



# McLennan County Employees Formulary

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## What is my prescription drug coverage?

As part of your Scott and White Health Plan (SWHP) coverage, you may have a prescription drug benefit. This document will help you understand your prescription drug benefit and the SWHP formulary.

Not every prescription drug benefit is the same. The best way to figure out your prescription drug coverage is to review your *Evidence of Coverage* or call the SWHP Customer Service department.

## What is the Scott & White Health Plan formulary?

A formulary is a list of covered drugs selected by SWHP in consultation with a team of health care providers. The list represents the prescription drugs believed to be a necessary part of a quality treatment program. SWHP will generally cover the drugs listed on the formulary as long as the drug is medically necessary and plan rules are followed. The list contains both brand-name and generic medications and is updated regularly.

This SWHP formulary includes preferred drugs that are covered under your prescription benefit. Coverage for drugs not listed are considered Non-Formulary unless excluded by your plan benefit. Non-formulary drugs may require prior authorization or may be subject to clinical edits. Formularies continually change to reflect the most recent advances in drug therapy therefore; this list is not inclusive and does not guarantee coverage.

The formulary is tiered meaning there are different copayment levels for drugs on different levels.

**Tier 0 (T0):** zero cost share preventive medications

**Tier 1 (T1):** preferred generic medications

**Tier 2 (T2):** preferred brand medications

**Tier 3 (T3):** non-preferred brand and generic medications

**Specialty (SP1):** Tier 1 specialty medications

**Specialty (SP2):** Tier 2 specialty medications

**Specialty (SP3):** Tier 3 specialty medications

**Specialty (SP4):** Tier 4 specialty medications

**Non-formulary medications:** medications not listed on formulary but are allowed some coverage (unless excluded)

**Excluded:** medications not listed on formulary and member is responsible for the entire cost of the prescription

The formulary may change because we review new medical information regarding current drugs listed as well as new drugs recently approved by the FDA.

### **How was the formulary created and how are new medications reviewed?**

The SWHP Pharmacy and Therapeutics (P&T) Committee meets regularly to review new drugs approved by the FDA and new information regarding drugs that are already on the formulary. The Committee is primarily made up of physicians, pharmacists and nurses. It reviews information and scientific evidence concerning safety, effectiveness and current use in therapy.

### **Does the formulary ever change?**

Since the P&T Committee meets regularly and reviews new information, the formulary may change. Below are some possible reasons the formulary could change:

- Generic forms of the brand drug become available. The brand-name medication may be subject to a higher copayment and possibly a penalty. The generic medication may be covered at the lower copayment.
- New drugs may be added by the P&T Committee.
- A drug may be withdrawn from the market by the FDA.
- A drug becomes available without a prescription (becomes over-the-counter), then the drug may be removed from the formulary. Often, drugs available over-the-counter are not covered under the prescription benefit.

### **How am I notified of changes to the formulary?**

You can find the SWHP formularies on our website at [swhp.org](http://swhp.org), which are updated monthly. To view the changes that have been made to the formularies, refer to the monthly *Formulary Changes* document posted on the website. If you have any questions or wish to obtain a printed copy of the formularies or pharmaceutical management procedures, please contact SWHP Pharmacy Help Desk at 1-800-728-7947.

### **What are brand-name and generic drugs?**

SWHP covers both brand-name and generic drugs. A brand-name drug is one that is produced under the original manufacturer's brand name. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand-name drugs but the quality and effectiveness is the same. Generic drugs may differ from the brand-name drug in color, shape, flavor or inactive ingredients. Some brand-name drugs have a generic equivalent and others do not. If a generic form of a brand-name drug becomes available, the brand-name medication may be subject to a higher copayment and possibly a penalty. The generic medication may be covered at the lower copayment.

On the formulary, brand name drugs are capitalized (e.g. HUMALOG) and generic drugs are listed in lower-case italics (e.g., *simvastatin*).

**What is generic substitution?**

Generic substitution occurs when a pharmacist dispenses an FDA approved generic drug in place of a brand name drug. Generic substitution will automatically occur at SWHP Provider Pharmacies. Prescribers may choose to use a brand name product and not allow generic substitution by indicating on the prescription "brand necessary" or "brand medically necessary." Per state law, these statements must be handwritten by the prescriber.

**What are Specialty drugs?**

Specialty drugs are those drugs used to treat complex or chronic conditions, and which usually require close monitoring, such as multiple sclerosis, hepatitis, rheumatoid arthritis, cancer, and other conditions that are difficult to treat with traditional therapies. Specialty drugs may be self-administered in the home by injection (under the skin or into a muscle), by inhalation, by mouth, or on the skin. These drugs may also require special handling, special manufacturing processes, and may have limited prescribing or limited pharmacy availability.

**What are pharmaceutical management procedures?**

Pharmaceutical management procedures are processes that help manage the drug formulary in order to provide the most cost-effective therapy options. As part of such processes, restrictions (described in the following section) may be applied to certain drugs on the formulary.

**Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include: quantity limits, prior authorization, step therapy, age limits, and others. Please refer to the legend for a complete listing of requirements.

**How do I request an exception to the SWHP formulary?**

You, a representative, or a prescriber can submit a request to SWHP to make an exception to the formulary. For example, if there are clinically significant reasons why you cannot take a drug in accordance with the coverage requirements (e.g. step therapy, age limits, quantity limits), an exception request can be submitted for review. Additionally, if you 1) have tried all formulary alternatives, or there are clinically significant reasons why the alternatives would not be appropriate for your specific condition, and 2) the requested drug is medically necessary, and 3) the drug is not excluded from coverage, an exception request to cover a drug not listed on formulary can be submitted for review.

To request an exception, you, a representative, or a prescriber can submit a coverage exception request to SWHP via [swhp.org](http://swhp.org), fax, mail, or phone. You and your prescriber will be notified of the determination in writing. If approved, the drug will be covered at the applicable copayment. If the request is denied, you may still purchase the medication for the full price. For questions regarding this process, contact SWHP pharmacy customer service at 1-800-728-7947.

### **What drugs are not covered by my prescription drug benefit?**

Please refer to your *Evidence of Coverage* for complete plan coverage, limitations and exclusions specific to your prescription drug benefit.

Often, over-the-counter medications and herbal products are not covered under SWHP benefit plans.

### **How much medication does my copayment cover and does my plan cover maintenance medications?**

You can get up to a 30-day supply of medication for a single copayment. Some medications may have a quantity limit, restricting the amount of drug you can get per prescription or per copayment.

Maintenance medications (noted on the formulary by a “MN” next to the drug name) are used to treat chronic medical conditions. The prescription for the drug must be written for a three-month supply of medication.

### **Maintenance Medications**

The following categories are considered maintenance eligible:

- Anticonvulsants
- Bupropion, bupropion SR, bupropion XL
- Cardiovascular Medications
- Estrogen and Progestin replacement medications
- Generic selective serotonin reuptake inhibitors (SSRIs) medications
- Lithium
- Medications to treat asthma
- Medications to treat diabetes and diabetic supplies
- Medications to treat glaucoma
- Medications to treat gout
- Medications to treat osteoporosis
- Medications to treat Parkinson’s
- Potassium supplements
- Testosterone Cypionate
- Thyroid replacement medications

- Tricyclic antidepressant medications
- Urinary incontinence medications

**NOTE:** Not all drugs within the category are preferred to be maintenance eligible. Only those listed with an “MN” on formulary are maintenance eligible. Please refer to your *Evidence of Coverage* for complete plan coverage.

### **How can I save money on prescriptions?**

Medications on the SWHP formulary generally cost less than medications not listed. A generic medication will usually be the lowest copayment option. Ask the provider or pharmacist whether generic medications are appropriate.

Be sure to take this formulary with you to each visit so that the provider knows what medication is covered.

### **Contraceptive Coverage**

As specified by health care reform, women must have access to a full range of FDA-approved contraceptive methods and plans must cover without cost sharing at least one form of contraception in each of the FDA identified methods. However, plans can use reasonable medical management within each category to determine what birth control products are available at \$0 cost-share.

- Please refer to the formulary to determine which contraceptives are available at a \$0 cost-share. These are listed on the formulary at Tier 0 (preventive drugs).
- Certain over-the-counter (OTC) contraceptives for women may also be covered at a \$0 cost-share. These must be filled at a network pharmacy with a prescription prescribed by a health care professional.

