>	GN						
<b>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) Cleocin pediatric granules</b>	GN							<b>vancomycin hcl cap 250 mg (base equivalent) Vancocin</b>	GN						
<b>dapsone tab 25 mg, 100 mg</b>	GN							<b>XIFAXAN rifaximin tab 200 mg, 550 mg</b>	BN		•		•		
<b>BIOLOGICALS</b>															
<b>VACCINES</b>															

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
ABRYSVO rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	PH					•		FLUZONE 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	PH					•	
ACTHIB haemophilus b polysaccharide conjugate vaccine for inj	PH					•		GARDASIL 9 human papillomavirus (hpv) 9-valent recomb vac im susp	PH					•	
AFLURIA 2024-2025 influenza virus vaccine split im susp	PH					•		GARDASIL 9 human papillomavirus (hpv) 9-valent recomb vac susp pref syr	PH					•	
AFLURIA 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	PH					•		HAVRIX hepatitis a vaccine inj susp 720 el unit/0.5ml, 1440 el unit/ml	PH					•	
BEXSERO meningococcal vac b (recomb omv adjuv) inj prefilled syringe	PH					•		HEPLISAV-B hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	PH					•	
CAPVAXIVE pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	PH					•		HIBERIX haemophilus b polysaccharide conjugate vac for inj 10 mcg	PH					•	
ENGERIX-B hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	PH					•		IPOL INACTIVATED IPV poliovirus vaccine, ipv injection	PH					•	
ENGERIX-B hepatitis b vaccine (recombinant) susp 20 mcg/ml	PH					•		JYNNEOS smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	PH					•	
FLUARIX 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	PH					•		M-M-R II measles-mumps-rubella virus vaccines for inj soln	PH					•	
FLUBLOK 2024-2025 influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	PH					•		MENQUADFI meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	PH					•	
FLUCELVAX 2024-2025 influenza virus vac tiss-cult subunit im susp	PH					•		MENVEO meningococcal (a, c, y, and w-135) oligo conj vac for inj	PH					•	
FLUCELVAX 2024-2025 influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	PH					•		MENVEO meningococcal (a, c, y, and w-135) oligo conj vac im soln	PH					•	
FLULAVAL 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	PH					•		PEDVAX HIB haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	PH					•	
FLUMIST NASAL VACCINE 2024-2025 influenza virus vaccine live intranasal liquid	PH					•		PENBRAYA meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	PH					•	
FLUZONE 2024-2025 influenza virus vaccine split im susp	PH					•		PNEUMOVAX 23 pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	PH					•	
								PREHEVBRIOP hepatitis b vaccine 3-antigen (recombinant) susp 10 mcg/ml	PH					•	

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PREVNAR 20 pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	PH					•		BOOSTRIX tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	PH					•	
PRIORIX measles-mumps-rubella virus vaccines for subcutaneous susp	PH					•		DAPTACEL diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	PH					•	
PROQUAD measles-mumps-rubella-varicella virus vaccines for susp	PH					•		INFANRIX diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	PH					•	
RECOMBIVAX HB hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	PH					•		KINRIX diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	PH					•	
RECOMBIVAX HB hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	PH					•		PEDIARIX diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	PH					•	
ROTARIX rotavirus vaccine, live oral susp	PH					•		PENTACEL diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	PH					•	
ROTATEQ rotavirus vaccine, live oral pentavalent soln	PH					•		QUADRACEL diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	PH					•	
SHINGRIX zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	PH					•		QUADRACEL diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	PH					•	
TRUMENBA meningococcal group b vac (recomb) im susp pre-filled syr	PH					•		TDVAX tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	PH					•	
TWINRIX hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	PH					•		TENIVAC tetanus-diphtheria toxoids (td) inj 5-2 lfu	PH					•	
VAQTA hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	PH					•		VAXELIS diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre-syr	PH					•	
VARIVAX varicella virus vac live for subcutaneous inj 1350 pfu/0.5ml	PH					•		VAXELIS diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	PH					•	
VAXNEUVANCE pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	PH					•		<b>ANTINEOPLASTIC AGENTS</b>							
<b>TOXOIDS</b>								<b>ANTINEOPLASTICS</b>							
ADACEL tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	PH					•		abiraterone acetate tab 250 mg, 500 mg Zytiga	SP	•	•		•		
BOOSTRIX tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml	PH					•		ALECENSA alectinib hcl cap 150 mg (base equivalent)	SN	•	•		•		•
								anastrozole tab 1 mg Arimidex	GP						
								bicalutamide tab 50 mg Casodex	GP						
								capecitabine tab 150 mg, 500 mg Xeloda	SP	•					
								COTELLIC cobimetinib fumarate tab 20 mg (base equivalent)	SN	•	•		•		

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CYCLOPHOSPHAMIDE cyclophosph tab 25 mg, 50 mg	BP							10 mg & 2 x 4 mg (18 mg daily dose)							
<b>cyclophosphamide cap 25 mg, 50 mg</b> Cyclophosphamide	GN							<b>LENVIMA 20 MG DAILY DOSE</b> lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	SN	•	•		•		•
EMCYT estramustine phosphate sodium cap 140 mg	BN							<b>LENVIMA 24 MG DAILY DOSE</b> lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	SN	•	•		•		•
ERIVEDGE vismodegib cap 150 mg	SN	•	•		•			<b>LENVIMA 4 MG DAILY DOSE</b> lenvatinib cap therapy pack 4 mg (4 mg daily dose)	SN	•	•		•		•
<b>erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent)</b> Tarceva	SP	•	•		•			<b>LENVIMA 8 MG DAILY DOSE</b> lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	SN	•	•		•		•
ETOPOSIDE etoposide cap 50 mg	BN							<b>letrozole tab 2.5 mg</b> Femara	GP						
<b>exemestane tab 25 mg</b> Aromasin	GN							<b>leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg</b>	GN						
GILOTRIF afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	SN	•	•		•			<b>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</b>	SP	•					
HYCAMTIN topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	SN	•	•					<b>LYSODREN mitotane tab 500 mg</b>	BP		•				•
<b>hydroxyurea cap 500 mg</b> Hydrea	GN							<b>megestrol acetate susp 40 mg/ml</b>	GN						
IBRANCE palbociclib cap 75 mg, 100 mg, 125 mg	SP	•	•		•			<b>megestrol acetate tab 20 mg, 40 mg</b>	GP						
IBRANCE palbociclib tab 75 mg, 100 mg, 125 mg	SP	•	•		•			<b>mercaptopurine tab 50 mg</b>	GN						
<b>imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)</b> Gleevec	SP	•	•		•			<b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)</b>	GP						
<b>lapatinib ditosylate tab 250 mg (base equiv)</b> Tykerb	SP	•	•		•			<b>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</b>	GN						
LENVIMA 10 MG DAILY DOSE lenvatinib cap therapy pack 10 mg (10 mg daily dose)	SN	•	•		•		•	<b>methotrexate sodium inj 50 mg/2ml (25 mg/ml)</b>	GP						
LENVIMA 12MG DAILY DOSE lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	SN	•	•		•		•	<b>methotrexate sodium tab 2.5 mg (base equiv)</b>	GP						
LENVIMA 14 MG DAILY DOSE lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	SN	•	•		•		•	<b>nilutamide tab 150 mg</b> Nilandron	GN						
LENVIMA 18 MG DAILY DOSE lenvatinib cap ther pack	SN	•	•		•		•	<b>NINLARO ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)</b>	SN	•	•		•		
							•	<b>POMALYST pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg</b>	SN	•	•		•		

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SOLTAMOX tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	BP							methylprednisolone tab 4 mg, 16 mg, 32 mg Medrol	GP						
sorafenib tosylate tab 200 mg (base equivalent) Nexavar	SP	•	•		•			methylprednisolone tab 8 mg Medrol	GN						
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	GP							prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) Pediapred	GN						
TASIGNA nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	SN	•	•		•			prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	GP						
toremifene citrate tab 60 mg (base equivalent) Fareston	GN							prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	GN						
tretinoin cap 10 mg	GN		•					prednisolone soln 15 mg/5ml	GP						
TREXALL methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv), 10 mg (base equiv), 15 mg (base equiv)	BN							PREDNISONE prednisone oral soln 5 mg/5ml	BN						
XALKORI crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	SN	•	•		•			PREDNISONE INTENSOL prednisone conc 5 mg/ml	BN						
XALKORI crizotinib cap 200 mg, 250 mg	SN	•	•		•			prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21)	GP						
ZYDELIG idelalisib tab 100 mg, 150 mg	SN	•	•		•		•	prednisone tab therapy pack 10 mg (48)	GN						
<b>ENDOCRINE AND METABOLIC DRUGS</b>								prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	GP						
<b>CORTICOSTEROIDS</b>								<b>ANDROGEN-ANABOLIC</b>							
DEXAMETHASONE dexamethasone soln 0.5 mg/5ml	BN							danazol cap 50 mg, 100 mg, 200 mg	GN						
dexamethasone elixir 0.5 mg/5ml	GN							METHITEST methyltestosterone oral tab 10 mg	BN	•		•			
DEXAMETHASONE INTENSOL dexamethasone conc 1 mg/ml	BN							methyltestosterone cap 10 mg	GN	•		•			
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	GP							TESTOSTERONE testosterone td gel 50 mg/5gm (1%)	BN	•		•			
fludrocortisone acetate tab 0.1 mg	GP							testosterone cypionate im inj in oil 100 mg/ml	GN	•		•			
hydrocortisone tab 5 mg, 10 mg, 20 mg Cortef	GN							testosterone cypionate im inj in oil 200 mg/ml Depo-testosterone	GN	•		•			
methylprednisolone tab therapy pack 4 mg (21) Medrol dosepak	GP							TESTOSTERONE ENANTHATE testosterone enanthate im inj in oil 200 mg/ml	BN	•		•			
								TESTOSTERONE PUMP testosterone td gel 12.5 mg/act (1%)	BN	•		•			

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testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) Androgel	GN		•		•			ELLA ulipristal acetate tab 30 mg	PH						•
testosterone td gel 12.5 mg/act (1%)	GN		•		•			ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg	PH						•
testosterone td gel 20.25 mg/act (1.62%) Androgel pump	GN		•		•			etongestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr Nuvaring	PH						•
<b>ESTROGENS</b>															
estradiol & norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg Activella	GN							levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg Quartette	PH						•
estradiol tab 0.5 mg, 1 mg, 2 mg Estrace	GP							levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) Loseasonique	PH						•
estradiol valerate im in oil 20 mg/ml Delestrogen	GN							levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) Seasonique	PH						•
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg Femhrt low dose	GN							levongestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	PH						•
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	GN							levongestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	PH						•
<b>CONTRACEPTIVES</b>															
ANNOVERA segesterone ace-ethinyl estradiol va ring 0.15-0.013 mg/24hr	PH					•		levonorgestrel tab 1.5 mg	PH						•
DEPO-SUBQ PROVERA 104 medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	PH					•		levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	PH						•
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) Mircette	PH					•		levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	PH						•
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	PH					•		levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) Balcoltra	PH						•
dospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg Beyaz	PH					•		LO LOESTRIN FE norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	PH						•
dospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg Safyral	PH					•		medroxyprogesterone acetate im susp prefilled syr 150 mg/ml Depo-provera contraceptive	PH						•
dospirenone-ethinyl estradiol tab 3-0.02 mg Yaz	PH					•		medroxyprogesterone acetate im susp 150 mg/ml Depo-provera contraceptive	PH						•
dospirenone-ethinyl estradiol tab 3-0.03 mg Yasmin 28	PH					•		NATAZIA estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	PH						•

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norelgestromin-ethynodiol- td ptwk 150-35 mcg/24hr	PH					•		norethindrone-ethynodiol tab 0.5-35/1-35/0.5-35 mg-mcg	PH					•	
norethindrone & ethynodiol- estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg	PH					•		norgestimate & ethynodiol- estradiol tab 0.25 mg-35 mcg	PH					•	
norethindrone & ethynodiol- estradiol tab 1 mg-35 mcg Ortho-novum 1/35	PH					•		norgestimate-ethynodiol tab 0.18-25/0.215-25/0.25-25 mg- mcg Ortho tri-cyclen lo	PH					•	
norethindrone & ethynodiol- estradiol-fe chew tab 0.4 mg-35 mcg	PH					•		norgestimate-ethynodiol tab 0.18-35/0.215-35/0.25-35 mg- mcg	PH					•	
norethindrone & ethynodiol- estradiol-fe chew tab 0.8 mg-25 mcg Generess fe	PH					•		norgestrel & ethynodiol tab 0.3 mg-30 mcg	PH					•	
norethindrone ac-ethynodiol- fe tab 1-20/1-30/1-35 mg- mcg Estrostep fe	PH					•		OPILL norgestrel tab 0.075 mg	PH					•	
norethindrone ace & ethynodiol- estradiol tab 1 mg-20 mcg	PH					•		SLYND drospirenone tab 4 mg	PH					•	
norethindrone ace & ethynodiol estradiol tab 1.5 mg-30 mcg Loestrin 1.5/30-21	PH					•		TYBLUME levonorgestrel & ethynodiol- estradiol chew tab 0.1 mg-20 mcg	PH					•	
norethindrone ace & ethynodiol estradiol-fe tab 1 mg-20 mcg Loestrin fe 1/20	PH					•		VELIVET desogestrel-ethynodiol tab 0.1-0.025/0.125-0.025/0.15-0.025 mg	PH					•	
norethindrone ace & ethynodiol estradiol-fe tab 1.5 mg-30 mcg Loestrin fe 1.5/30	PH					•		<b>PROGESTINS</b>							
norethindrone ace-ethynodiol- fe chew tab 1 mg-20 mcg (24) Minastrin 24 fe	PH					•		medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg Provera	GP						
norethindrone ace-ethynodiol- estradiol-fe cap 1 mg-20 mcg (24) Taytulla	PH					•		norethindrone acetate tab 5 mg Aygestin	GN						
norethindrone ace-ethynodiol- estradiol-fe tab 1 mg-20 mcg (24)	PH					•		progesterone cap 100 mg Prometrium	GP						
norethindrone tab 0.35 mg Ortho micronor	PH					•		progesterone cap 200 mg Prometrium	GN						
norethindrone-ethynodiol- estradiol tab 0.5-35/0.75-35/1-35 mg- mcg Ortho-novum 7/7/7	PH					•		progesterone im in oil 50 mg/ml	GN						
								<b>ANTIDIABETICS</b>							
								<i>Antidiabetics</i>							
								acarbose tab 25 mg, 50 mg, 100 mg Precose	GN						
								FARXIGA dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	BP			•	•		
								glimepiride tab 1 mg, 2 mg, 4 mg Amaryl	GP						
								glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg Glucotrol xl	GP						

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glipizide tab 5 mg, 10 mg Glucotrol	GP							MIGLITOL miglitol tab 25 mg, 50 mg, 100 mg	BN						
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	GN							nateglinide tab 60 mg, 120 mg Starlix	GN						
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR glucagon (rdna) for inj kit 1 mg	BN							OZEMPIK semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/ dose (8 mg/3ml)	BP		•		•		
glucose gel 40%	GP							pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) Actos	GP						
GLYBURIDE MICRONIZED glyburide micronized tab 1.5 mg, 3 mg, 6 mg	BN							pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg Actoplus met	GN						
glyburide tab 1.25 mg, 2.5 mg, 5 mg	GP							repaglinide tab 0.5 mg, 1 mg	GN						
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	GP							repaglinide tab 2 mg Prandin	GN						
GLYXAMBI empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	BP		•	•				RYBELSUS semaglutide tab 3 mg, 7 mg, 14 mg	BP		•		•		
GNP GLUCOSE glucose chew tab 4 gm (rounded)	BN							SM GLUCOSE glucose chew tab 4 gm (rounded)	BN						
INSTA-GLUCOSE glucose gel 77.4%	BN							SM GLUCOSE glucose-vitamin c chew tab 4-6 gm-mg	BN						
JANUMET sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	BP		•	•				SYNJARDY empagliflozin- metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	BP		•	•			
JANUMET XR sitagliptin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	BP		•	•				SYNJARDY XR empagliflozin- metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	BP		•	•			
JANUVIA sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	BP		•	•				TRULICITY dulaglutide soln pen- injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	BP		•		•		
JARDIANCE empagliflozin tab 10 mg, 25 mg	BP		•	•				VICTOZA liraglutide soln pen- injector 18 mg/3ml (6 mg/ml)	BP		•		•		
LIRAGLUTIDE liraglutide soln pen- injector 18 mg/3ml (6 mg/ml)	BP	•		•				<b>Rapid-Acting Insulins</b>							
metformin hcl tab er 24hr 500 mg, 750 mg Glucophage xr	GP			•				FIASP insulin aspart (with niacinamide) inj 100 unit/ml	BP				•		
metformin hcl tab 500 mg, 850 mg, 1000 mg Glucophage	GP							FIASP FLEXTOUCH insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	BP				•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
FIASP PENFILL insulin aspart (with niacinamide) soln cartridge 100 unit/ml	BP				•			LYUMJEV TEMPO PEN insulin lispro-aabc soln pen-inj w/ transmit port 100 unit/ml	BP				•		
HUMALOG insulin lispro inj soln 100 unit/ml	BP	•		•				NOVOLOG insulin aspart inj soln 100 unit/ml	BP				•		
HUMALOG insulin lispro soln cartridge 100 unit/ml	BP			•				NOVOLOG FLEXPEN insulin aspart soln pen-injector 100 unit/ml	BP				•		
HUMALOG JUNIOR KWIKPEN insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	BP	•		•				NOVOLOG FLEXPEN RELION insulin aspart soln pen-injector 100 unit/ml	BP				•		
HUMALOG KWIKPEN insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	BP	•		•				NOVOLOG PENFILL insulin aspart soln cartridge 100 unit/ml	BP				•		
HUMALOG KWIKPEN insulin lispro soln pen-injector 200 unit/ml	BP			•				NOVOLOG RELION insulin aspart inj soln 100 unit/ml	BP				•		
HUMALOG TEMPO PEN insulin lispro soln pen-inj w/transmitter port 100 unit/ml	BP			•				<b>Short-Acting Insulins</b>							
INSULIN ASPART insulin aspart inj soln 100 unit/ml	BP	•		•				HUMULIN R insulin regular (human) inj 100 unit/ml	BP				•		
INSULIN ASPART FLEXPEN insulin aspart soln pen-injector 100 unit/ml	BP	•		•				HUMULIN R U-500 (CONCENTRATED) insulin regular (human) inj 500 unit/ml	BP				•		
INSULIN ASPART PENFILL insulin aspart soln cartridge 100 unit/ml	BP	•		•				HUMULIN R U-500 KWIKPEN insulin regular (human) soln pen-injector 500 unit/ml	BP				•		
INSULIN LISPRO insulin lispro inj soln 100 unit/ml	BN	•		•				NOVOLIN R insulin regular (human) inj 100 unit/ml	BP				•		
INSULIN LISPRO JUNIOR KWIKPEN insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	BN	•		•				NOVOLIN R FLEXPEN insulin regular (human) soln pen-injector 100 unit/ml	BP				•		
INSULIN LISPRO KWIKPEN insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	BN	•		•				NOVOLIN R FLEXPEN RELION insulin regular (human) soln pen-injector 100 unit/ml	BP				•		
LYUMJEV insulin lispro-aabc inj 100 unit/ml	BP			•				NOVOLIN R RELION insulin regular (human) inj 100 unit/ml	BP				•		
LYUMJEV KWIKPEN insulin lispro-aabc soln pen-injector 200 unit/ml	BP			•				<b>Intermediate-Acting Insulins</b>							
LYUMJEV KWIKPEN insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	BP			•				HUMALOG MIX 50/50 insulin lispro protamine & lispro inj 100 unit/ml (50-50)	BP				•		
								HUMALOG MIX 50/50 KWIKPEN insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	BP				•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
HUMALOG MIX 75/25 insulin lispro prot & lispro inj 100 unit/ml (75-25)	BP				•			NOVOLIN N RELION insulin nph (human) (isophane) inj 100 unit/ml	BP				•		
HUMALOG MIX 75/25 KWIKPEN insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	BP		•		•			NOVOLIN 70/30 insulin nph isophane & regular human inj 100 unit/ml (70-30)	BP				•		
HUMULIN N insulin nph (human) (isophane) inj 100 unit/ml	BP				•			NOVOLIN 70/30 FLEXPEN insulin nph & regular susp pen-inj 100 unit/ml (70-30)	BP				•		
HUMULIN N KWIKPEN insulin nph (human) (isophane) susp pen-injector 100 unit/ml	BP				•			NOVOLIN 70/30 FLEXPEN RELION insulin nph & regular susp pen-inj 100 unit/ml (70-30)	BP				•		
HUMULIN 70/30 insulin nph isophane & regular human inj 100 unit/ml (70-30)	BP				•			NOVOLIN 70/30 RELION insulin nph isophane & regular human inj 100 unit/ml (70-30)	BP				•		
HUMULIN 70/30 KWIKPEN insulin nph & regular susp pen-inj 100 unit/ml (70-30)	BP				•			NOVOLOG MIX 70/30 insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	BP				•		
INSULIN ASPART PROTAMINE/ INSULIN ASPART FLEXPEN insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	BP	•		•				NOVOLOG MIX 70/30 PREFILLED FLEXPEN insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	BP				•		
INSULIN ASPART PROTAMINE/ INSULIN ASPART FLEXPEN insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	BP	•		•				NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	BP				•		
INSULIN LISPRO PROTAMINE/ INSULIN LISPRO KWIKPEN insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	BN	•		•				NOVOLOG MIX 70/30 RELION insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	BP				•		
NOVOLIN N insulin nph (human) (isophane) inj 100 unit/ml	BP				•			TRESIBA insulin degludec inj 100 unit/ml	BP				•		
NOVOLIN N FLEXPEN insulin nph (human) (isophane) susp pen-injector 100 unit/ml	BP				•			TRESIBA FLEXTOUCH insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	BP				•		
NOVOLIN N FLEXPEN RELION insulin nph (human) (isophane) susp pen-injector 100 unit/ml	BP				•			<b>Basal Insulins</b>							
								LANTUS insulin glargine inj 100 unit/ml	BP				•		
								LANTUS SOLOSTAR insulin glargine soln pen-injector 100 unit/ml	BP				•		
								LEVEMIR insulin detemir inj 100 unit/ml	BP				•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
LEVEMIR FLEXPEN insulin detemir soln pen-injector 100 unit/ml	BP				•			alendronate sodium tab 10 mg	GP						
TOUJEO MAX SOLOSTAR insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	BP				•			alendronate sodium tab 35 mg	GP				•		
TOUJEO SOLOSTAR insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	BP				•			alendronate sodium tab 70 mg Fosamax	GP				•		
<b>THYROID AGENTS</b>															
ARMOUR THYROID thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain)	BN							cabergoline tab 0.5 mg	GN						
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg Synthroid	GP							calcitonin (salmon) nasal soln 200 unit/act	GN						
liothyronine sodium tab 5 mcg, 25 mcg Cytomel	GP							calcitriol cap 0.25 mcg Rocaltrol	GP						
liothyronine sodium tab 50 mcg Cytomel	GN							calcitriol cap 0.5 mcg Rocaltrol	GN						
methimazole tab 5 mg, 10 mg Tapazole	GP							calcitriol oral soln 1 mcg/ml Rocaltrol	GN						
NP THYROID 15 thyroid tab 15 mg (1/4 grain)	BN							desmopressin acetate nasal spray soln 0.01% Ddavp	GN						
NP THYROID 30 thyroid tab 30 mg (1/2 grain)	BN							desmopressin acetate nasal spray soln 0.01% (refrigerated)	GN						
NP THYROID 60 thyroid tab 60 mg (1 grain)	BN							desmopressin acetate tab 0.1 mg, 0.2 mg Ddavp	GN						
propylthiouracil tab 50 mg	GN							doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	GN						
SYNTHROID levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	BN							FOSAMAX PLUS D alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	BN				•		
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>															
ALENDRONATE SODIUM alendronate sodium tab 5 mg	BP							GENOTROPIN somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	SP	•	•				
alendronate sodium oral soln 70 mg/75ml	GN							GENOTROPIN MINIQUICK somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	SP	•	•				
								ibandronate sodium tab 150 mg (base equivalent) Boniva	GP						
								INCRELEX mecasermin inj 40 mg/4ml (10 mg/ml)	SN	•					
								NORDITROPIN FLEXPRO somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	SP	•	•				