Coverage may vary according to your plan. Please refer to applicable plan documents.

### **Preventive Care Medications & Medications Covered Under Health Care Reform**

Preventive care medications as well as other medications covered under Health Care Reform are covered according to your plan benefits. These medications are listed on the formulary at Tier 0 (preventive drugs). Please note this list is subject to change.

In order to obtain this benefit, you must fill at a network pharmacy with a prescription prescribed by a health care professional (includes prescription and over-the-counter medications).

### **Smoking Cessation Medication Coverage**

All FDA approved tobacco cessation medications, including prescription and over-the-counter medications, are allowed at \$0 cost-share per the Patient Protection and Affordable Care Act (PPACA). You are limited to two smoking cessation attempts per

year, up to 180 days total. These medications are listed on the formulary at Tier 0 (preventive drugs).

In order to obtain this benefit, you must fill at a network pharmacy with a prescription prescribed by a health care professional (includes prescription and over-the-counter medications).

### **Diabetic Supplies**

The preferred diabetic testing supplies include all Accu-Chek® (Roche Diagnostics) Products and OneTouch® (LifeScan) products.

### **Oral Oncology Program**

Prescriptions for drugs included in the oral oncology program will be restricted to a 14-day supply for the first 2 months of therapy. Please refer to applicable plan documents for additional information.

*Oral Oncology Program drugs include:*

Bosulif	Gleevec	Nerlynx	Sprycel	Tarceva	Votrient	Zejula	Zytiga
Calquence	Inlyta	Nexavar	Sutent	Targretin	Xalkori	Zolinza	
Erivedge	Jakafi	Rubraca	Tafinlar	Verzenio	Xtandi	Zykadia	



LEGEND

TIER	DESCRIPTION
0	Preventive
1	Preferred Generics
2	Preferred Brands
3	Non-Preferred Brands & Non-Preferred Generics
SP1	Specialty
SP2	Specialty
SP3	Specialty
SP4	Specialty

TYPE	DESCRIPTION
QL	Quantity Limit There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
PA	Prior Authorization You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
ST	Step Therapy In some cases, you may be required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
AL1	Age Limit This prescription drug may only be covered if you meet the minimum or maximum age limit.
MDD	Max Daily Dose There is a limit on the amount of this drug that is covered per day.
C	Custom This drug has unique restrictions.
MN	Maintenance Medication Maintenance Medication.