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
NOVAREL chorionic gonadotropin for im inj 5000 unit	SN	•						DIGOXIN digoxin oral soln 0.05 mg/ml	BN		•				
OCTREOTIDE ACETATE octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	SP	•	•		•			digoxin oral soln 0.05 mg/ml Digoxin	GN		•				
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) Sandostatin	SP	•	•		•			digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) Lanoxin	GP						
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	SP	•	•		•			<b>ANTIANGINAL AGENTS</b>							
OMNITROPE somatropin for inj 5.8 mg	SP	•	•					isosorbide dinitrate tab 5 mg Isordil titradose	GN						
OMNITROPE somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	SP	•	•					isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	GN						
paricalcitol cap 1 mcg, 2 mcg Zemplar	GN							isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	GP						
paricalcitol cap 4 mcg	GN							isosorbide mononitrate tab 10 mg, 20 mg	GP						
PREGNYL chorionic gonadotropin for im inj 10000 unit	SN	•						NITRO-BID nitroglycerin oint 2%	BN						
PREGNYL W/DILUENT BENZYL ALCOHOL/NACL chorionic gonadotropin for im inj 10000 unit	SN	•						NITRO-TIME nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	BN						
raloxifene hcl tab 60 mg Evista	GN							nitroglycerin sl tab 0.3 mg, 0.4 mg Nitrostat	GP						
risedronate sodium tab 5 mg, 30 mg Actonel	GN							nitroglycerin sl tab 0.6 mg Nitrostat	GN						
risedronate sodium tab 35 mg, 150 mg Actonel	GN				•			nitroglycerin td patch 24hr 0.1 mg/hr Nitro-dur	GN						
sapropterin dihydrochloride powder packet 100 mg, 500 mg Kuvan	SP	•	•					<b>BETA BLOCKERS</b>							
sapropterin dihydrochloride tab 100 mg Kuvan	SP	•	•					acebutolol hcl cap 200 mg, 400 mg	GN						
sodium phenylbutyrate oral powder 3 gm/teaspoonful Buphenyl	SP	•	•					atenolol tab 25 mg, 50 mg, 100 mg Tenormin	GP						
<b>CARDIOVASCULAR AGENTS</b>								betaxolol hcl tab 10 mg, 20 mg	GN						
<b>CARDIOTONICS</b>								bisoprolol fumarate tab 5 mg	GP						
								bisoprolol fumarate tab 10 mg	GN						
								carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg Coreg	GP						
								labetalol hcl tab 100 mg	GP						
								labetalol hcl tab 200 mg, 300 mg	GN						
								metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) Toprol xl	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	GP							diltiazem hcl coated beads cap er 24hr 360 mg Cardizem cd	GN						
metoprolol tartrate tab 50 mg, 100 mg Lopressor	GP							diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg Tiazac	GP						
nadolol tab 20 mg, 40 mg, 80 mg Corgard	GN							diltiazem hcl extended release beads cap er 24hr 240 mg, 300 mg, 360 mg, 420 mg Tiazac	GN						
pindolol tab 5 mg, 10 mg	GN							diltiazem hcl tab 30 mg, 60 mg, 120 mg Cardizem	GP						
PROPRANOLOL HCL propranolol hcl oral soln 40 mg/5ml	BN	•		•				diltiazem hcl tab 90 mg	GN						
propranolol hcl cap er 24hr 60 mg, 80 mg Inderal la	GP							felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	GP						
propranolol hcl cap er 24hr 120 mg, 160 mg Inderal la	GN							isradipine cap 2.5 mg, 5 mg	GN						
propranolol hcl oral soln 20 mg/5ml	GP	•		•				nifedipine cap 10 mg Procardia	GN						
propranolol hcl tab 10 mg, 20 mg, 40 mg, 80 mg	GP							nifedipine cap 20 mg	GN						
propranolol hcl tab 60 mg	GN							nifedipine tab er 24hr 30 mg Adalat cc	GP						
sotalol hcl (afib/afl) tab 80 mg, 120 mg Betapace af	GP							nifedipine tab er 24hr 60 mg, 90 mg	GP						
sotalol hcl (afib/afl) tab 160 mg Betapace af	GN							nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg Procardia xl	GP						
sotalol hcl tab 80 mg, 120 mg Betapace	GP							nimodipine cap 30 mg	GN						
sotalol hcl tab 160 mg Betapace	GN							NISOLDIPINE ER nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	BN						
sotalol hcl tab 240 mg	GN							nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg Sular	GN						
timolol maleate tab 5 mg, 10 mg, 20 mg	GN							verapamil hcl tab er 120 mg, 180 mg, 240 mg Calan sr	GP						
<b>CALCIUM CHANNEL BLOCKERS</b>								verapamil hcl tab 40 mg, 80 mg	GP						
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) Norvasc	GP							verapamil hcl tab 120 mg Calan	GP						
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	GN							<b>ANTIARRHYTHMICS</b>							
diltiazem hcl cap er 24hr 120 mg	GP							amiodarone hcl tab 100 mg, 400 mg	GN						
diltiazem hcl cap er 24hr 180 mg, 240 mg	GN							amiodarone hcl tab 200 mg	GP						
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg Cardizem cd	GP							disopyramide phosphate cap 100 mg, 150 mg Norpace	GN						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) Tikosyn	GN							10-12.5 mg, 20-12.5 mg, 20-25 mg Lotensin hct							
flecainide acetate tab 50 mg	GP							benazepril hcl tab 5 mg	GP						
flecainide acetate tab 100 mg, 150 mg	GN							benazepril hcl tab 10 mg, 20 mg, 40 mg Lotensin	GP						
mexiletine hcl cap 150 mg, 200 mg, 250 mg	GN							bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 10-6.25 mg	GP						
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg Rythmol sr	GN							bisoprolol & hydrochlorothiazide tab 5-6.25 mg Ziac	GP						
propafenone hcl tab 150 mg	GP							candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg Atacand	GN						
propafenone hcl tab 225 mg, 300 mg	GN							candesartan cilexetil- hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg Atacand hct	GN						
quinidine gluconate tab er 324 mg	GN							captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	GN						
QUINIDINE SULFATE quinidine sulfate tab 200 mg, 300 mg	BN							CAPTOPRIL/ HYDROCHLOROTHIAZIDE capto & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	BN						
<b>ANTIHYPERTENSIVES</b>								clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg Catapres	GP						
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) Tekturna	GN							doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg Cardura	GP						
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	GP							enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	GP						
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg Lotrel	GP							enalapril maleate & hydrochlorothiazide tab 10-25 mg Vaseretic	GP						
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 10-20 mg Azor	GN							enalapril maleate oral soln 1 mg/ ml Epaned	GN	•					
amlodipine besylate-valszartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg Exforge	GN							enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg Vasotec	GP						
atenolol & chlorthalidone tab 50-25 mg Tenoretic 50	GP							fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	GN						
atenolol & chlorthalidone tab 100-25 mg Tenoretic 100	GN							fosinopril sodium tab 10 mg, 20 mg, 40 mg	GP						
benazepril & hydrochlorothiazide tab 5-6.25 mg	GN							guanfacine hcl tab 1 mg, 2 mg	GN						
benazepril & hydrochlorothiazide tab	GN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	GP							prazosin hcl cap 2 mg	GP						
irbesartan tab 75 mg, 150 mg, 300 mg Avapro	GP							prazosin hcl cap 5 mg Minipress	GN						
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg Avalide	GP							quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg Accupril	GP						
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg Zestoretic	GP							quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg Accuretic	GN						
lisinopril tab 2.5 mg, 5 mg, 30 mg, 40 mg Zestril	GP							QUINAPRIL/HYDROCHLOROTHIAZIDE quinapril-hydrochlorothiazide tab 20-25 mg	BN						
lisinopril tab 10 mg, 20 mg Prinivil	GP							ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg Altace	GP						
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg Hyzaar	GP							telmisartan tab 20 mg Micardis	GP						
losartan potassium tab 25 mg, 50 mg, 100 mg Cozaar	GP							telmisartan tab 40 mg, 80 mg Micardis	GN						
METHYLDOPA methyldopa tab 250 mg, 500 mg	BN							telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg Micardis hct	GN						
metoprolol & hydrochlorothiazide tab 50-25 mg Lopressor hct	GN							terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	GP						
metoprolol & hydrochlorothiazide tab 100-25 mg, 100-50 mg	GN							trandolapril tab 1 mg, 2 mg, 4 mg	GP						
minoxidil tab 2.5 mg, 10 mg	GP							valsartan tab 40 mg, 80 mg, 160 mg, 320 mg Diovan	GP						
moexipril hcl tab 7.5 mg, 15 mg	GN							valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg Diovan hct	GP						
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg Benicar	GP							valsartan-hydrochlorothiazide tab 160-25 mg, 320-12.5 mg, 320-25 mg Diovan hct	GN						
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg Benicar hct	GP							<b>DIURETICS</b>							
PERINDOPRIL ERBUMINE perindopril erbumine tab 2 mg, 8 mg	BN							acetazolamide tab 125 mg	GP						
perindopril erbumine tab 4 mg	GN							acetazolamide tab 250 mg	GN						
phenoxybenzamine hcl cap 10 mg Dibenzyline	GN							amiloride hcl tab 5 mg	GP						
prazosin hcl cap 1 mg Minipress	GP							AMILORIDE/HYDROCHLOROTHIAZIDE amiloride & hydrochlorothiazide tab 5-50 mg	BN						
								bumetanide tab 0.5 mg Bumex	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
bumetanide tab 1 mg	GP							midodrine hcl tab 2.5 mg, 5 mg, 10 mg	GN						
bumetanide tab 2 mg Bumex	GN							<b>ANTIHYPERTENSIVES</b>							
chlorthalidone tab 25 mg, 50 mg	GP							atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) Lipitor	GP						•
ethacrynic acid tab 25 mg Edecrin	GN							cholestyramine light powder packets 4 gm	GN						
furosemide oral soln 10 mg/ml	GP							cholestyramine light powder 4 gm/dose Questran light	GN						
furosemide tab 20 mg, 40 mg, 80 mg Lasix	GP							cholestyramine powder packets 4 gm Questran	GN						
hydrochlorothiazide cap 12.5 mg	GP							cholestyramine powder 4 gm/dose Questran	GN						
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	GP							colesevelam hcl packet for susp 3.75 gm Welchol	GN						
indapamide tab 1.25 mg, 2.5 mg	GP							colesevelam hcl tab 625 mg Welchol	GN						
methazolamide tab 25 mg, 50 mg	GN							colestipol hcl granule packets 5 gm Colestid flavored	GN						
metolazone tab 2.5 mg, 5 mg, 10 mg	GN							colestipol hcl granules 5 gm Colestid flavored	GN						
spironolactone & hydrochlorothiazide tab 25-25 mg Aldactazide	GN							colestipol hcl tab 1 gm Colestid	GN						
spironolactone tab 25 mg, 50 mg, 100 mg Aldactone	GP							ezetimibe tab 10 mg Zetia	GP						
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	GP							fenofibrate micronized cap 67 mg, 134 mg, 200 mg	GP						
triamterene & hydrochlorothiazide cap 37.5-25 mg Dyazide	GP							fenofibrate tab 48 mg, 145 mg Tricor	GP						
triamterene & hydrochlorothiazide tab 37.5-25 mg Maxzide-25	GP							fenofibrate tab 54 mg, 160 mg	GP						
triamterene & hydrochlorothiazide tab 75-50 mg Maxzide	GP							fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	GN						•
<b>VASOPRESSORS</b>								gemfibrozil tab 600 mg Lopid	GP						
EPINEPHRINE epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	BN	•						icosapent ethyl cap 0.5 gm, 1 gm Vascepa	GN	•					•
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) Epipen-jr 2-pak	GN							lovastatin tab 10 mg, 20 mg, 40 mg	GP						•
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) Epipen 2-pak	GN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
niacin tab er 500 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) Niaspan	GN							<b>RESPIRATORY AGENTS</b>							
omega-3-acid ethyl esters cap 1 gm Lovaza	GN							<b>ANTIHISTAMINES</b>							
pitavastatin calcium tab 1 mg, 2 mg, 4 mg Livalo	GN			•				carbinoxamine maleate tab 4 mg	GN						
pravastatin sodium tab 10 mg	GP			•				CLEMASTINE	BN						
pravastatin sodium tab 20 mg, 40 mg, 80 mg Pravachol	GP			•				FUMARATE clemastine fumarate tab 2.68 mg							
REPATHA evolocumab subcutaneous soln prefilled syringe 140 mg/ml	BP	•		•				cyproheptadine hcl syrup 2 mg/5ml	GP						
REPATHA PUSHTRONEX SYSTEM evolocumab subcutaneous soln cartridge/ infusor 420 mg/3.5ml	BP	•		•				cyproheptadine hcl tab 4 mg	GP						
REPATHA SURECLICK evolocumab subcutaneous soln auto-injector 140 mg/ml	BP		•		•			levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	GN						
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg Crestor	GP				•			levocetirizine dihydrochloride tab 5 mg	GP						
simvastatin tab 5 mg, 10 mg, 20 mg, 40 mg, 80 mg Zocor	GP				•			promethazine hcl oral soln 6.25 mg/5ml	GP						
<b>CARDIOVASCULAR AGENTS - MISC.</b>								<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>							
ADEMPAS riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	SN	•	•		•		•	azelastine hcl nasal spray 0.1% (137 mcg/spray)	GP				•		
ambrisentan tab 5 mg, 10 mg Letairis	SP	•	•		•			flunisolide nasal soln 25 mcg/act (0.025%)	GN				•		
bosentan tab 62.5 mg, 125 mg Tracleer	SP	•	•		•			fluticasone propionate nasal susp 50 mcg/act	GP				•		
CORLANOR ivabradine hcl oral soln 5 mg/5ml (base equiv)	BP		•		•			ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	GN				•		
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) Corlanor	GN		•		•			<b>COUGH/COLD/ALLERGY</b>							
sildenafil citrate tab 20 mg Revatio	SP	•	•		•			acetylcysteine inhal soln 10%, 20%	GN						
tadalafil tab 20 mg (pah) Adcirca	SP	•	•		•			benzonatate cap 100 mg Tessalon perles	GP						
TRACLEER bosentan tab for oral susp 32 mg	SP	•	•		•			benzonatate cap 150 mg	GN						
								benzonatate cap 200 mg	GP						
								hydrocodone bitart- homatropine methylbrom soln 5-1.5 mg/5ml Hycodan	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
HYDROCODONE POLISTIREX/ CHLORPHENIRAMINE POLISTIREX hydrocod polst- chlorphen polst er susp 10-8 mg/5ml	BN							furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)							
promethazine & phenylephrine syrup 6.25-5 mg/5ml	GN							ASMANEX TWISTHALER 60 METERED DOSES mometasone furoate inhal powd 220 mcg/act (breath activated)	BP				•		
promethazine w/ codeine syrup 6.25-10 mg/5ml	GP							BREO ELLIPTA fluticasone furoate- vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	BP				•		
promethazine-dm syrup 6.25-15 mg/5ml	GP							budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml Pulmicort	GN						
sodium chloride soln nebu 3%, 10%	GP							budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/ act Symbicort	GN				•		
sodium chloride soln nebu 7% Hyper-sal	GP							cromolyn sodium soln nebu 20 mg/2ml	GN						
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>															
ADVAIR HFA fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	BP				•			FLUTICASONE PROPIONATE DISKUS fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/ act, 250 mcg/act	BN			•	•		
ALBUTEROL SULFATE HFA albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	BN				•			FLUTICASONE PROPIONATE HFA fluticasone propionate hfa inhal aero 44 mcg/act	BN			•	•		
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) Proventil hfa	GN				•			FLUTICASONE PROPIONATE HFA fluticasone propionate hfa inhal aer 110 mcg/act, 220 mcg/ act	BN			•	•		
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	GP							fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/ act Advair diskus	GN				•		
albuterol sulfate soln nebu 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	GN							ipratropium bromide inhal soln 0.02%	GP						
albuterol sulfate syrup 2 mg/5ml	GP							ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	GN						
albuterol sulfate tab 2 mg, 4 mg	GN							levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) Xopenex concentrate	GN						
ASMANEX HFA mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	BP				•			levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base	GN						
ASMANEX TWISTHALER 120 METERED DOSES mometasone furoate inhal powd 220 mcg/act (breath activated)	BP				•										
ASMANEX TWISTHALER 30 METERED DOSES mometasone	BP				•										

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>equiv), 1.25 mg/3ml (base equiv) Xopenex</b>								<b>zafirlukast tab 10 mg, 20 mg Accolate</b>	GN						
LEVALBUTEROL TARTRATE HFA levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	BN				•			<b>zileuton tab er 12hr 600 mg</b>	GN						
<b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) Singulair</b>	GP							<b>RESPIRATORY AGENTS - MISC.</b>							
<b>montelukast sodium tab 10 mg (base equiv) Singulair</b>	GP							KALYDECO ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	SN	•	•			•	
PROAIR RESPICLICK albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)	BP				•			KALYDECO ivacaftor tab 150 mg	SN	•	•			•	
QVAR REDIHALER beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	BP				•			<b>pirfenidone cap 267 mg Esbriet</b>	SP	•	•			•	
<b>roflumilast tab 250 mcg, 500 mcg Daliresp</b>	GN							<b>pirfenidone tab 267 mg, 801 mg Esbriet</b>	SP	•	•			•	
SEREVENT DISKUS salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	BP				•			<b>GASTROINTESTINAL AGENTS</b>							
SPIRIVA RESPIMAT tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	BP				•			<b>LAXATIVES</b>							
<b>terbutaline sulfate tab 2.5 mg, 5 mg</b>	GN							GAVILYTE-C peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	BP						
<b>theophylline elixir 80 mg/15ml</b>	GN							<b>lactulose solution 10 gm/15ml</b>	GN						
THEOPHYLLINE ER theophylline tab er 12hr 100 mg, 200 mg	BN							<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm Golytely</b>	GP						
<b>theophylline soln 80 mg/15ml</b>	GN							<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</b>	GN						
<b>theophylline tab er 12hr 300 mg, 450 mg</b>	GN							<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml Suprep bowel prep kit</b>	GN						
<b>theophylline tab er 24hr 400 mg, 600 mg</b>	GN							<b>ANTIDIARRHEALS</b>							
<b>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv) Spiriva handihaler</b>	GN				•			<b>diphenoxylate w/ atropine tab 2.5-0.025 mg Lomotil</b>	GP						
XOPENEX HFA levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	BN				•			<b>DIPHENOXYLATE/ATROPINE diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</b>	BN						
								<b>ULCER DRUGS</b>							
								CIMETIDINE HYDROCHLORIDE cimetidine hcl soln 300 mg/5ml	BN	•			•		
								<b>cimetidine tab 300 mg, 400 mg, 800 mg</b>	GN						
								<b>dexlansoprazole cap delayed release 30 mg, 60 mg Dexilant</b>	GN					•	
								<b>dicyclomine hcl cap 10 mg</b>	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	
dicyclomine hcl oral soln 10 mg/5ml	GN							ondansetron hcl tab 4 mg, 8 mg	GP				•			
dicyclomine hcl tab 20 mg	GP							ondansetron orally disintegrating tab 4 mg, 8 mg	GP				•			
esomeprazole magnesium cap delayed release 40 mg (base eq) Nexium	GP				•			scopolamine td patch 72hr 1 mg/3days Transderm-scop	GN							
famotidine for susp 40 mg/5ml	GN	•		•				trimethobenzamide hcl cap 300 mg	GP							
famotidine tab 40 mg Pepcid	GP							DIGESTIVE AIDS								
glycopyrrolate tab 1 mg Robinul	GP							CREON pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	BP							
glycopyrrolate tab 2 mg	GN							GASTROINTESTINAL AGENTS- MISC.								
lansoprazole cap delayed release 30 mg Prevacid	GP				•			alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) Lotronex	GN		•		•			
methscopolamine bromide tab 2.5 mg, 5 mg	GN							balsalazide disodium cap 750 mg Colazal	GN							
misoprostol tab 100 mcg, 200 mcg Cytotec	GP							calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	GN							
NIZATIDINE nizatidine cap 150 mg, 300 mg	BN							CIMZIA certolizumab pegol prefilled syringe kit 200 mg/ml	SN	•	•		•			
omeprazole cap delayed release 10 mg	GP							CIMZIA STARTER KIT certolizumab pegol prefilled syringe kit 6 x 200 mg/ml	SN	•	•		•			
omeprazole cap delayed release 20 mg, 40 mg	GP				•			DIPENTUM olsalazine sodium cap 250 mg	BN							
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) Protonix	GP				•			lactulose (encephalopathy) solution 10 gm/15ml	GP							
PRILOSEC omeprazole magnesium for delayed release susp packet 2.5 mg, 10 mg	BN			•	•			lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) Fosrenol	GN			•				
rabeprazole sodium ec tab 20 mg Aciphex	GP				•			LINZESS linaclotide cap 72 mcg, 145 mcg, 290 mcg	BP				•			
sucralfate tab 1 gm Carafate	GN							MESALAMINE DR mesalamine tab delayed release 800 mg	BN							
ANTIEMETICS								mesalamine enema 4 gm	GN							
AKYNZEO netupitant-palonosetron cap 300-0.5 mg	BN					•										
aprepitant capsule 40 mg, 80 mg, 125 mg Emend	GN					•										
dronabinol cap 2.5 mg, 5 mg, 10 mg Marinol	GN															
gransetron hcl tab 1 mg	GN					•										
ondansetron hcl oral soln 4 mg/5ml	GP					•										