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANALGESICS</b>		
<b>NONSTEROIDAL ANTI-INFLAMMATORY DRUGS</b>		
<i>aspirin (81 mg tab chew, 81 mg tablet dr)</i>	0	AL1 50 to 59 yrs old
<i>butalbital/aspirin/caffeine</i>	1	
<i>celecoxib</i>	1	
<i>choline salicylate/magnesium salicylate</i>	1	
<i>diclofenac potassium</i>	1	
<i>diclofenac sodium (25 mg tablet dr, 50 mg tablet dr, 75 mg tablet dr, 100 mg tab er 24h)</i>	1	
<i>diflunisal</i>	1	
<i>etodolac</i>	1	
<i>fenoprofen calcium (400 mg capsule, 600 mg tablet)</i>	1	
<i>flurbiprofen</i>	1	
<i>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	1	
<b>INDOCIN (25 MG/5 ML SUSPENSION, 50 MG SUPPOSITORY)</b>	2	
<i>indomethacin</i>	1	
<i>ketoprofen</i>	1	
<i>ketorolac tromethamine 10 mg tablet</i>	1	QL 20 / 30 DAYS
<i>meclofenamate sodium</i>	1	
<i>mefenamic acid</i>	3	
<i>meloxicam (7.5 mg tablet, 7.5 mg/5ml oral susp, 15 mg tablet)</i>	1	
<i>nabumetone</i>	1	
<i>naproxen (125 mg/5ml oral susp, 250 mg tablet, 375 mg tablet, 375 mg tablet dr, 500 mg tablet, 500 mg tablet dr)</i>	1	
<i>naproxen sodium (275 mg tablet, 550 mg tablet)</i>	1	
<i>oxaprozin 600 mg tablet</i>	1	
<i>piroxicam</i>	1	
<i>salsalate</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sulindac</i>	1	
<i>tolmetin sodium</i>	1	
<b>OPIOID ANALGESICS, LONG-ACTING</b>		
<i>fentanyl (12 mcg/hr patch td72, 25 mcg/hr patch td72, 50mcg/hr patch td72, 75mcg/hr patch td72, 100 mcg/hr patch td72)</i>	1	
<i>levorphanol tartrate</i>	1	
<i>methadone hcl (5 mg tablet, 5 mg/5 ml solution, 10 mg tablet, 10 mg/5 ml solution, 10 mg/ml oral conc, 40 mg tablet sol)</i>	1	
<i>morphine sulfate (15 mg tablet er, 30 mg tablet er, 60 mg tablet er, 100 mg tablet er, 200 mg tablet er)</i>	1	
<i>oxycodone hcl (10 mg tab er 12h, 15 mg tab er 12h, 20 mg tab er 12h, 30 mg tab er 12h, 40 mg tab er 12h, 60 mg tab er 12h, 80 mg tab er 12h)</i>	1	
<b>OXYCONTIN</b>	2	
<b>OPIOID ANALGESICS, SHORT-ACTING</b>		
<i>acetaminophen with codeine phosphate (120-12mg/5 solution, 300mg-15mg tablet, 300mg-30mg tablet, 300mg-60mg tablet)</i>	1	
<i>butalbit/acetamin/caff/codeine 50-325-30 capsule</i>	1	
<i>butorphanol tartrate 10 mg/ml spray</i>	1	QL 5 / 30 DAYS
<b>CAPITAL W-CODEINE</b>	2	
<i>carisoprodol/aspirin/codeine 200-325-16 tablet</i>	1	
<i>codeine sulfate</i>	1	
<i>codeine/butalbital/asa/caffein 30-50-325 capsule</i>	1	
<b>DEMEROL (100 MG/ML AMPUL, 100 MG/ML CARPUJECT, 100 MG/ML VIAL)</b>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocodone bitartrate/acetaminophen (hydrocodone/acetaminophen 2.5-108/5 solution, hydrocodone/acetaminophen 5 mg-300mg tablet, hydrocodone/acetaminophen 5 mg-325mg tablet, hydrocodone/acetaminophen 5-217mg/10 solution, hydrocodone/acetaminophen 7.5-300 mg tablet, hydrocodone/acetaminophen 7.5-325 mg tablet, hydrocodone/acetaminophen 7.5-325/15 solution, hydrocodone/acetaminophen 10mg-300mg tablet, hydrocodone/acetaminophen 10mg-325mg tablet)</i>	1	
<i>hydrocodone/ibuprofen 7.5-200 mg tablet</i>	1	
<i>hydromorphone hcl (1 mg/ml liquid, 2 mg tablet, 3 mg supp.rect, 4 mg tablet, 8 mg tablet)</i>	1	
<i>meperidine hcl (50 mg tablet, 50 mg/5 ml solution, 100 mg tablet)</i>	1	
<i>morphine sulfate (5 mg supp.rect, 10 mg supp.rect, 10 mg/5 ml solution, 15 mg tablet, 20 mg supp.rect, 20 mg/5 ml solution, 30 mg supp.rect, 30 mg tablet, 100 mg/5ml solution)</i>	1	
<i>oxycodone hcl (5 mg capsule, 5 mg tablet, 5 mg/5 ml solution, 10 mg tablet, 15 mg tablet, 20 mg tablet, 20 mg/ml oral conc, 30 mg tablet)</i>	1	
<i>oxycodone hcl/acetaminophen (hcl/acetaminophen 5 mg-325mg tablet, hcl/acetaminophen 7.5-325 mg tablet, hcl/acetaminophen 10mg-325mg tablet)</i>	1	
<i>oxycodone hcl/aspirin</i>	1	
<i>pentazocine hcl/naloxone hcl</i>	1	
<i>tramadol hcl 50 mg tablet</i>	1	
<i>tramadol hcl/acetaminophen</i>	1	
<b>ANESTHETICS</b>		
<b>LOCAL ANESTHETICS</b>		
<i>lidocaine 5 % oint. (g)</i>	1	QL 120 / 30 DAYS
<i>lidocaine hcl (2 % jel/pf app, 2 % jelly(ml), 2 % solution)</i>	1	
<i>lidocaine/prilocaine 2.5 %-2.5% cream (g)</i>	1	QL 120 / 30 DAYS
<b>ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS</b>		
<b>ALCOHOL DETERRENTS/ANTI-CRAVING</b>		
<i>acamprosate calcium</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>disulfiram</i>	1	
<i>naltrexone hcl 50 mg tablet</i>	1	
OPIOID DEPENDENCE TREATMENTS		
<i>buprenorphine hcl (2 mg tab subl, 8 mg tab subl)</i>	1	
<i>buprenorphine hcl/naloxone hcl</i>	1	
OPIOID REVERSAL AGENTS		
<i>naloxone hcl (0.4 mg/ml syringe, 0.4 mg/ml vial, 1 mg/ml syringe)</i>	1	
NARCAN	3	QL 1 BOX (2 NASAL SPRAYS) / 180 DAYS
SMOKING CESSATION AGENTS		
<i>bupropion hcl (150 mg tab er 12h, 150 mg tablet er)</i>	0	C 6 months of treatment per 1 year MN
CHANTIX	0	C 6 months of treatment per 1 year
<i>nicotine (7mg/24hr patch td24, 14mg/24hr patch td24, 21 mg/24hr patch td24, 21-14-7mg patch dysq, 22 mg/24hr patch td24)</i>	0	C 6 months of treatment per 1 year
<i>nicotine polacrilex (2 mg gum, 2 mg lozenge, 2 mg lozng mini, 4 mg gum, 4 mg lozenge, 4 mg lozng mini)</i>	0	C 6 months of treatment per 1 year
NICOTROL	0	C 6 months of treatment per 1 year
NICOTROL NS	0	C 6 months of treatment per 1 year
ANTIBACTERIALS		
AMINOGLYCOSIDES		
<i>gentamicin sulfate (0.1 % cream (g), 0.1 % oint. (g), 0.3 % drops, 0.3 % oint. (g))</i>	1	
<i>neomycin sulfate</i>	1	
<i>tobramycin</i>	1	
TOBREX 0.3% EYE OINTMENT	2	
ANTIBACTERIALS, OTHER		
AKTIPAK	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bacitracin 500 unit/g oint. (g)</i>	1	
BACTROBAN NASAL	2	
BENZAMYCINPAK	2	
CLEOCIN 100 MG VAGINAL OVULE	2	
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hcl 75 mg/5 ml soln recon</i>	1	
<i>clindamycin phosphate (1 % gel (gram), 1 % lotion, 1 % med. swab, 1 % solution, 2 % cream/appl)</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>metronidazole (0.75 % gel w/appl, 250 mg tablet, 375 mg capsule, 500 mg tablet)</i>	1	
MONUROL	3	
<i>mupirocin</i>	1	
<i>mupirocin calcium</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohydrate/macrocrystals</i>	1	
<i>trimethoprim</i>	1	
<i>vancomycin hcl (1 g vial, 1 g vial port, 125 mg capsule, 250 mg capsule, 500 mg vial, 500 mg vial port, 750 mg vial, 750 mg vial port)</i>	3	
XIFAXAN	3	PA
BETA-LACTAM, CEPHALOSPORINS		
<i>cefaclor (125 mg/5ml susp recon, 250 mg capsule, 250 mg/5ml susp recon, 375 mg/5ml susp recon, 500 mg capsule, 500 mg tab er 12h)</i>	1	
<i>cefadroxil (1 g tablet, 250 mg/5ml susp recon, 500 mg capsule, 500 mg/5ml susp recon)</i>	1	
<i>cefdinir (125 mg/5ml susp recon, 250 mg/5ml susp recon, 300 mg capsule)</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime proxetil (50 mg/5 ml susp recon, 100 mg tablet, 100 mg/5ml susp recon, 200 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cefprozil (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tablet)</i>	1	
<i>ceftibuten 400 mg capsule</i>	1	
CEFTIN (125 MG/5 ML ORAL SUSP, 250 MG/5 ML ORAL SUSP)	2	
<i>cefuroxime axetil</i>	1	
<i>cephalexin (125 mg/5ml susp recon, 250 mg capsule, 250 mg tablet, 250 mg/5ml susp recon, 500 mg capsule, 500 mg tablet)</i>	1	
SUPRAX (100 MG TABLET CHEWABLE, 200 MG TABLET CHEWABLE, 400 MG CAPSULE, 400 MG TABLET, 500 MG/5 ML SUSPENSION)	2	
<b>BETA-LACTAM, PENICILLINS</b>		
<i>amoxicillin (125 mg tab chew, 125 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg capsule, 250 mg tab chew, 250 mg/5ml susp recon, 400 mg/5ml susp recon, 500 mg capsule, 500 mg tablet, 875 mg tablet)</i>	1	
<i>amoxicillin/potassium clavulanate (amoxicillin/potassium 200-28.5/5 susp recon, amoxicillin/potassium 200-28.5mg tab chew, amoxicillin/potassium 250-125 mg tablet, amoxicillin/potassium 250-62.5/5 susp recon, amoxicillin/potassium 400-57mg tab chew, amoxicillin/potassium 400-57mg/5 susp recon, amoxicillin/potassium 500-125 mg tablet, amoxicillin/potassium 600-42.9/5 susp recon, amoxicillin/potassium 875-125 mg tablet)</i>	1	
<i>ampicillin trihydrate (125 mg/5ml susp recon, 250 mg capsule, 250 mg/5ml susp recon, 500 mg capsule)</i>	1	
AUGMENTIN 125-31.25 MG/5 ML	2	
<i>dicloxacillin sodium</i>	1	
<i>penicillin v potassium (125 mg/5ml soln recon, 250 mg tablet, 250 mg/5ml soln recon, 500 mg tablet)</i>	1	
<b>MACROLIDES</b>		
AKNE-MYCIN	2	
<i>azithromycin (1 g packet, 100 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg tablet, 500 mg tablet, 500 mg vial, 500 mg vial port, 600 mg tablet)</i>	1	
<i>clarithromycin (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tab er 24h, 500 mg tablet)</i>	1	
ERY-TAB	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ERYPED 400	2	
ERYTHROCIN STEARATE	1	
<i>erythromycin base (5 mg/g oint. (g), 5 mg/gram oint. (g), 250 mg capsule dr, 250 mg tablet, 500 mg tablet)</i>	1	
<i>erythromycin base/ethyl alcohol (base/ethanol 2 % gel (gram), base/ethanol 2 % med. swab, base/ethanol 2 % solution)</i>	1	
<i>erythromycin ethylsuccinate (200 mg/5ml susp recon, 400 mg tablet)</i>	1	
<b>QUINOLONES</b>		
CILOXAN 0.3% OINTMENT	2	
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin hcl (0.3 % drops, 100 mg tablet, 250 mg tablet, 500 mg tablet, 750 mg tablet)</i>	1	
<i>gatifloxacin</i>	1	
<i>levofloxacin (250 mg tablet, 250mg/10ml solution, 500 mg tablet, 750 mg tablet)</i>	1	
<i>moxifloxacin hcl (0.5 % drops, 400 mg tablet)</i>	3	
<i>ofloxacin 0.3 % drops</i>	1	
<b>SULFONAMIDES</b>		
AVC	2	
<i>silver sulfadiazine</i>	1	
<i>sulfacetamide sodium (10 % drops, 10 % oint. (g), 10 % suspension)</i>	1	
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole/trimethoprim (sulfamethoxazole/trimethoprim 200-40mg/5 oral susp, sulfamethoxazole/trimethoprim 400mg-80mg tablet, sulfamethoxazole/trimethoprim 800-160 mg tablet, sulfamethoxazole/trimethoprim 800-160/20 oral susp)</i>	1	
<b>TETRACYCLINES</b>		
<i>demeclocycline hcl</i>	3	
<i>doxycycline hyclate (20 mg tablet, 50 mg capsule, 100 mg capsule, 100 mg tablet)</i>	1	
<i>doxycycline monohydrate (50 mg capsule, 50 mg tablet, 75 mg tablet, 100 mg capsule, 100 mg tablet)</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>minocycline hcl (50 mg capsule, 50 mg tablet, 75 mg capsule, 75 mg tablet, 100 mg capsule, 100 mg tablet)</i>	1	
<i>tetracycline hcl</i>	1	
VIBRAMYCIN 50 MG/5 ML SYRUP	2	
ANTICONVULSANTS		
ANTICONVULSANTS, OTHER		
FYCOMPA (0.5 MG/ML ORAL SUSP, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET, 10 MG TABLET, 12 MG TABLET)	3	MN
KEPPRA (100 MG/ML ORAL SOLN, 250 MG TABLET, 500 MG TABLET, 750 MG TABLET, 1,000 MG TABLET)	2	MN
KEPPRA XR	2	MN
<i>levetiracetam (100 mg/ml solution, 250 mg tablet, 500 mg tab er 24h, 500 mg tablet, 500 mg/5ml solution, 750 mg tab er 24h, 750 mg tablet, 1000 mg tablet)</i>	1	MN
CALCIUM CHANNEL MODIFYING AGENTS		
<i>ethosuximide (250 mg capsule, 250 mg/5ml solution)</i>	1	MN
ZARONTIN (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	2	MN
ZONEGRAN	2	MN
<i>zonisamide</i>	1	MN
GAMMA-AMINO BUTYRIC ACID (GABA) AUGMENTING AGENTS		
DEPAKENE (250 MG CAPSULE, 250 MG/5 ML SOLUTION)	2	MN
DEPAKOTE	2	MN
DEPAKOTE ER	2	MN
DEPAKOTE SPRINKLE	2	MN
DIASTAT	2	QL 5 / 30 DAYS
DIASTAT ACUDIAL	2	QL 5 / 30 DAYS
<i>diazepam (2.5 mg kit, 5-7.5-10mg kit, 12.5-15-20 kit)</i>	1	QL 5 / 30 DAYS
<i>divalproex sodium</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>gabapentin (100 mg capsule, 250 mg/5ml solution, 300 mg capsule, 400 mg capsule, 600 mg tablet, 800 mg tablet)</i>	1	MN
GABITRIL	2	MN
MYSOLINE	2	MN
NEURONTIN (100 MG CAPSULE, 250 MG/5 ML SOLN, 300 MG CAPSULE, 400 MG CAPSULE, 600 MG TABLET, 800 MG TABLET)	2	MN
ONFI (2.5 MG/ML SUSPENSION, 10 MG TABLET, 20 MG TABLET)	3	PA MN
<i>phenobarbital (15 mg tablet, 16.2 mg tablet, 20 mg/5 ml elixir, 30 mg tablet, 32.4 mg tablet, 60 mg tablet, 64.8 mg tablet, 97.2mg tablet, 100 mg tablet)</i>	1	MN
<i>primidone</i>	1	MN
<i>tiagabine hcl</i>	1	MN
<i>valproic acid</i>	1	MN
<i>valproic acid (as sodium salt) 250 mg/5ml solution</i>	1	MN
GLUTAMATE REDUCING AGENTS		
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5ml oral susp)</i>	1	MN
FELBATOL (400 MG TABLET, 600 MG TABLET, 600 MG/5 ML SUSP)	2	MN
LAMICTAL	2	MN
<i>lamotrigine (5 mg tb chw dsp, 25 mg tablet, 25 mg tb chw dsp, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	1	MN
TOPAMAX	2	MN
<i>topiramate (15 mg cap sprink, 25 mg cap sprink, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	1	MN
SODIUM CHANNEL AGENTS		
APTIOM	3	MN
BANZEL (40 MG/ML SUSPENSION, 200 MG TABLET, 400 MG TABLET)	SP4	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carbamazepine (100 mg cpmp 12hr, 100 mg tab chew, 100 mg tab er 12h, 100 mg/5ml oral susp, 200 mg cpmp 12hr, 200 mg tablet, 300 mg cpmp 12hr)</i>	1	MN
<i>carbamazepine (200 mg tab er 12h, 400 mg tab er 12h)</i>	1	
CARBATROL	2	MN
DILANTIN (30 MG CAPSULE, 50 MG INFATAB, 100 MG CAPSULE)	2	MN
DILANTIN-125	2	MN
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5ml oral susp, 600 mg tablet)</i>	1	MN
<i>phenytoin (50 mg tab chew, 100 mg/4ml oral susp, 125 mg/5ml oral susp)</i>	1	MN