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>	GN							<b>tolterodine tartrate tab 1 mg, 2 mg Detrol</b>	GN				•		
<b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) Reglan</b>	GP							<b>trospium chloride cap er 24hr 60 mg</b>	GN				•		
<b>MOVANTIK naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)</b>	BP			•				<b>trospium chloride tab 20 mg</b>	GN				•		
<b>sevelamer carbonate tab 800 mg Renvela</b>	GN							<b>VAGINAL PRODUCTS</b>							
<b>sevelamer hcl tab 800 mg Renagel</b>	GN							<b>clindamycin phosphate vaginal cream 2% Cleocin</b>	GN						
<b>sulfasalazine tab delayed release 500 mg Azulfidine en-tabs</b>	GN							<b>estradiol vaginal tab 10 mcg Vagifem</b>	GN						
<b>sulfasalazine tab 500 mg Azulfidine</b>	GP							<b>GYNAZOLE-1 butoconazole nitrate (one dose) vaginal cream 2%</b>	BN						
<b>ursodiol tab 250 mg Urso 250</b>	GN							<b>INTRAROSA prasterone vaginal insert 6.5 mg</b>	BN						
<b>ursodiol tab 500 mg Urso forte</b>	GN							<b>metronidazole vaginal gel 0.75% Metrogel-vaginal</b>	GN						
<b>GENITOURINARY AGENTS</b>								<b>PHEXXI lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%</b>	PH				•		
<b>URINARY ANTISPASMODICS</b>								<b>terconazole vaginal cream 0.4%, 0.8%</b>	GN						
<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg Urecholine</b>	GN							<b>VANDAZOLE metronidazole vaginal gel 0.75%</b>	BN						
<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv) Enablex</b>	GN			•				<b>GENITOURINARY AGENTS - MISC.</b>							
<b>fesoterodine fumarate tab er 24hr 4 mg, 8 mg Toviaz</b>	GN			•				<b>alfuzosin hcl tab er 24hr 10 mg Uroxatral</b>	GP						
<b>flavoxate hcl tab 100 mg</b>	GN							<b>CYSTAGON cysteamine bitartrate cap 50 mg, 150 mg</b>	SP	•					•
<b>MYRBETRIQ mirabegron granules for oral extended release susp 8 mg/ml</b>	BN			•	•			<b>dutasteride cap 0.5 mg Avodart</b>	GP						
<b>oxybutynin chloride solution 5 mg/5ml</b>	GP				•			<b>ELMIRON pentosan polysulfate sodium caps 100 mg</b>	BN						
<b>oxybutynin chloride tab er 24hr 5 mg, 10 mg Ditropan xl</b>	GP				•			<b>finasteride tab 5 mg Proscar</b>	GP						
<b>oxybutynin chloride tab er 24hr 15 mg</b>	GP				•			<b>potassium citrate tab er 5 meq (540 mg) Urocit-k 5</b>	GN						
<b>oxybutynin chloride tab 5 mg</b>	GP				•			<b>potassium citrate tab er 10 meq (1080 mg) Urocit-k 10</b>	GN						
<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg Detrol la</b>	GN				•			<b>potassium citrate tab er 15 meq (1620 mg) Urocit-k 15</b>	GN						
								<b>silodosin cap 4 mg, 8 mg Rapaflo</b>	GN						
								<b>sodium chloride irrigation soln 0.9%</b>	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
tamsulosin hcl cap 0.4 mg Flomax	GP							desipramine hcl tab 10 mg, 25 mg Norpramin	GN						
<b>CENTRAL NERVOUS SYSTEM DRUGS</b>															
<b>ANTIANXIETY AGENTS</b>															
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg Xanax xr	GP							desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	GN						
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg Xanax	GP							DESVENLAFAKINE ER desvenlafaxine tab er 24hr 100 mg	BN	•					
buspirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg	GP							desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) Pristiq	GN						
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	GP							doxepin hcl cap 10 mg, 25 mg	GP						
diazepam tab 2 mg, 5 mg, 10 mg Valium	GP							doxepin hcl cap 50 mg, 75 mg, 100 mg, 150 mg	GN						
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	GP							doxepin hcl conc 10 mg/ml	GP						
hydroxyzine pamoate cap 25 mg, 50 mg Vistaril	GP							duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) Cymbalta	GP						
lorazepam conc 2 mg/ml	GN							EMSAM selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	BN	•					
lorazepam tab 0.5 mg, 1 mg, 2 mg Ativan	GP							escitalopram oxalate soln 5 mg/5ml (base equiv)	GN						
meprobamate tab 400 mg	GN							escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) Lexapro	GP						
<b>ANTIDEPRESSANTS</b>															
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	GP							fluoxetine hcl cap 10 mg, 20 mg, 40 mg Prozac	GP						
amitriptyline hcl tab 150 mg	GN							fluoxetine hcl solution 20 mg/5ml	GN						
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg	GN							fluvoxamine maleate tab 25 mg	GP						
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg Wellbutrin sr	GP							fluvoxamine maleate tab 50 mg, 100 mg	GN						
bupropion hcl tab er 24hr 150 mg, 300 mg Wellbutrin xl	GP							imipramine hcl tab 10 mg, 25 mg, 50 mg Tofranil	GP						
bupropion hcl tab 75 mg, 100 mg	GP							MARPLAN isocarboxazid tab 10 mg	BN						
citalopram hydrobromide oral soln 10 mg/5ml	GN							mirtazapine tab 7.5 mg	GN						
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) Celexa	GP							mirtazapine tab 15 mg, 30 mg Remeron	GP						
clomipramine hcl cap 25 mg, 50 mg, 75 mg Anafranil	GN							mirtazapine tab 45 mg	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
NEFAZODONE HYDROCHLORIDE nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	BN							aripiprazole tab 20 mg, 30 mg Abilify	GN				•		
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg Pamelor	GP							chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	GN						
nortriptyline hcl soln 10 mg/5ml	GN							clozapine tab 25 mg Clozaril	GP				•		
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg Paxil	GP							clozapine tab 50 mg, 100 mg, 200 mg Clozaril	GN				•		
PHENELZINE SULFATE phenelzine sulfate tab 15 mg	BN							FANAPT iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	BN		•		•		
protriptyline hcl tab 5 mg, 10 mg	GN							FANAPT TITRATION PACK iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	BN		•		•		
sertraline hcl oral concentrate for solution 20 mg/ml Zoloft	GN							fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	GN						
sertraline hcl tab 25 mg, 50 mg, 100 mg Zoloft	GP							FLUPHENAZINE HYDROCHLORIDE fluphenazine hcl elixir 2.5 mg/5ml	BN						
tranylcypromine sulfate tab 10 mg Parnate	GN							haloperidol lactate oral conc 2 mg/ml	GN						
trazodone hcl tab 50 mg, 100 mg, 150 mg	GP							haloperidol tab 0.5 mg, 1 mg	GP						
trazodone hcl tab 300 mg	GN	•						haloperidol tab 2 mg, 5 mg, 10 mg, 20 mg	GN						
trimipramine maleate cap 25 mg, 50 mg, 100 mg	GN							LITHIUM CARBONATE lithium carbonate cap 150 mg, 600 mg	BN						
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) Effexor xr	GP							lithium carbonate cap 150 mg, 600 mg Lithium carbonate	GP						
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	GP							lithium carbonate cap 300 mg	GP						
vilazodone hcl tab 10 mg, 20 mg, 40 mg Viibryd	GN							lithium carbonate tab er 300 mg Lithobid	GP						
<b>ANTIPSYCHOTICS</b>								lithium carbonate tab er 450 mg	GP						
aripiprazole oral solution 1 mg/ml	GN			•				lithium carbonate tab 300 mg	GP						
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg Abilify	GP			•				loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	GN						
								Iurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg Latuda	GN			•			
								NUPLAZID pimavanserin tartrate cap 34 mg (base equivalent)	SN	•	•		•		
								NUPLAZID pimavanserin tartrate tab 10 mg (base equivalent)	SN	•	•		•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg Zyprexa	GP				•			ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg Geodon	GN				•		
olanzapine tab 20 mg Zyprexa	GN				•			<b>HYPNOTICS</b>							
paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg Invega	GN				•			BELSOMRA suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	BN		•		•		
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	GN							eszopiclone tab 1 mg, 2 mg, 3 mg Lunesta	GP				•		
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	GP							phenobarbital tab 15 mg, 30 mg, 60 mg, 100 mg	GP						
prochlorperazine suppos 25 mg	GN							ramelteon tab 8 mg Rozerem	GN				•		
quetiapine fumarate tab er 24hr 50 mg, 150 mg Seroquel xr	GP				•			temazepam cap 15 mg, 30 mg Restoril	GP						
quetiapine fumarate tab er 24hr 200 mg, 300 mg, 400 mg Seroquel xr	GN				•			zaleplon cap 5 mg, 10 mg	GP				•		
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg Seroquel	GP				•			zolpidem tartrate tab 5 mg, 10 mg Ambien	GP				•		
REXULTI brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	BN	•			•			<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>							
risperidone soln 1 mg/ml Risperdal	GN				•			amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg Adderall xr	GN						
risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg Risperdal	GP				•			amphetamine-dextroamphetamine tab 5 mg Adderall	GP						
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	GN							amphetamine-dextroamphetamine tab 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg Adderall	GN						
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	GN							armodafinil tab 50 mg Nuvigil	GP						
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	GN							armodafinil tab 150 mg, 200 mg, 250 mg Nuvigil	GN						
VRAYLAR cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	BP	•			•			atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) Strattera	GN						
								dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg Focalin xr	GN						
								dexmethylphenidate hcl tab 2.5 mg, 5 mg Focalin	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>dexmethylphenidate hcl tab 10 mg</b> Focalin	GN							BETASERON interferon beta-1b for inj kit 0.3 mg	SP	•	•		•		
<b>dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg</b> Dexedrine	GN							bupropion hcl (smoking deterrent) tab er 12hr 150 mg	PH				•		
<b>dextroamphetamine sulfate oral solution 5 mg/5ml</b> Procentra	GN							dalfampridine tab er 12hr 10 mg Ampyra	SP	•	•		•		
<b>dextroamphetamine sulfate tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg</b>	GN							dimethyl fumarate capsule delayed release 120 mg, 240 mg Tecfidera	SP	•	•		•		
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)</b> Intuniv	GP							dimethyl fumarate capsule dr starter pack 120 mg & 240 mg Tecfidera starter pack	SP	•	•		•		
<b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</b> Vyvanse	GN							disulfiram tab 250 mg, 500 mg	GN						
<b>methamphetamine hcl tab 5 mg</b> Desoxyn	GN							donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	GP						
<b>methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml</b> Methyltin	GN							donepezil hydrochloride tab 5 mg, 10 mg Aricept	GP						
<b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg</b> Concerta	GN							donepezil hydrochloride tab 23 mg Aricept	GN						
<b>methylphenidate hcl tab 5 mg, 10 mg</b> Ritalin	GP							ERGOLOID MESYLATES ergoloid mesylates tab 1 mg	BN						
<b>methylphenidate hcl tab 20 mg</b> Ritalin	GN							fingolimod hcl cap 0.5 mg (base equiv) Gilenya	SP	•	•		•		
<b>METHYLPHENIDATE HYDROCHLORIDE ER</b> methylphenidate hcl tab er 24hr 18 mg, 27 mg, 36 mg, 54 mg	BN	•						galantamine hydrobromide tab 4 mg, 8 mg, 12 mg Razadyne	GN						
<b>modafinil tab 100 mg, 200 mg</b> Provigil	GN							GILENYA fingolimod hcl cap 0.25 mg (base equiv)	SP	•	•		•		
<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>								<b>glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml</b> Copaxone	SP	•	•		•		
<b>acamprosate calcium tab delayed release 333 mg</b>	GN							<b>memantine hcl oral solution 2 mg/ml</b>	GN		•		•		
AVONEX interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	SN	•	•		•			<b>memantine hcl tab 5 mg, 10 mg</b> Namenda	GP						
AVONEX PEN interferon beta-1a im auto-injector kit 30 mcg/0.5ml	SN	•	•		•			<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</b> Namenda titration pack	GN						
								<b>nicotine polacrilex gum 2 mg, 4 mg</b>	PH				•		
								<b>nicotine polacrilex lozenge 2 mg, 4 mg</b>	PH				•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	PH					•		butalbital-acetaminophen-caffeine tab 50-325-40 mg Esgic	GP						
NICOTROL INHALER nicotine inhaler system 10 mg (4 mg delivered)	PH					•		butalbital-aspirin-caffeine cap 50-325-40 mg Fiorinal	GN						
NICOTROL NS nicotine nasal spray 10 mg/ml (0.5 mg/spray)	PH					•		diflunisal tab 500 mg	GN						
PIMOZIDE pimozide tab 1 mg, 2 mg	BN							ANALGESICS - NARCOTIC							
REBIF interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	SP	•	•		•			acetaminophen w/ codeine tab 300-15 mg Tylenol/codeine	GP				•		
REBIF REBIDOSE interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	SP	•	•		•			acetaminophen w/ codeine tab 300-30 mg Tylenol/codeine #3	GP				•		
REBIF REBIDOSE TITRATION interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	SP	•	•		•			acetaminophen w/ codeine tab 300-60 mg Tylenol/codeine #4	GN				•		
REBIF TITRATION PACK interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	SP	•	•		•			ACETAMINOPHEN/ CODEINE acetaminophen w/ codeine soln 120-12 mg/5ml	BN				•		
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	GN							buprenorphine hcl sl tab 8 mg (base equiv)	GP						
SAVELLA milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	BP			•	•			buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) Suboxone	GP						
teriflunomide tab 7 mg, 14 mg Aubagio	SP	•	•		•			buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	GP						
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	PH					•		buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr Butrans	GN		•		•		
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	PH					•		butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	GN						
<b>ANALGESICS AND ANESTHETICS</b>								butorphanol tartrate nasal soln 10 mg/ml	GN						
<b>ANALGESICS - NON-NARCOTIC</b>								CODEINE SULFATE codeine sulfate tab 15 mg, 60 mg	BN				•		
aspirin chew tab 81 mg	PH					•		codeine sulfate tab 30 mg Codeine sulfate	GN				•		
aspirin tab delayed release 81 mg	PH					•		fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg Actiq	GN		•		•		
butalbital-acetaminophen-caffeine cap 50-325-40 mg	GN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr Duragesic	GN		•		•			morphine sulfate tab 15 mg Morphine sulfate	GP				•		
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	GN				•			morphine sulfate tab 30 mg Morphine sulfate	GN				•		
hydrocodone-acetaminophen tab 10-325 mg	GP				•			NUCYNTA tapentadol hcl tab 50 mg, 75 mg, 100 mg	BN				•		
hydrocodone-acetaminophen tab 5-325 mg, 7.5-325 mg Norco	GP				•			NUCYNTA ER tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	BN		•		•		
hydrocodone-ibuprofen tab 7.5-200 mg	GN				•			oxycodone hcl conc 100 mg/5ml (20 mg/ml)	GN				•		
HYDROCODONE/ IBUPROFEN hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	BN				•			OXYCODONE HCL ER oxycodone hcl tab er 12hr deter 10 mg, 20 mg, 40 mg, 80 mg	BN		•		•		
hydromorphone hcl liqd 1 mg/ml Dilaudid	GN				•			oxycodone hcl soln 5 mg/5ml	GN				•		
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	GN		•		•			oxycodone hcl tab 5 mg Roxicodone	GP				•		
hydromorphone hcl tab 2 mg, 4 mg Dilaudid	GP				•			oxycodone hcl tab 10 mg	GP				•		
hydromorphone hcl tab 8 mg Dilaudid	GN				•			oxycodone hcl tab 15 mg, 30 mg Roxicodone	GN				•		
levorphanol tartrate tab 2 mg	GN				•			oxycodone hcl tab 20 mg	GN				•		
meperidine hcl tab 50 mg	GN				•			oxycodone w/ acetaminophen tab 2.5-325 mg, 7.5-325 mg, 10-325 mg Percocet	GN				•		
methadone hcl soln 5 mg/5ml, 10 mg/5ml Methadone hcl	GN		•		•			oxycodone w/ acetaminophen tab 5-325 mg Percocet	GP				•		
methadone hcl tab 5 mg Dolophine	GP		•		•			OXYCONTIN oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	BN		•		•		
methadone hcl tab 10 mg	GN		•		•			OXYMORPHONE HYDROCHLORIDE	BN		•		•		
MORPHINE SULFATE morphine sulfate oral soln 20 mg/5ml	BN				•			ER oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg							
morphine sulfate oral soln 10 mg/5ml	GP				•			TRAMADOL HCL ER tramadol hcl tab er 24hr biphasic release 100 mg, 200 mg, 300 mg	BN		•		•		
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	GN				•			tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	GN		•		•		
morphine sulfate tab er 15 mg Ms contin	GP				•			tramadol hcl tab 50 mg Ultram	GP				•		
morphine sulfate tab er 30 mg, 60 mg, 100 mg, 200 mg Ms contin	GN				•			tramadol-acetaminophen tab 37.5-325 mg	GP				•		

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<b>ANALGESICS - ANTI-INFLAMMATORY</b>															
ACTEMRA tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	SP	•	•		•			HUMIRA PEN-CD/UC/HS STARTER adalimumab pen-injector kit 80 mg/0.8ml	SP	•	•		•		
ACTEMRA ACTPEN tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	SP	•	•		•			HUMIRA PEN-PS/UV STARTER adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml	SP	•	•		•		
<b>celecoxib cap 50 mg, 100 mg, 200 mg Celebrex</b>	GP							<b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>	GP						
<b>celecoxib cap 400 mg Celebrex</b>	GN							<b>indomethacin cap 25 mg, 50 mg</b>	GP						
<b>diclofenac sodium tab delayed release 25 mg</b>	GN							<b>ketorolac tromethamine tab 10 mg</b>	GP						
<b>diclofenac sodium tab delayed release 50 mg, 75 mg</b>	GP							KEVZARA sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	SN	•	•		•		
<b>diclofenac sodium tab er 24hr 100 mg</b>	GN							KEVZARA sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	SN	•	•		•		
ENBREL etanercept subcutaneous inj 25 mg/0.5ml	SP	•	•		•			<b>leflunomide tab 10 mg, 20 mg Arava</b>	GN						
ENBREL etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	SP	•	•		•			<b>MECLOFENAMATE SODIUM meclofenamate sodium cap 50 mg, 100 mg</b>	BN				•		
ENBREL MINI etanercept subcutaneous solution cartridge 50 mg/ml	SP	•	•		•			<b>mefenamic acid cap 250 mg</b>	GN						
ENBREL SURECLICK etanercept subcutaneous solution auto-injector 50 mg/ml	SP	•	•		•			<b>meloxicam tab 7.5 mg, 15 mg Mobic</b>	GP						
<b>etodolac cap 200 mg, 300 mg</b>	GN							<b>nabumetone tab 500 mg, 750 mg</b>	GP						
<b>etodolac tab 400 mg Lodine</b>	GN							<b>naproxen susp 125 mg/5ml Naprosyn</b>	GN						
<b>etodolac tab 500 mg</b>	GN							<b>naproxen tab ec 375 mg, 500 mg Ec-naprosyn</b>	GN						
FLURBIPROFEN flurbiprofen tab 50 mg	BN			•				<b>naproxen tab 250 mg, 375 mg, 500 mg</b>	GP						
<b>flurbiprofen tab 100 mg</b>	GN							OTEZLA apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	SP	•	•		•		
HUMIRA adalimumab prefilled syringe kit 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	SP	•	•		•			OTEZLA apremilast tab 20 mg, 30 mg	SP	•	•		•		
HUMIRA PEN adalimumab pen-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	SP	•	•		•			<b>oxaprozin tab 600 mg Daypro</b>	GN						
								<b>piroxicam cap 10 mg</b>	GP						
								<b>piroxicam cap 20 mg Feldene</b>	GN						