<i>phenytoin sodium extended 100 mg capsule</i>	1	MN
TEGRETOL (100 MG/5 ML SUSP, 200 MG TABLET)	2	MN
TEGRETOL XR	2	MN
TRILEPTAL (150 MG TABLET, 300 MG TABLET, 300 MG/5 ML SUSP, 600 MG TABLET)	2	MN
ANTIDEMENTIA AGENTS		
ANTIDEMENTIA AGENTS, OTHER		
<i>ergoloid mesylates</i>	1	
CHOLINESTERASE INHIBITORS		
<i>donepezil hcl (5 mg tab rapdis, 5 mg tablet, 10 mg tab rapdis, 10 mg tablet)</i>	1	
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST		
<i>memantine hcl (2 mg/ml solution, 5 mg tablet, 5 mg-10 mg tabs pk, 10 mg tablet)</i>	1	
NAMENDA XR	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIDEPRESSANTS</b>		
<b>ANTIDEPRESSANTS, OTHER</b>		
<i>amitriptyline hcl/chlordiazepoxide</i>	1	
<i>bupropion hcl (75 mg tablet, 100 mg tab er 12h, 100 mg tablet, 100 mg tablet er, 150 mg tab er 24h, 200 mg tab er 12h, 200 mg tablet er, 300 mg tab er 24h)</i>	1	MN
<i>mirtazapine</i>	1	
<b>MONOAMINE OXIDASE INHIBITORS</b>		
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
<b>SSRIS/SNRIS (SELECTIVE SEROTONIN REUPTAKE INHIBITORS/SEROTONIN AND NOREPINEPHRINE REUPTAKE INHIBITOR</b>		
<i>citalopram hydrobromide (10 mg tablet, 10 mg/5 ml solution, 20 mg tablet, 40 mg tablet)</i>	1	MN
<i>escitalopram oxalate (5 mg tablet, 5 mg/5 ml solution, 10 mg tablet, 20 mg tablet)</i>	1	MN
<i>fluoxetine hcl (10 mg capsule, 10 mg tablet, 20 mg tablet, 20 mg/5 ml solution, 40 mg capsule, 60 mg tablet)</i>	1	MN
<i>fluoxetine hcl 20 mg capsule</i>	1	
<i>paroxetine hcl (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	1	
<i>paroxetine hcl (12.5 mg tab er 24h, 25 mg tab er 24h, 30 mg tablet)</i>	1	MN
<b>PAXIL 10 MG/5 ML SUSPENSION</b>	2	MN
<i>sertraline hcl (20 mg/ml oral conc, 25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	1	MN
<i>trazodone hcl</i>	1	
<b>TRINTELLIX</b>	3	ST
<i>venlafaxine hcl (25 mg tablet, 37.5 mg cap er 24h, 37.5 mg tablet, 50 mg tablet, 75 mg cap er 24h, 75 mg tablet, 100 mg tablet, 150 mg cap er 24h)</i>	1	MN
<b>TRICYCLICS</b>		
<i>amitriptyline hcl</i>	1	MN
<i>clomipramine hcl</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desipramine hcl</i>	1	MN
<i>doxepin hcl (10 mg capsule, 10 mg/ml oral conc, 25 mg capsule, 50 mg capsule, 75 mg capsule, 100 mg capsule, 150 mg capsule)</i>	1	MN
<i>imipramine hcl</i>	1	MN
<i>nortriptyline hcl (10 mg capsule, 10 mg/5 ml solution, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	1	MN
<i>trimipramine maleate</i>	1	MN
ANTIEMETICS		
ANTIEMETICS, OTHER		
<i>metoclopramide hcl (5 mg tablet, 5 mg/5 ml solution, 10 mg tablet, 10 mg/10ml solution)</i>	1	
<i>prochlorperazine 25 mg supp.rect</i>	1	
<i>prochlorperazine edisylate 5 mg/ml vial</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>promethazine hcl (12.5 mg supp.rect, 25 mg supp.rect, 50 mg supp.rect, 50 mg tablet)</i>	1	
<i>scopolamine</i>	1	
<i>trimethobenzamide hcl</i>	1	
EMETOGENIC THERAPY ADJUNCTS		
<i>aprepitant</i>	3	QL 3 / RX
<i>dronabinol</i>	3	
EMEND 125 MG POWDER PACKET	3	QL 3 / 1 RX
<i>granisetron hcl 1 mg tablet</i>	3	QL 4 / 1 RX
<i>ondansetron</i>	1	QL 8 / 1 RX
<i>ondansetron hcl (2 mg/ml vial, 4 mg/5 ml solution)</i>	1	
<i>ondansetron hcl (4 mg tablet, 8 mg tablet, 24 mg tablet)</i>	1	QL 8 / 1 RX
<i>ondansetron hcl/pf (hcl/pf 4 mg/2 ml ampul, hcl/pf 4 mg/2 ml vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ANTIFUNGALS</b>		
<i>ciclopirox</i>	1	
<i>ciclopirox olamine</i>	1	
<i>clotrimazole 10 mg troche</i>	1	
<i>econazole nitrate</i>	1	
EXELDERM (CREAM, SOLUTION)	2	
<i>fluconazole (10 mg/ml susp recon, 40 mg/ml susp recon, 50 mg tablet, 100 mg tablet, 150 mg tablet, 200 mg tablet)</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>griseofulvin, microsize (125 mg/5ml oral susp, 500 mg tablet)</i>	1	
<i>itraconazole</i>	1	
<i>ketoconazole (2 % cream (g), 2 % shampoo, 200 mg tablet)</i>	1	
LAMISIL (125 MG GRANULES PACKET, 187.5 MG GRANULES PACK)	2	
<i>naftifine hcl</i>	1	
NAFTIN (1% GEL, 2% GEL)	2	
NATACYN	3	
NOXAFIL (40 MG/ML SUSPENSION, DR 100 MG TABLET)	2	PA
<i>nystatin (50mm unit powder(ea), 150mm unit powder(ea), 500k unit tablet, 500mm unit powder(ea), 100000/g cream (g), 100000/g oint. (g), 100000/g powder, 100000/ml oral susp)</i>	1	
<i>nystatin/triamcinolone acetonide</i>	1	
<i>oxiconazole nitrate</i>	1	
OXISTAT 1% LOTION	2	
SPORANOX 10 MG/ML SOLUTION	2	
<i>terbinafine hcl 250 mg tablet</i>	1	
<i>terconazole</i>	1	
<b>ANTIGOUT AGENTS</b>		
<i>allopurinol</i>	1	MN
<i>colchicine 0.6 mg tablet</i>	1	MN
<i>probenecid</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>probenecid/colchicine</i>	1	MN
ULORIC	3	ST
ANTIMIGRAINE AGENTS		
ERGOT ALKALOIDS		
<i>dihydroergotamine mesylate (1 mg/ml ampul, 1 mg/ml vial)</i>	1	
<i>dihydroergotamine mesylate 0.5mg/spry spray/pump</i>	1	QL 8 / 30 DAYS
<i>ergotamine tartrate/caffeine</i>	1	
MIGRANAL	2	QL 8 / 30 DAYS
SEROTONIN (5-HT) 1B/1D RECEPTOR AGONISTS		
<i>naratriptan hcl (1 mg tablet, 2.5 mg tablet)</i>	3	QL 18 / 30 DAY(S)
<i>rizatriptan benzoate (5 mg tablet, 10 mg tab rapdis, 10 mg tablet)</i>	1	QL 18 / 30 DAY(S)
<i>rizatriptan benzoate 5 mg tab rapdis</i>	1	QL 24 / 30 DAYS
<i>sumatriptan</i>	1	QL 6 / 30 DAYS
<i>sumatriptan succinate (25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	1	QL 18 / 30 DAYS
<i>sumatriptan succinate (4 mg/0.5ml cartridge, 4 mg/0.5ml pen injctr, 6 mg/0.5ml pen injctr, 6 mg/0.5ml vial)</i>	1	QL 3 / 30 DAYS
<i>sumatriptan succinate 6 mg/0.5ml cartridge</i>	1	QL 3 / 1 DAYS
ANTIMYASTHENIC AGENTS		
PARASYMPATHOMIMETICS		
MESTINON 60 MG/5 ML SYRUP	2	
<i>pyridostigmine bromide</i>	1	
ANTIMYCOBACTERIALS		
ANTIMYCOBACTERIALS, OTHER		
<i>dapsone (25 mg tablet, 100 mg tablet)</i>	1	
<i>rifabutin</i>	3	
ANTITUBERCULARS		
<i>ethambutol hcl</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>isoniazid (50 mg/5 ml solution, 100 mg tablet, 300 mg tablet)</i>	1	
<i>pyrazinamide</i>	1	
<i>rifampin (150 mg capsule, 300 mg capsule)</i>	1	
ANTINEOPLASTICS		
ALKYLATING AGENTS		
BENDEKA	SP2	
CEENU	SP1	PA
<i>cyclophosphamide (25 mg capsule, 25 mg tablet, 50 mg capsule, 50 mg tablet)</i>	1	
GLEOSTINE	SP1	PA
HEXALEN	SP1	PA
LEUKERAN	2	
LOMUSTINE	SP1	PA
<i>melphalan</i>	1	
MYLERAN	2	
TEMODAR	SP1	
<i>temozolomide</i>	SP1	PA
TREANDA (25 MG VIAL, 45 MG/0.5 ML VIAL, 100 MG VIAL, 180 MG/2 ML VIAL)	SP2	
ANTIANDROGENS		
<i>bicalutamide</i>	1	
<i>flutamide</i>	1	
NILANDRON	SP1	PA
<i>nilutamide</i>	SP1	PA
XTANDI	SP1	PA
ZYTIGA	SP1	PA
ANTIANGIOGENIC AGENTS		
POMALYST	SP1	PA
REVLIMID	SP1	PA



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THALOMID	SP1	
ANTIESTROGENS/MODIFIERS		
FARESTON	2	
FASLODEX	SP2	
<i>tamoxifen citrate 10 mg tablet</i>	1	
<i>tamoxifen citrate 20 mg tablet</i>	1	C Covered at \$0 preventive copay for women 35 years and older per ACA. All other members covered at generic copay.
ANTIMETABOLITES		
ALIMTA	SP1	
<i>capecitabine</i>	SP1	PA
<i>fluorouracil (2 % solution, 5 % cream (g), 5 % solution)</i>	1	
<i>gemcitabine hcl (1 g vial, 1 g/26.3ml vial, 2 g vial, 2 g/52.6ml vial, 200 mg vial, 200mg/5.26 vial)</i>	SP1	
<i>hydroxyurea</i>	1	
LONSURF	SP1	PA
<i>mercaptopurine</i>	1	
PURIXAN	SP1	PA
XELODA	SP1	PA
ANTINEOPLASTICS, OTHER		
ABRAXANE	SP3	
ALUNBRIG	SP1	PA
<i>amifostine crystalline</i>	SP1	
<i>azacitidine</i>	SP2	
BCG (TICE STRAIN)	SP1	
<i>carboplatin 10 mg/ml vial</i>	SP1	
DACOGEN	SP4	
DOCEFREZ	SP1	
<i>docetaxel</i>	SP1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOXIL	SP1	
FARYDAK	SP1	PA
HALAVEN	SP3	PA
IDHIFA	SP1	PA
<i>irinotecan hcl</i>	SP1	
IXEMPRA	SP3	
JEVTANA	SP4	PA
<i>leucovorin calcium (5 mg tablet, 10 mg tablet, 15 mg tablet, 25 mg tablet)</i>	1	
LYNPARZA	SP1	PA
<i>mitoxantrone hcl 2 mg/ml vial</i>	SP2	
<i>oxaliplatin (50 mg vial, 50 mg/10ml vial, 100 mg vial, 100mg/20ml vial)</i>	SP1	
PROLEUKIN	SP2	
PROVENGE	SP4	QL 750 / 1 LIFETIME PA
RUBRACA	SP1	PA
RYDAPT	SP1	PA
THERACYS	SP1	
TRISENOX 10 MG/10 ML AMPULE	SP4	
VELCADE	SP1	
VIDAZA	SP2	
ZALTRAP	SP4	PA
ZOLINZA	SP1	PA
AROMATASE INHIBITORS, 3RD GENERATION		
<i>anastrozole</i>	1	
<i>exemestane</i>	1	
<i>letrozole</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENZYME INHIBITORS		
<i>etoposide 50 mg capsule</i>	SP1	PA
HYCAMTIN (0.25 MG CAPSULE, 1 MG CAPSULE)	SP1	PA
<i>topotecan hcl (4 mg vial, 4 mg/4 ml vial)</i>	SP2	
MOLECULAR TARGET INHIBITORS		
AFINITOR	SP1	PA
AFINITOR DISPERZ	SP1	PA
ALECENSA	SP1	PA
BOSULIF (100 MG TABLET, 500 MG TABLET)	SP1	PA
CABOMETYX	SP1	PA
CALQUENCE	SP1	PA
CAPRELSA	SP1	PA
COMETRIQ	SP1	PA
COTELLIC	SP1	PA
ERIVEDGE	SP1	PA
GILOTRIF	SP1	PA
GLEEVEC	SP1	PA
IBRANCE	SP1	PA
ICLUSIG	SP1	PA
<i>imatinib mesylate</i>	SP1	PA
IMBRUVICA	SP1	PA
INLYTA	SP1	PA
IRESSA	SP1	PA
JAKAFI	SP1	PA
KISQALI	SP1	PA
KISQALI FEMARA CO-PACK	SP1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LENVIMA	SP1	PA
MEKINIST	SP1	PA
NERLYNX	SP1	PA
NEXAVAR	SP1	PA
NINLARO	SP1	PA
ODOMZO	SP1	PA
SPRYCEL	SP1	PA
STIVARGA	SP1	PA
SUTENT	SP1	PA
TAFINLAR	SP1	PA
TAGRISSO	SP1	PA
TARCEVA	SP1	PA
TASIGNA	SP1	PA
TORISEL	SP3	
TYKERB	SP1	PA
VENCLEXTA	SP1	PA
VENCLEXTA STARTING PACK	SP1	PA
VERZENIO	SP1	PA
VOTRIENT	SP1	PA
XALKORI	SP1	PA
ZEJULA	SP1	PA
ZELBORAF	SP1	PA
ZYDELIG	SP1	PA
ZYKADIA	SP1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>MONOCLONAL ANTIBODIES</b>		
ARZERRA	SP3	PA
AVASTIN	SP1	
ERBITUX	SP2	PA
GAZYVA	SP2	PA
HERCEPTIN	SP1	
KADCYLA	SP1	PA
KEYTRUDA (50 MG VIAL, 100 MG/4 ML VIAL)	SP4	PA
OPDIVO	SP2	PA
PERJETA	SP1	PA
RITUXAN	SP1	
VECTIBIX	SP2	PA
YERVOY	SP4	PA
ZEVALIN	SP2	PA
<b>RETINOIDS</b>		
<i>bexarotene</i>	SP1	PA
TARGRETIN (75 MG CAPSULE, 75 MG SOFTGEL)	SP1	PA
TARGRETIN 1% GEL	SP2	
<i>tretinoin 10 mg capsule</i>	SP1	PA
<b>ANTIPARASITICS</b>		
<b>ANTIHELMINTHICS</b>		
ALBENZA	2	
<i>ivermectin</i>	1	
<b>ANTIPROTOZOALS</b>		
<i>atovaquone/proguanil hcl</i>	1	
<i>chloroquine phosphate</i>	1	
DARAPRIM	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydroxychloroquine sulfate</i>	1	
<i>mefloquine hcl</i>	1	
NEBUPENT	2	
<i>primaquine phosphate</i>	2	
PEDICULICIDES/SCABICIDES		
EURAX	2	
<i>lindane</i>	2	
<i>permethrin 5 % cream (g)</i>	1	
ANTIPARKINSON AGENTS		
ANTICHOLINERGICS		
<i>benztropine mesylate (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	MN
<i>trihexyphenidyl hcl (2 mg/5 ml elixir, 5 mg tablet)</i>	1	MN
<i>trihexyphenidyl hcl 2 mg tablet</i>	1	
ANTIPARKINSON AGENTS, OTHER		
<i>amantadine hcl (50 mg/5 ml solution, 100 mg capsule, 100 mg tablet)</i>	1	MN
<i>entacapone</i>	3	MN
DOPAMINE AGONISTS		
APOKYN	SP3	
<i>bromocriptine mesylate</i>	1	MN
<i>pramipexole di-hcl (0.125 mg tablet, 0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet)</i>	1	MN
<i>ropinirole hcl (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet)</i>	1	MN
DOPAMINE PRECURSORS/L-AMINO ACID DECARBOXYLASE INHIBITORS		
<i>carbidopa/levodopa (carbidopa/levodopa 10mg-100mg tablet, carbidopa/levodopa 25mg-100mg tablet, carbidopa/levodopa 25mg-100mg tablet er, carbidopa/levodopa 25mg-250mg tablet, carbidopa/levodopa 50mg-200mg tablet er)</i>	1	MN
MONOAMINE OXIDASE B (MAO-B) INHIBITORS		
<i>rasagiline mesylate</i>	3	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>selegiline hcl</i>	1	MN
<b>ANTIPSYCHOTICS</b>		
<b>1ST GENERATION/TYPICAL</b>		
<i>chlorpromazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	1	
<i>fluphenazine hcl (1 mg tablet, 2.5 mg tablet, 2.5 mg/5ml elixir, 5 mg tablet, 5 mg/ml oral conc, 10 mg tablet)</i>	1	
<i>haloperidol</i>	1	
<i>haloperidol lactate 2 mg/ml oral conc</i>	1	
<i>loxapine succinate</i>	1	
<i>pimozide</i>	1	
<i>thioridazine hcl</i>	1	
<i>thiothixene</i>	1	
<i>trifluoperazine hcl</i>	1	
<b>2ND GENERATION/ATYPICAL</b>		
<i>aripiprazole (1 mg/ml solution, 2 mg tablet, 5 mg tablet, 10 mg tab rapdis, 10 mg tablet, 15 mg tab rapdis, 15 mg tablet, 20 mg tablet, 30 mg tablet)</i>	1	
FANAPT	3	PA
LATUDA (20 MG TABLET, 40 MG TABLET, 60 MG TABLET)	3	PA MDD 1 PER DAY
LATUDA (80 MG TABLET, 120 MG TABLET)	3	PA
<i>olanzapine (2.5 mg tablet, 5 mg tab rapdis, 5 mg tablet, 7.5 mg tablet, 10 mg tab rapdis, 10 mg tablet, 15 mg tab rapdis, 15 mg tablet, 20 mg tab rapdis, 20 mg tablet)</i>	1	
<i>paliperidone</i>	3	
<i>quetiapine fumarate</i>	1	
RISPERDAL CONSTA	SP2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>risperidone (0.25 mg tab rapdis, 0.25 mg tablet, 0.5 mg tab rapdis, 0.5 mg tablet, 1 mg tab rapdis, 1 mg tablet, 1 mg/ml solution, 2 mg tab rapdis, 2 mg tablet, 3 mg tab rapdis, 3 mg tablet, 4 mg tab rapdis, 4 mg tablet)</i>	1	
SAPHRIS	3	PA
VRAYLAR	3	PA
<i>ziprasidone hcl</i>	1	
TREATMENT-RESISTANT		
<i>clozapine (12.5 mg tab rapdis, 25 mg tab rapdis, 100 mg tab rapdis, 150 mg tab rapdis, 200 mg tab rapdis)</i>	3	
<i>clozapine (25 mg tablet, 50 mg tablet, 100 mg tablet, 200 mg tablet)</i>	1	
ANTISPASTICITY AGENTS		
<i>baclofen</i>	1	
<i>dantrolene sodium (25 mg capsule, 50 mg capsule, 100 mg capsule)</i>	3	
<i>tizanidine hcl (2 mg tablet, 4 mg tablet)</i>	1	
ANTIVIRALS		
ANTI-CYTOMEGALOVIRUS (CMV) AGENTS		
<i>valganciclovir hcl 450 mg tablet</i>	1	
ANTI-HEPATITIS B (HBV) AGENTS		
<i>adefovir dipivoxil</i>	SP2	
BARACLUDE (0.05 MG/ML SOLUTION, 0.5 MG TABLET, 1 MG TABLET)	SP3	
<i>entecavir</i>	SP3	
EPIVIR HBV 25 MG/5 ML SOLN	2	
HEPSERA	SP2	
<i>lamivudine 100 mg tablet</i>	1	
ANTI-HEPATITIS C (HCV) AGENTS		
INFERGEN	SP3	
INTRON A (10 MILLION UNITS VIL, 18 MILLION UNIT/3 ML, 18 MILLION UNITS VIL, 25 MILLION UNIT/2.5ML, 50 MILLION UNITS VIL)	SP1	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAVYRET	SP2	PA
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	SP1	
PEGASYS PROCLICK	SP1	
PEGINTRON	SP1	
PEGINTRON REDIPEN	SP1	
<i>ribavirin (200 mg capsule, 200 mg tablet)</i>	1	