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RINVOQ upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	SP	•	•		•			rizatriptan benzoate tab 5 mg (base equivalent)	GP				•		
RINVOQ LQ upadacitinib oral soln 1 mg/ml	SP	•	•		•			rizatriptan benzoate tab 10 mg (base equivalent) Maxalt	GP				•		
SIMPONI golimumab subcutaneous soln auto-injector 50 mg/0.5ml	SN	•	•		•			sumatriptan nasal spray 5 mg/act, 20 mg/act Imitrex	GN				•		
SIMPONI golimumab subcutaneous soln auto-injector 100 mg/ml	SP	•	•		•			sumatriptan succinate inj 6 mg/0.5ml Imitrex	GN				•		
SIMPONI golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	SN	•	•		•			SUMATRIPTAN SUCCINATE REFILL sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	BN			•	•		
SIMPONI golimumab subcutaneous soln prefilled syringe 100 mg/ml	SP	•	•		•			sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml Imitrex statdose system	GN				•		
<b>sulindac tab 150 mg, 200 mg</b>	GP							sumatriptan succinate tab 25 mg, 50 mg, 100 mg Imitrex	GP				•		
XELJANZ tofacitinib citrate oral soln 1 mg/ml (base equivalent)	SP	•	•		•			zolmitriptan tab 2.5 mg, 5 mg Zomig	GN				•		
XELJANZ tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	SP	•	•		•			<b>GOUT AGENTS</b>							
XELJANZ XR tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	SP	•	•		•			allopurinol tab 100 mg, 300 mg Zyloprim	GP						
<b>MIGRAINE PRODUCTS</b>															
almotriptan malate tab 6.25 mg, 12.5 mg	GN			•	•			colchicine tab 0.6 mg Colcrys	GN						
dihydroergotamine mesylate nasal spray 4 mg/ml Migranal	GN		•		•			colchicine w/ probenecid tab 0.5-500 mg	GN						
eletiptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) Relpax	GN				•			febuxostat tab 40 mg, 80 mg Uloric	GN						
frovatriptan succinate tab 2.5 mg (base equivalent) Frova	GN			•	•			probenecid tab 500 mg	GN						
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) Amerge	GN				•			<b>NEUROMUSCULAR DRUGS</b>							
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	GP				•			APTIOM eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	BN						
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) Maxalt-mlt	GP				•			BRIVIACT brivaracetam oral soln 10 mg/ml	BN						
								BRIVIACT brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	BN						
								carbamazepine chew tab 100 mg	GN						
								carbamazepine susp 100 mg/5ml Tegretol	GN						

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carbamazepine tab 200 mg Tegretol	GN							levetiracetam oral soln 100 mg/ml Keppra	GN						
clonazepam tab 0.5 mg, 1 mg, 2 mg Klonopin	GP							levetiracetam tab er 24hr 500 mg, 750 mg Keppra xr	GN						
DIAZEPAM RECTAL GEL diazepam rectal gel delivery system 2.5 mg	BN							levetiracetam tab 250 mg, 500 mg Keppra	GP						
diazepam rectal gel delivery system 10 mg, 20 mg Diastat acudial	GN							levetiracetam tab 750 mg, 1000 mg Keppra	GN						
DILANTIN phenytoin sodium extended cap 30 mg	BN							methsuximide cap 300 mg Celontin	GN						
divalproex sodium cap delayed release sprinkle 125 mg Depakote sprinkles	GN							oxcarbazepine susp 300 mg/5ml (60 mg/ml) Trileptal	GN						
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg Depakote	GP							oxcarbazepine tab 150 mg Trileptal	GP						
divalproex sodium tab er 24 hr 250 mg, 500 mg Depakote er	GN							oxcarbazepine tab 300 mg, 600 mg Trileptal	GN						
EPIDIOLEX cannabidiol soln 100 mg/ml	SP	•	•					phenytoin chew tab 50 mg Dilantin infatabs	GN						
ethosuximide cap 250 mg Zarontin	GN							phenytoin sodium extended cap 100 mg Dilantin	GN						
ethosuximide soln 250 mg/5ml Zarontin	GN							phenytoin susp 125 mg/5ml Dilantin-125	GN						
felbamate susp 600 mg/5ml Felbatol	GN							pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg Lyrica	GP						•
felbamate tab 400 mg, 600 mg Felbatol	GN							pregabalin soln 20 mg/ml Lyrica	GN						•
gabapentin cap 100 mg, 300 mg, 400 mg Neurontin	GP							primidone tab 50 mg Mysoline	GP						
gabapentin oral soln 250 mg/5ml Neurontin	GN							primidone tab 250 mg Mysoline	GN						
gabapentin tab 600 mg, 800 mg Neurontin	GP							rufinamide susp 40 mg/ml Banzel	GN						
lamotrigine tab chewable dispersible 5 mg, 25 mg Lamictal chewable dispersible	GN							rufinamide tab 200 mg, 400 mg Banzel	GN						
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg Lamictal	GP							tiagabine hcl tab 2 mg, 4 mg Gabitril	GN						
								topiramate sprinkle cap 15 mg, 25 mg Topamax sprinkle	GN						
								topiramate tab 25 mg, 50 mg, 100 mg, 200 mg Topamax	GP						
								valproate sodium oral soln 250 mg/5ml (base equiv)	GN						
								zonisamide cap 25 mg Zonegran	GP						

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution								
<b>zonisamide cap 50 mg</b>	GP							<b>riluzole tab 50 mg Rilutek</b>	GN														
<b>zonisamide cap 100 mg Zonegran</b>	GN							<b>MUSCULOSKELETAL THERAPY AGENTS</b>															
<b>ANTIPARKINSON AGENTS</b>																							
<b>amantadine hcl cap 100 mg</b>	GN							<b>baclofen tab 5 mg</b>	GN						•								
<b>amantadine hcl soln 50 mg/5ml</b>	GN							<b>baclofen tab 10 mg, 20 mg</b>	GP						•								
<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>	GP							<b>carisoprodol tab 250 mg Soma</b>	GN						•								
<b>bromocriptine mesylate cap 5 mg (base equivalent) Parlodel</b>	GN							<b>carisoprodol tab 350 mg Soma</b>	GP						•								
<b>bromocriptine mesylate tab 2.5 mg (base equivalent) Parlodel</b>	GN							<b>chlorzoxazone tab 500 mg</b>	GN						•								
<b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg Sinemet cr</b>	GN							<b>cyclobenzaprine hcl tab 5 mg, 10 mg</b>	GP						•								
<b>carbidopa &amp; levodopa tab 10-100 mg Sinemet</b>	GP							<b>dantrolene sodium cap 25 mg, 50 mg Dantrium</b>	GN						•								
<b>carbidopa &amp; levodopa tab 25-100 mg, 25-250 mg Sinemet</b>	GN							<b>dantrolene sodium cap 100 mg</b>	GN						•								
<b>carbidopa tab 25 mg Lodosyn</b>	GN							<b>metaxalone tab 800 mg Skelaxin</b>	GN		•				•								
<b>entacapone tab 200 mg Comtan</b>	GN							<b>methocarbamol tab 500 mg</b>	GP						•								
NEUPRO rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	BN							<b>methocarbamol tab 750 mg Robaxin-750</b>	GP						•								
<b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg Mirapex</b>	GP							<b>orphenadrine citrate tab er 12hr 100 mg</b>	GN						•								
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) Azilect</b>	GN							<b>tizanidine hcl tab 2 mg (base equivalent)</b>	GP						•								
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b>	GP							<b>tizanidine hcl tab 4 mg (base equivalent) Zanaflex</b>	GP						•								
<b>selegiline hcl cap 5 mg</b>	GN							<b>ANTIMYASTHENIC AGENTS</b>															
<b>tolcapone tab 100 mg Tasmar</b>	GN							<b>pyridostigmine bromide tab 60 mg Mestinon</b>	GN														
TRIHEXYPHENIDYL HCL trihexyphenidyl hcl oral soln 0.4 mg/ml	BN							<b>NUTRITIONAL PRODUCTS</b>															
<b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>	GP							<b>VITAMINS</b>															
<b>NEUROMUSCULAR AGENTS</b>																							
<b>cholecalciferol oral liquid 10 mcg/ml (400 unit/ml)</b>								<b>cholecalciferol tab 10 mcg (400 unit)</b>	PH						•								
<b>ergocalciferol cap 1.25 mg (50000 unit) Drisdol</b>								<b>ergocalciferol cap 1.25 mg (50000 unit) Drisdol</b>	GP						•								
<b>phytonadione tab 5 mg Mephyton</b>								<b>phytonadione tab 5 mg Mephyton</b>	GN														
<b>MULTIVITAMINS</b>																							
<b>C-NATE DHA prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg</b>								<b>C-NATE DHA prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg</b>	BN														
<b>CITRANATAL ASSURE prenatal w/o a w/fecbn-fegl-dss-fa tab &amp; dha cap 300 mg pack</b>								<b>CITRANATAL ASSURE prenatal w/o a w/fecbn-fegl-dss-fa tab &amp; dha cap 300 mg pack</b>	BN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
CITRANATAL B-CALM prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	BN							NIVA-PLUS prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN						
CITRANATAL HARMONY prenat w/o a w/fe fum-fe cbn-dss-fa-dha cap 27-1-260 mg	BN							OB COMPLETE prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	BN						
CITRANATAL MEDLEY prenat w/o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	BN							OB COMPLETE ONE prenatal w/o a w/fecbn-fe asp glyc-fa-fish cap 50-1-476 mg	BN						
CITRANATAL 90 DHA prenat w/o a w/fecbn-fegl-dss-fa tab 90 &dha cap 300mg pak	BN							OB COMPLETE PETITE prenat w/o a w/fecbn-feaspglyc-fa-omega cap 35-5-1-200 mg	BN						
COMPLETE NATAL DHA prenat fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	BN							OB COMPLETE PREMIER prenatal vit w/ fe cbn-fe asp glyc-fa tab 30-20-1 mg	BN						
COMPLETENATE prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	BN							OB COMPLETE/DHA prenat w/ iron cbn-fe asp glyc-fa-omega cap 30-10-1-200 mg	BN						
DERMACINRX PRETRATE prenatal multivitamins & minerals w/ iron & fa tab 1 mg	BN							PNV-DHA prenat w/o a w/ fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	BN						
ELITE-OB prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	BN							PNV-DHA+DOCUSATE prenatal w/o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	BN						
ENBRACE HR prenatal vit w/ fe gly cys-fa-omega 3 fatty acids cap	BN							PNV-OMEGA prenatal w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	BN						
FOLIVANE-OB prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	BN							PNV-SELECT prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	BN						
M-NATAL PLUS prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN							PREMESISRX prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	BN						
NATAL PNV prenatal vit w/ fe gluconate-fa tab 6-0.5 mg	BN							PRENAISSANCE prenatal w/o vit a w/ fe fum-dss-fa-dha cap 29-1.25-325 mg	BN						
NATALVIT prenatal vit w/ fe fumarate-fa tab 75-1 mg	BN							PRENAISSANCE PLUS prenatal w/o a w/fe cbn-dss-fa-dha cap 28-1-250 mg	BN						
NESTABS prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	BN							PRENATAL prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN						
NESTABS DHA prenat w/o a w/ fe bisglyc-fa tab 32-1 mg & omega cap pack	BN							PRENATAL PLUS prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN						
NESTABS ONE prenat w/o a w/ fecbn-bisg-methylf-dha cap 38-1-225 mg	BN							PRENATAL PLUS VITAMIN AND MINERAL prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN						

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PRENATE prenat mv & min w/ l-methylfolate-fa chew tab 0.6-0.4 mg	BN							SELECT-OB prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	BN						
PRENATE AM prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	BN							SELECT-OB+DHA prenatal mv w/fe poly-fa chw 29-1 mg & dha cap 250 mg pak	BN						
PRENATE DHA prenatal w/o a w/ feaspg-methfol-fa-dha cap 18-0.6-0.4-300 mg	BN							TARON-C DHA prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	BN						
PRENATE ELITE prenatal w/ fe asp gly-l methylfol-fa tab 20-0.6-0.4 mg	BN							THRIVITE RX prenatal vit w/ iron carbonyl-fa tab 29-1 mg	BN						
PRENATE ENHANCE prenatal w/o a w/fefum-methfol-fa-dha cap 28-0.6-0.4-400 mg	BN							TRICARE prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN						
PRENATE ESSENTIAL prenatal w/o a w/feaspg-methfol-fa-dha cap 18-0.6-0.4-300 mg	BN							TRINATAL RX 1 prenatal vit w/ fe fumarate-fa tab 60-1 mg	BN						
PRENATE PIXIE prenatal w/o a w/feaspg-methfol-fa-dha cap 10-0.6-0.4-200 mg	BN							TRISTART DHA prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	BN						
PRENATE RESTORE prenatal w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-400 mg	BN							VINATE DHA RF prenatal w/o a w/ fefum-methylfol-omegas cap 27-1.13 mg	BN						
PRENATOL-M prenatal vit w/ fe fumarate-fa tab 27-1.2 mg	BN							VINATE II prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	BN						
PRENATRIX prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN	•						VINATE ONE prenatal vit w/ fe fumarate-fa tab 60-1 mg	BN						
PRENATRYL prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN	•						VITAFOL FE+ prenatal w/fe poly-methylfol-fa-dha cap 90-0.6-0.4-200 mg	BN						
PRIMACARE prenatal w/o a w/ feaspg-methylf-fa-omeg cap 30-0.75-0.25-470mg	BN							VITAFOL GUMMIES prenatal vit w/ fe phos-fa-omega chew tab 3.33-0.333-34.8 mg	BN						
RELNATE DHA prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	BN							VITAFOL STRIPS prenatal w/ b6-b12-cholecalciferol-folic acid film 1 mg	BN						
SE-NATAL 19 prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	BN							VITAFOL ULTRA prenatal w/fe poly-methylfol-fa-dha cap 29-0.6-0.4-200 mg	BN						
SE-NATAL 19 prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	BN							VITAFOL-NANO prenatal w/o a w/ fefum-l methylfol-fa tab 18-0.6-0.4 mg	BN						
SELECT-OB prenatal w/ fepolycmplx-methylfol-fa chew tab 29-0.6-0.4 mg	BN							VITAFOL-OB prenatal vit w/ fe fumarate-fa tab 65-1 mg	BN						