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI)		
ISENTRESS 400 MG TABLET	SP1	
ISENTRESS HD	SP1	
STRIBILD	SP1	
ANTI-HIV AGENTS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NNRTI)		
ATRIPLA	2	
COMPLERA	SP1	
<i>nevirapine (50 mg/5 ml oral susp, 200 mg tablet, 400 mg tab er 24h)</i>	1	
RESCRIPTOR	2	
SUSTIVA	2	
ANTI-HIV AGENTS, NUCLEOSIDE AND NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI)		
<i>abacavir sulfate 300 mg tablet</i>	1	
<i>abacavir sulfate/lamivudine/zidovudine</i>	3	
<i>didanosine</i>	1	
EMTRIVA (10 MG/ML SOLUTION, 200 MG CAPSULE)	2	
<i>lamivudine (10 mg/ml solution, 150 mg tablet, 300 mg tablet)</i>	1	
<i>lamivudine/zidovudine</i>	1	
<i>stavudine (1 mg/ml soln recon, 15 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	1	
TRUVADA	2	
VIDEX	2	
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, 300 MG TABLET, POWDER)	2	
<i>zidovudine (10 mg/ml syrup, 100 mg capsule, 300 mg tablet)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-HIV AGENTS, OTHER		
SELZENTRY (20 MG/ML ORAL SOLN, 25 MG TABLET, 75 MG TABLET, 150 MG TABLET, 300 MG TABLET)	3	
ANTI-HIV AGENTS, PROTEASE INHIBITORS		
CRIVIVAN	2	
INVIRASE	2	
KALETRA (100-25 MG TABLET, 200-50 MG TABLET)	2	
<i>lopinavir/ritonavir</i>	1	
NORVIR (80 MG/ML SOLUTION, 100 MG SOFTGEL CAP, 100 MG TABLET)	2	
REYATAZ	2	
VIRACEPT	2	
ANTI-INFLUENZA AGENTS		
<i>oseltamivir phosphate (6 mg/ml susp recon, 30 mg capsule, 75 mg capsule)</i>	3	
<i>oseltamivir phosphate 45 mg capsule</i>	3	QL 10 / 30 DAYS
<i>rimantadine hcl</i>	1	
ANTIHERPETIC AGENTS		
<i>acyclovir (5 % oint. (g), 200 mg capsule, 200 mg/5ml oral susp, 400 mg tablet, 800 mg tablet)</i>	1	
<i>famciclovir</i>	3	
<i>trifluridine</i>	1	
<i>valacyclovir hcl</i>	3	
ZOVIRAX 5% CREAM	2	
ANXIOLYTICS		
ANXIOLYTICS, OTHER		
<i>bupirone hcl</i>	1	
<i>meprobamate</i>	1	
BENZODIAZEPINES		
<i>alprazolam (0.25 mg tablet, 0.5 mg tab er 24h, 0.5 mg tablet, 1 mg tab er 24h, 1 mg tablet, 2 mg tab er 24h, 2 mg tablet, 3 mg tab er 24h)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chlordiazepoxide hcl</i>	1	
<i>clonazepam (0.125 mg tab rapdis, 0.25 mg tab rapdis, 0.5 mg tab rapdis, 0.5 mg tablet, 1 mg tab rapdis, 1 mg tablet, 2 mg tab rapdis, 2 mg tablet)</i>	1	MN
<i>clorazepate dipotassium</i>	1	
<i>diazepam (2 mg tablet, 5 mg tablet, 5 mg/5 ml solution, 5 mg/ml oral conc, 10 mg tablet)</i>	1	
KLONOPIN	2	MN
<i>lorazepam (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	
<i>oxazepam</i>	1	
BIPOLAR AGENTS		
MOOD STABILIZERS		
<i>lithium carbonate</i>	1	MN
<i>lithium citrate</i>	1	MN
BLOOD GLUCOSE REGULATORS		
ANTIDIABETIC AGENTS		
<i>acarbose</i>	1	MN
BYDUREON	3	MN
BYDUREON BCISE	3	MN
BYDUREON PEN	3	MN
BYETTA	3	MN
<i>chlorpropamide</i>	1	MN
<i>glimepiride</i>	1	MN
<i>glipizide (2.5 mg tab er 24, 5 mg tab er 24, 5 mg tablet, 10 mg tab er 24)</i>	1	MN
<i>glipizide 10 mg tablet</i>	1	
<i>glipizide/metformin hcl</i>	1	MN
<i>glyburide</i>	1	MN
<i>glyburide,micronized</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glyburide/metformin hcl</i>	1	MN
INVOKAMET	2	MN
INVOKANA	2	MN
JANUMET	2	MN
JANUMET XR	2	MN
JANUVIA	2	MN
JARDIANCE	2	MN
JENTADUETO	2	MN
JENTADUETO XR	2	MN
<i>metformin hcl (500 mg tab er 24h, 500 mg tablet, 750 mg tab er 24h, 850 mg tablet, 1000 mg tablet)</i>	1	MN
<i>nateglinide</i>	3	MN
<i>pioglitazone hcl</i>	1	MN
<i>pioglitazone hcl/glimepiride</i>	3	MN
<i>pioglitazone hcl/metformin hcl</i>	3	MN
<i>repaglinide</i>	3	MN
SYNJARDY	2	MN
<i>tolazamide</i>	1	MN
<i>tolbutamide</i>	1	MN
TRADJENTA	2	MN
VICTOZA 2-PAK	3	MN
VICTOZA 3-PAK	3	MN
GLYCEMIC AGENTS		
GLUCAGEN (1 MG, 1 MG 2-PACK)	2	QL 2 / 25 DAY(S)
GLUCAGON EMERGENCY KIT	2	QL 2 / 25 DAYS
PROGLYCEM	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULINS		
APIDRA	3	MN
APIDRA SOLOSTAR	3	MN
HUMALOG	2	MN
HUMALOG JUNIOR KWIKPEN	2	MN
HUMALOG KWIKPEN U-100	2	MN
HUMALOG KWIKPEN U-200	2	MN
HUMALOG MIX 50-50	2	MN
HUMALOG MIX 50-50 KWIKPEN	2	MN
HUMALOG MIX 75-25	2	MN
HUMALOG MIX 75-25 KWIKPEN	2	MN
HUMULIN 70-30	2	MN
HUMULIN 70/30 KWIKPEN	2	MN
HUMULIN N	2	MN
HUMULIN N KWIKPEN	2	MN
HUMULIN R	2	MN
HUMULIN R U-500	2	MN
HUMULIN R U-500 KWIKPEN	2	MN
LANTUS	2	MN
LANTUS SOLOSTAR	2	MN
LEVEMIR	2	MN
LEVEMIR FLEXPEN	2	MN
LEVEMIR FLEXTOUCH	2	MN
NOVOLIN 70-30	2	MN
NOVOLIN N	2	MN
NOVOLIN R	2	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLOG	2	MN
NOVOLOG FLEXPEN	2	MN
NOVOLOG MIX 70-30	2	MN
NOVOLOG MIX 70-30 FLEXPEN	2	MN
TOUJEO SOLOSTAR	2	MN
TRESIBA FLEXTOUCH U-100	2	MN
TRESIBA FLEXTOUCH U-200	2	MN
BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS		
ANTICOAGULANTS		
ARIXTRA	SP2	
COUMADIN	2	MN
ELIQUIS	2	MN
<i>enoxaparin sodium</i>	1	
<i>fondaparinux sodium</i>	SP2	
FRAGMIN	SP3	
<i>heparin sodium,porcine (10 unit/ml vial, 100/ml (1) syringe, 100/ml vial, 200/2 ml syringe, 300/3 ml syringe, 500/5 ml syringe, 1000/ml vial, 5000/ml vial, 5000/ml(1) cartridge, 10000/ml vial, 20000/ml vial)</i>	1	
<i>heparin sodium,porcine in 0.9 % sodium chloride (sod,porcine/0.9 % 10 unit/ml kit, sod,porcine/0.9 % 100/ml kit)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>heparin sodium,porcine/pf (sodium,porcine/pf 1 unit/ml syringe, sodium,porcine/pf 10 unit/ml syringe, sodium,porcine/pf 10 unit/ml vial, sodium,porcine/pf 100/ml (1) syringe, sodium,porcine/pf 100/ml (1) vial, sodium,porcine/pf 200/2 ml syringe, sodium,porcine/pf 300/3 ml syringe, sodium,porcine/pf 500/5 ml syringe, sodium,porcine/pf 1000/10 ml syringe, sodium,porcine/pf 1000/ml vial, sodium,porcine/pf 5000/0.5ml syringe)</i>	1	
LOVENOX	SP1	
THROMBATE III	SP1	
<i>warfarin sodium (1 mg tablet, 2 mg tablet, 2.5 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet, 6 mg tablet, 7.5 mg tablet, 10 mg tablet)</i>	1	MN
XARELTO (10 MG TABLET, STARTER PACK)	2	
XARELTO (15 MG TABLET, 20 MG TABLET)	2	MN
BLOOD FORMATION MODIFIERS		
<i>anagrelide hcl</i>	1	
ARANESP	SP2	
EPOGEN	SP2	
LEUKINE	SP2	
MOZOBIL	SP2	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: purple; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div>9.6 / 30 DAYS</div> </div>
NEULASTA	SP1	
NEUPOGEN	SP1	
PROCRIT	SP2	
PROMACTA	SP2	<div style="background-color: brown; color: white; padding: 2px 5px; border-radius: 3px;">PA</div>
COAGULANTS		
ADVATE	SP1	
ALPHANATE	SP1	
ALPHANINE SD	SP1	
<i>aminocaproic acid (250 mg/ml solution, 500 mg tablet)</i>	1	
BEBULIN	SP1	
BENEFIX	SP1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FEIBA NF	SP1	
HELIXATE FS	SP1	
HEMOFIL M	SP1	
HUMATE-P	SP1	
KOATE-DVI	SP1	
KOGENATE FS	SP1	
KOVALTRY	SP1	
MONOCLATE-P	SP1	
MONONINE	SP1	
NOVOSEVEN RT	SP1	
PROFILNINE	SP1	
RECOMBINATE	SP1	
RIXUBIS	SP1	
<i>tranexamic acid 650 mg tablet</i>	1	
PLATELET MODIFYING AGENTS		
<i>aspirin/dipyridamole</i>	1	MN
BRILINTA	2	MN
<i>cilostazol</i>	1	MN
<i>clopidogrel bisulfate</i>	1	MN
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	1	MN
<i>prasugrel hcl</i>	1	MN
<i>ticlopidine hcl</i>	1	MN
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
<i>clonidine</i>	1	MN
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)</i>	1	MN
<i>guanfacine hcl (1 mg tablet, 2 mg tablet)</i>	1	MN
<i>methyl dopa</i>	1	MN