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VITAFOL-OB+DHA prenatal mv w/ fe fum-fa tab 65-1 mg & dha cap 250 mg pack	BN							<b>potassium chloride powder packet 20 meq</b>	GN							
VITAFOL-ONE prenatal mv w/ fe polysac cmplx-fa-dha cap 29-1-200 mg	BN							<b>potassium chloride tab er 8 meq (600 mg)</b>	GP							
VITAMEDMD ONE RX/ QUATREFOLIC prenatal w/o a w/fefum-methfol-fa-dha cap 30-0.6-0.4-200 mg	BN							<b>potassium chloride tab er 10 meq, 20 meq (1500 mg) K-tab</b>	GP							
VITAPEARL prenatal w/oa w/ fefum-na fered-fa-dha cap er 30-1.4-200 mg	BN							SODIUM FLUORIDE sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	PH					•		
VIVA DHA prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	BN							<b>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)</b>	PH					•		
WESCAP-C DHA prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	BN							<b>HEMATOLOGICAL AGENTS</b>								
WESCAP-PN DHA prenatal w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	BN							<b>HEMATOPOIETIC AGENTS</b>								
WESNATAL DHA COMPLETE prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	BN							ARANESP ALBUMIN FREE darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	SP	•	•					
WESNATE DHA prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	BN							<b>cyanocobalamin inj 1000 mcg/ml</b>	GP							
WESTAB PLUS prenatal vit w/ fe fumarate-fa tab 27-1 mg	BN							<b>folic acid tab 400 mcg</b>	PH						•	
WESTGEL DHA prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	BN							<b>folic acid tab 1 mg</b>	GP							
<b>MINERALS and ELECTROLYTES</b>								PROCRT epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	SP	•	•					
<b>potassium chloride cap er 8 meq, 10 meq</b>	GP							ZARXIO filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	SP	•	•					
POTASSIUM CHLORIDE ER potassium chloride tab er 8 meq (600 mg)	BN							<b>ANTICOAGULANTS</b>								
<b>potassium chloride microencapsulated crys er tab 10 meq, 20 meq</b>	GP							ELIQUIS apixaban tab 2.5 mg, 5 mg	BP							
								ELIQUIS STARTER PACK apixaban tab starter pack 5 mg	BP							
								<b>enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml Lovenox</b>	GN							

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<b>enoxaparin sodium inj 300 mg/3ml Lovenox</b>	GN							<b>OPHTHALMIC AGENTS</b>							
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml Arixtra</b>	GN							ALOCRIL nedocromil sodium ophth soln 2%	BN			•			
<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg Coumadin</b>	GP							ALOMIDE lodoxamide tromethamine ophth soln 0.1%	BN						
<b>XARELTO rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg</b>	BP							APRACLONIDINE apraclonidine hcl ophth soln 0.5% (base equivalent)	BN						
<b>XARELTO STARTER PACK rivaroxaban tab starter therapy pack 15 mg &amp; 20 mg</b>	BP							AZASITE azithromycin ophth soln 1%	BN						
<b>HEMOSTATICS</b>								<b>azelastine hcl ophth soln 0.05%</b>	GP						
<b>tranexamic acid tab 650 mg Lysteda</b>	GN							BACITRACIN bacitracin ophth oint 500 unit/gm	BN						
<b>HEMATOLOGICAL AGENTS - MISC.</b>								<b>bacitracin-polymyxin b ophth oint</b>	GP						
<b>aspirin-dipyridamole cap er 12hr 25-200 mg Aggrenox</b>	GN							<b>bacitracin-polymyxin-neomycin-hc ophth oint 1%</b>	GN						
<b>BERINERT c1 esterase inhibitor (human) for iv inj kit 500 unit</b>	SN	•	•		•			<b>bepotastine besilate ophth soln 1.5% Bepreve</b>	GN						
<b>BRILINTA ticagrelor tab 60 mg, 90 mg</b>	BP							BESIVANCE besifloxacin hcl ophth susp 0.6% (base equiv)	BN						
<b>cilostazol tab 50 mg, 100 mg</b>	GP							BETAXOLOL HCL betaxolol hcl ophth soln 0.5%	BN						
<b>CINRYZE c1 esterase inhibitor (human) for iv inj 500 unit</b>	SN	•	•		•			<b>brimonidine tartrate ophth soln 0.15% Alphagan p</b>	GN						
<b>clopidogrel bisulfate tab 75 mg (base equiv) Plavix</b>	GP							<b>brimonidine tartrate ophth soln 0.2%</b>	GP						
<b>clopidogrel bisulfate tab 300 mg (base equiv)</b>	GN							<b>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% Combigan</b>	GN						
<b>dipyridamole tab 25 mg, 50 mg, 75 mg</b>	GN							<b>brinzolamide ophth susp 1% Azopt</b>	GN						
<b>KOGENATE FS antihemophilic factor recomb (rviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit</b>	SP	•	•					<b>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</b>	GN						
<b>pentoxifylline tab er 400 mg</b>	GN							<b>CARTEOLOL HCL carteolol hcl ophth soln 1%</b>	BN						
<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) Effient</b>	GN							<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent) Ciloxan</b>	GP						
<b>TOPICAL PRODUCTS</b>								<b>CROMOLYN SODIUM cromolyn sodium ophth soln 4%</b>	BN						

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cyclopentolate hcl ophth soln 1% Cyclogyl	GP							LOTEMAX loteprednol etabonate ophth oint 0.5%	BN						
cyclosporine (ophth) emulsion 0.05% Restasis multidose	GN	•		•				loteprednol etabonate ophth gel 0.5% Lotemax	GN						
DEXAMETHASONE SODIUM PHOSPHATE dexamethasone sodium phosphate ophth soln 0.1%	BN							loteprednol etabonate ophth susp 0.5% Lotemax	GN						
diclofenac sodium ophth soln 0.1%	GP							LUMIGAN bimatoprost ophth soln 0.01%	BP						
diluprednate ophth emulsion 0.05% Durezol	GN							moxifloxacin hcl ophth soln 0.5% (base equiv) Vigamox	GN						
dorzolamide hcl ophth soln 2% Trusopt	GP							NATACYN natamycin ophth susp 5%	BN						
dorzolamide hcl-timolol maleate ophth soln 2-0.5% Cosopt	GP							neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	GN						
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% Cosopt pf	GN							neomycin-polymyxin-dexamethasone ophth oint 0.1% Maxitrol	GP						
epinastine hcl ophth soln 0.05%	GN							neomycin-polymyxin-dexamethasone ophth susp 0.1% Maxitrol	GP						
ERYTHROMYCIN erythromycin ophth oint 5 mg/gm	BP							NEOMYCIN/POLYMYXIN/HYDROCORTISONE neomycin-polymyxin-hc ophth susp	BN						
erythromycin ophth oint 5 mg/gm	GP							NEVANAC nepafenac ophth susp 0.1%	BN						
fluorometholone ophth susp 0.1% Fml liquifilm	GN							ofloxacin ophth soln 0.3% Ocuflox	GP						•
FLURBIPROFEN SODIUM flurbiprofen sodium ophth soln 0.03%	BP							PHOSPHOLINE IODIDE echothiopate iodide ophth for soln 0.125%	BP						
gatifloxacin ophth soln 0.5% Zymaxid	GN							pilocarpine hcl ophth soln 1%, 2%, 4% Isotox carpine	GN						
gentamicin sulfate ophth soln 0.3%	GP							polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% Polytrim	GP						
ketorolac tromethamine ophth soln 0.4% Acular ls	GN							PREDNISOLONE ACETATE prednisolone acetate ophth susp 1%	BN						
ketorolac tromethamine ophth soln 0.5% Acular	GP							SIMBRINZA brinzolamide-brimonidine tartrate ophth susp 1-0.2%	BP						
latanoprost ophth soln 0.005% Xalatan	GP				•										
LEVOBUNOLOL HCL levobunolol hcl ophth soln 0.5%	BP														

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<b>sulfacetamide sodium ophth soln 10% Bleph-10</b>	GN							<b>neomycin-polymyxin-hc otic soln 1%</b>	GN						
SULFACETAMIDE SODIUM/ PREDNISOLONE SODIUM PHOSPHATE sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	BN							<b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</b>	GN						
<b>tafluprost preservative free (pf) ophth soln 0.0015% Zioptan</b>	GN			•				<b>ofloxacin otic soln 0.3% Floxin otic</b>	GN						
<b>timolol maleate ophth gel forming soln 0.25%, 0.5% Timoptic-xe</b>	GN							<b>MOUTH/THROAT/DENTAL AGENTS</b>							
<b>timolol maleate ophth soln 0.25%, 0.5% Timoptic</b>	GP							<b>cevimeline hcl cap 30 mg Evoxac</b>	GN						
<b>tobramycin ophth soln 0.3% Tobrex</b>	GP							<b>chlorhexidine gluconate soln 0.12% Peridex</b>	GP						
<b>tobramycin-dexamethasone ophth susp 0.3-0.1% TobraDex</b>	GN							<b>clotrimazole troche 10 mg</b>	GN						
<b>travoprost ophth soln 0.004% (benzalkonium free) (bak free) Travatan z</b>	GN		•	•				<b>lidocaine hcl viscous soln 2%</b>	GP						
TRIFLURIDINE trifluridine ophth soln 1%	BN							<b>nystatin susp 100000 unit/ml NYSTATIN</b>	GP						
ZIRGAN ganciclovir ophth gel 0.15%	BN							<b>pilocarpine hcl tab 5 mg, 7.5 mg Salagen</b>	GN						
<b>OTIC AGENTS</b>															
<b>acetic acid otic soln 2%</b>	GN							<b>sodium fluoride cream 1.1% Prevident 5000 plus</b>	GP						
CIPRO HC ciprofloxacin-hydrocortisone otic susp 0.2-1%	BN							<b>sodium fluoride gel 1.1% (0.5% f) Prevident fluoride</b>	GP						
CIPROFLOXACIN ciprofloxacin hcl otic soln 0.2% (base equivalent)	BN							<b>sodium fluoride paste 1.1% Prevident 5000 boost</b>	GP						
<b>ciprofloxacin-dexamethasone otic susp 0.3-0.1% Ciprodex</b>	GN							<b>sodium fluoride rinse 0.2%</b>	GP						
CORTISPORIN-TC neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	BN							<b>sodium fluoride-potassium nitrate gel 1.1-5% Prevident 5000 sensi</b>	GP						
<b>fluocinolone acetonide (otic) oil 0.01% Dermotic</b>	GN							<b>triamcinolone acetonide dental paste 0.1%</b>	GN						
<b>hydrocortisone w/ acetic acid otic soln 1-2% Hydrocortisone/ acetic acid</b>	GN							<b>ANORECTAL AGENTS</b>							
								<b>budesonide rectal foam 2 mg/ act Uceris</b>	GN						
								<b>hydrocortisone enema 100 mg/60ml Cortenema</b>	GN						
								<b>hydrocortisone perianal cream 1% Proctocort</b>	GN						
								<b>hydrocortisone perianal cream 2.5% Anusol-hc</b>	GN						
								<b>nitroglycerin oint 0.4% Rectiv</b>	GN						
								<b>DERMATOLOGICALS</b>							

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acitretin cap 10 mg, 25 mg Soriatane	GN							brimonidine tartrate gel 0.33% (base equivalent) Mirvaso	GN						
acitretin cap 17.5 mg	GN							CALCIPOTRIENE calcipotriene soln 0.005% (50 mcg/ml)	BN						
acyclovir oint 5% Zovirax	GN							calcipotriene oint 0.005%	GN						
adapalene gel 0.3% Differin	GN	•						CALCITRIOL calcitriol oint 3 mcg/ gm	BN						
ADBRY tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	SP	•	•		•			ciclopirox olamine cream 0.77% (base equiv) Loprox	GN						
ADBRY tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	SP	•	•		•			ciclopirox olamine susp 0.77% (base equiv) Loprox	GN						
alclometasone dipropionate cream 0.05%	GN				•			ciclopirox shampoo 1% Loprox shampoo	GN						
alclometasone dipropionate oint 0.05%	GN				•			ciclopirox solution 8% Penlac Nail Lacquer	GN	•	•				
azelaic acid gel 15% Finacea	GN							clindamycin phosphate lotion 1% Cleocin-t	GN						
BETAMETHASONE DIPROPIONATE AUGMENTED betamethasone dipropionate augmented gel 0.05%	BN			•	•			clindamycin phosphate soln 1%	GN						
betamethasone dipropionate augmented cream 0.05% Diprolene af	GP				•			clindamycin phosphate swab 1%	GN						
betamethasone dipropionate augmented lotion 0.05%	GN				•			clobetasol propionate cream 0.05% Temovate	GN						•
betamethasone dipropionate augmented oint 0.05% Diprolene	GN				•			clobetasol propionate emollient base cream 0.05%	GN						•
betamethasone dipropionate cream 0.05%	GN				•			clobetasol propionate oint 0.05% Temovate	GN						•
betamethasone dipropionate lotion 0.05%	GN				•			clobetasol propionate soln 0.05%	GN						•
betamethasone dipropionate oint 0.05%	GN				•			clocortolone pivalate cream 0.1% Cloderm	GN						•
betamethasone valerate cream 0.1% (base equivalent)	GN				•			clotrimazole w/ betamethasone cream 1-0.05%	GP						
betamethasone valerate lotion 0.1% (base equivalent)	GN				•			CROTAN crotamiton lotion 10%	BN						
betamethasone valerate oint 0.1% (base equivalent)	GN				•			desonide cream 0.05% Desowen	GN						•
								desonide lotion 0.05%	GN						•
								desonide oint 0.05%	GN						•
								desoximetasone cream 0.05%, 0.25% Topicort	GN						•
								desoximetasone gel 0.05% Topicort	GN						•

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<b>desoximetasone oint 0.05%, 0.25% Topicort</b>	GN				•			<b>FLURANDRENOLIDE flurandrenolide lotion 0.05%</b>	BN				•		
<b>diclofenac sodium gel 1% (1.16% diethylamine equiv)</b>	GP				•			<b>fluticasone propionate cream 0.05%</b>	GP				•		
<b>DIFLORASONE DIACETATE diflorasone diacetate cream 0.05%</b>	BN			•	•			<b>fluticasone propionate oint 0.005%</b>	GN				•		
<b>diflorasone diacetate oint 0.05%</b>	GN				•			<b>gentamicin sulfate cream 0.1%</b>	GN						
<b>doxepin hcl cream 5% Prudoxin</b>	GN							<b>gentamicin sulfate oint 0.1%</b>	GN						
<b>econazole nitrate cream 1%</b>	GN							<b>halcinonide cream 0.1% Halog</b>	GN				•		
<b>ERTACZO sertaconazole nitrate cream 2%</b>	BN							<b>halobetasol propionate cream 0.05%</b>	GN				•		
<b>ERY erythromycin pads 2%</b>	BN			•				<b>halobetasol propionate oint 0.05%</b>	GN				•		
<b>erythromycin gel 2% Erygel</b>	GN							<b>HALOG halcinonide oint 0.1%</b>	BN			•	•		
<b>erythromycin soln 2%</b>	GN							<b>HALOG halcinonide soln 0.1%</b>	BN			•	•		
<b>FINACEA azelaic acid foam 15%</b>	BP			•				<b>HYDROCORTISONE hydrocortisone lotion 2.5%</b>	BN			•	•		
<b>fluocinolone acetonide cream 0.01%</b>	GN				•			<b>hydrocortisone cream 2.5%</b>	GP				•		
<b>fluocinolone acetonide cream 0.025% Synalar</b>	GN				•			<b>hydrocortisone oint 2.5%</b>	GP				•		
<b>fluocinolone acetonide oil 0.01% (body oil) Derma-smoothe/fs body</b>	GN				•			<b>imiquimod cream 5% Aldara</b>	GN				•		
<b>fluocinolone acetonide oil 0.01% (scalp oil) Derma-smoothe/fs scalp</b>	GN				•			<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</b>	GN						
<b>fluocinolone acetonide oint 0.025% Synalar</b>	GN				•			<b>ketoconazole cream 2%</b>	GN						
<b>fluocinolone acetonide soln 0.01% Synalar</b>	GN				•			<b>ketoconazole shampoo 2% Nizoral</b>	GP						
<b>FLUOCINONIDE fluocinonide gel 0.05%</b>	BN			•	•			<b>lidocaine hcl urethral/ mucosal gel prefilled syringe 2%</b>	GN		•		•		
<b>fluocinonide cream 0.05%</b>	GN				•			<b>lidocaine-prilocaine cream 2.5-2.5%</b>	GP				•		
<b>fluocinonide emulsified base cream 0.05%</b>	GN				•			<b>MAFENIDE ACETATE mafenide acetate packet for topical soln 5% (50 gm)</b>	BN						
<b>fluocinonide oint 0.05%</b>	GN				•			<b>malathion lotion 0.5% Ovide</b>	GN						
<b>fluocinonide soln 0.05%</b>	GN				•			<b>metronidazole cream 0.75% Metrocream</b>	GN						
<b>FLUOROURACIL fluorouracil soln 2%</b>	BN							<b>metronidazole gel 0.75%</b>	GN						
<b>fluorouracil soln 5%</b>	GN							<b>mometasone furoate cream 0.1% Elocon</b>	GN				•		
								<b>mometasone furoate oint 0.1%</b>	GP				•		

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>mometasone furoate solution 0.1% (lotion)</b>	GN				•			<b>deferasirox tab 90 mg, 180 mg Jadem</b>	SP	•	•		•		
<b>mupirocin oint 2%</b>	GP							<b>naloxone hcl nasal spray 4 mg/0.1ml Narcan</b>	GP						
NAFTIFINE HCL naftifine hcl cream 1%	BN							<b>naloxone hcl soln prefilled syringe 2 mg/2ml</b>	GP						
<b>naftifine hcl cream 2% Naftin</b>	GN							<b>naltrexone hcl tab 50 mg</b>	GP						
<b>nystatin cream 100000 unit/gm</b>	GP							<b>DIAGNOSTIC PRODUCTS</b>							
<b>nystatin oint 100000 unit/gm</b>	GP							ALBUSTIX albumin (urine) test strip	BN						
<b>nystatin topical powder 100000 unit/gm</b>	GN							CHEMSTRIP MICRAL albumin (urine) test strip	BN						
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>	GN							CHEMSTRIP-K acetone (urine) test strip	BN						
<b>oxiconazole nitrate cream 1% Oxistat</b>	GN							DAIStIX glucose urine test-(glucose oxidase) strip	BN						
<b>permethrin cream 5% Elimite</b>	GN							DAIStIX REAGENT STRIPS glucose urine test-(glucose oxidase) strip	BN						
<b>pimecrolimus cream 1% Elidel</b>	GN		•					FORA GTEL BLOOD KETONE TEST STRIPS ketone blood test strip	BN						
<b>PODOFILOX podofilox soln 0.5%</b>	BN							FORA TEST N' GO ADVANCE/VOICE/6 CONNECT ketone blood test strip	BN						
<b>selenium sulfide lotion 2.5%</b>	GP							KETO-DIASTIX urine glucose-ketones test strips	BN						
<b>silver sulfadiazine cream 1% Silvadene</b>	GP							KETOCARE acetone (urine) test strip	BN						
SPINOSAD spinosad susp 0.9%	BN							KETONE acetone (urine) test strip	BN						
<b>sulfacetamide sodium lotion 10% (acne) Klaron</b>	GN							KETONE TEST STRIPS acetone (urine) test strip	BN						
<b>tacrolimus oint 0.03%, 0.1% Protopic</b>	GN		•					KETOSTIX acetone (urine) test strip	BN						
<b>tazarotene cream 0.1% Tazorac</b>	GN	•						NOVA MAX PLUS KETONE TEST STRIPS ketone blood test strip	BN						
<b>tretinoin cream 0.025%, 0.05%, 0.1% Retin-a</b>	GN	•						PRECISION XTRA ketone blood test strip	BN						
<b>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</b>	GP			•				RELION KETONE TEST STRIPS acetone (urine) test strip	BN						
<b>triamcinolone acetonide lotion 0.025%, 0.1%</b>	GN			•				TEST STRIPS - LIFESCAN PRODUCTS	BP						
<b>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</b>	GP			•				TEST STRIPS - VARIOUS	BN		•				
VEREGEN sinecatechins oint 15%	BN														
<b>MISCELLANEOUS PRODUCTS</b>															
<b>ANTIDOTES</b>															
CHEMET succimer cap 100 mg	BN														

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
<b>MEDICAL DEVICES</b>															
CALIBRATION LIQUIDS - LIFESCAN PRODUCTS	BP							SYSTEM continuous glucose system sensor							
CALIBRATION LIQUIDS - VARIOUS	BN							FREESTYLE LIBRE 3 PLUS/SENSOR/ GLUCOSE MONITORING SYSTEM continuous glucose system sensor	BN			•	•		
CAYA diaphragm arc-spring	PH					•		FREESTYLE LIBRE 3/READER/ GLUCOSE MONITORING SYSTEM continuous glucose system receiver	BN			•	•		
DEXCOM G6 RECEIVER continuous glucose system receiver	BN			•	•			FREESTYLE LIBRE 3/SENSOR/ GLUCOSE MONITORING SYSTEM continuous glucose system sensor	BN			•	•		
DEXCOM G6 SENSOR continuous glucose system sensor	BN			•	•			FREESTYLE LIBRE 3/FLASH MONITORING SYSTEM continuous glucose system receiver	BN			•	•		
DEXCOM G6 TRANSMITTER continuous glucose system transmitter	BN			•	•			GUARDIAN CONNECT TRANSMITTER continuous glucose system transmitter	BN			•	•		
DEXCOM G7 RECEIVER continuous glucose system receiver	BN			•	•			GUARDIAN LINK 3 TRANSMITTER KIT continuous glucose system transmitter	BN						
DEXCOM G7 SENSOR continuous glucose system sensor	BN			•	•			GUARDIAN REAL-TIME CHARGER REPLACEMENT continuous glucose monitor supplies	BN						
ENLITE GLUCOSE SENSOR continuous glucose system sensor	BN							GUARDIAN REAL-TIME REPLACEMENT MONITOR continuous glucose system receiver	BN						
FC2 FEMALE CONDOM condoms - female	PH					•		GUARDIAN REAL-TIME TEST PLUG REPLACEMENT continuous glucose monitor supplies	BN						
FEMCAP cervical cap 22 mm, 26 mm, 30 mm	PH					•		GUARDIAN SENSOR (3) continuous glucose system sensor	BN						
FREESTYLE LIBRE 14 DAY/ READER/FLASH MONITORING SYSTEM continuous glucose system receiver	BN			•	•			GUARDIAN 4 GLUCOSE SENSOR continuous glucose system sensor	BN						
FREESTYLE LIBRE 14 DAY/ SENSOR/FLASH MONITORING SYSTEM continuous glucose system sensor	BN			•	•										
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM continuous glucose system receiver	BN			•	•										
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING	BN			•	•										

Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution	Drug Name	Tier	Specialty	Prior Authorization	Step Therapy	Quantity Level Limits	PHC	Limited Distribution
GUARDIAN 4 TRANSMITTER KIT continuous glucose system transmitter	BN							PARADIGM REAL-TIME TRANSMITTER continuous glucose system transmitter	BN						
INSULIN NEEDLES AND SYRINGES - BD PRODUCTS	BP							WIDE-SEAL SILICONE DIAPHRAGMS - VARIOUS	PH					•	
INSULIN NEEDLES AND SYRINGES - VARIOUS	BN							ASSORTED CLASSES							
INSULIN PEN NEEDLES - BD AND NOVO PRODUCTS	BP							azathioprine tab 50 mg Imuran	GN						
INSULIN PEN NEEDLES - VARIOUS	BN							azathioprine tab 75 mg, 100 mg	GN						
LANCETS - LIFESCAN PRODUCTS	BP							cyclosporine modified cap 25 mg, 100 mg Neoral	GN						
LANCETS - VARIOUS	BN							cyclosporine modified cap 50 mg	GN						
MINILINK REAL-TIME TRANSMITTER continuous glucose system transmitter	BN							cyclosporine modified oral soln 100 mg/ml Neoral	GN						
MINIMED 630G GUARDIAN PRESS STARTER TRANSMITTER KIT continuous glucose system transmitter	BN							everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg Zortress	GN						
MISC NEEDLES AND SYRINGES - BD BRAND	BP						•	lenalidomide caps 2.5 mg Revlimid	SP	•	•			•	•
OMNIFLEX DIAPHRAGM diaphragms	PH							lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg Revlimid	SP	•	•			•	•
ONETOUCH ULTRA 2 blood glucose monitoring kit w/ device	BP							mycophenolate mofetil cap 250 mg Cellcept	GN						
ONETOUCH VERIO blood glucose monitoring kit w/ device	BP							mycophenolate mofetil for oral susp 200 mg/ml Cellcept	GN						
ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM blood glucose monitoring kit w/ device	BP							mycophenolate mofetil tab 500 mg Cellcept	GN						
ONETOUCH VERIO IQ BLOOD GLUCOSE MONITORING SYSTEM blood glucose monitoring kit w/ device	BP							mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) Myfortic	GN						
ONETOUCH VERIO REFLECT blood glucose monitoring kit w/ device	BP							penicillamine tab 250 mg Depen titratabs	GN						
OVAL TAPE continuous glucose monitor supplies	BN							sirolimus tab 0.5 mg, 1 mg, 2 mg Rapamune	GN						
								sodium polystyrene sulfonate oral susp 15 gm/60ml	GN						
								sodium polystyrene sulfonate powder	GN						
								tacrolimus cap 0.5 mg, 1 mg, 5 mg Prograf	GN						

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		dorzolamide hcl ophth soln 2%Trusopt.....	40

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doxycycline monohydrate cap 50 mg, 100 mg.....	2
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