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>ALPHA-ADRENERGIC BLOCKING AGENTS</b>		
<i>doxazosin mesylate (1 mg tablet, 2 mg tablet, 4 mg tablet)</i>	1	
<i>doxazosin mesylate 8 mg tablet</i>	1	MN
<i>phenoxybenzamine hcl</i>	1	MN
<i>prazosin hcl</i>	1	MN
<i>terazosin hcl</i>	1	MN
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<i>candesartan cilexetil</i>	1	MN
<i>irbesartan</i>	1	
<i>losartan potassium</i>	1	MN
<i>valsartan</i>	1	MN
<b>ANGIOTENSIN-CONVERTING ENZYME (ACE) INHIBITORS</b>		
<i>benazepril hcl</i>	1	MN
<i>captopril</i>	1	MN
<i>enalapril maleate</i>	1	MN
<i>fosinopril sodium</i>	1	MN
<i>lisinopril</i>	1	MN
<i>quinapril hcl</i>	1	MN
<i>ramipril</i>	1	MN
<b>ANTIARRHYTHMICS</b>		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	1	MN
<i>disopyramide phosphate</i>	1	MN
<i>dofetilide</i>	3	
<i>flecainide acetate</i>	1	MN
<i>mexiletine hcl</i>	1	MN
MULTAQ	2	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORPACE CR	2	MN
<i>propafenone hcl (150 mg tablet, 225 mg tablet, 300 mg tablet)</i>	1	MN
<i>quinidine gluconate 324 mg tablet er</i>	1	MN
<i>quinidine sulfate (200 mg tablet, 300 mg tablet)</i>	1	MN
<i>sotalol hcl (80 mg tablet, 120 mg tablet, 160 mg tablet, 240 mg tablet)</i>	1	MN
<b>BETA-ADRENERGIC BLOCKING AGENTS</b>		
<i>acebutolol hcl</i>	1	MN
<i>atenolol</i>	1	MN
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	1	MN
<i>bisoprolol fumarate</i>	1	MN
BYSTOLIC	3	MN
<i>carvedilol</i>	1	MN
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	1	MN
<i>metoprolol succinate (25 mg tab er 24h, 200 mg tab er 24h)</i>	1	MN
<i>metoprolol succinate (50 mg tab er 24h, 100 mg tab er 24h)</i>	1	
<i>metoprolol tartrate (25 mg tablet, 37.5 mg tablet, 50 mg tablet, 75 mg tablet, 100 mg tablet)</i>	1	MN
<i>nadolol</i>	1	MN
<i>pindolol</i>	1	MN
<i>propranolol hcl (10 mg tablet, 20 mg tablet, 20 mg/5 ml solution, 40 mg tablet, 40mg/5ml solution, 60 mg cap sa 24h, 60 mg tablet, 80 mg cap sa 24h, 80 mg tablet, 120 mg cap sa 24h, 160 mg cap sa 24h)</i>	1	MN
<i>timolol maleate (5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	MN
<b>CALCIUM CHANNEL BLOCKING AGENTS</b>		
<i>amlodipine besylate</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diltiazem hcl (120 mg cap sa 24h, 120 mg capsule er, 180 mg cap sa 24h, 180 mg capsule er, 240 mg cap sa 24h, 240 mg capsule er, 300 mg cap sa 24h, 300 mg capsule er, 360 mg cap sa 24h, 360 mg capsule er, 420 mg cap sa 24h)</i>	1	
<i>diltiazem hcl (30 mg tablet, 60 mg cap er 12h, 60 mg tablet, 90 mg cap er 12h, 90 mg tablet, 120 mg cap er 12h, 120 mg cap er 24h, 120 mg cap er deg, 120 mg tablet, 180 mg cap er 24h, 180 mg cap er deg, 240 mg cap er 24h, 240 mg cap er deg, 300 mg cap er 24h, 360 mg cap er 24h)</i>	1	MN
<i>felodipine</i>	3	MN
<i>nifedipine (10 mg capsule, 30 mg tab er 24, 30 mg tablet er, 60 mg tab er 24, 60 mg tablet er, 90 mg tab er 24, 90 mg tablet er)</i>	1	MN
<i>nimodipine</i>	1	
<i>verapamil hcl (40 mg tablet, 80 mg tablet, 100 mg cap24h pct, 120 mg cap24h pel, 120 mg tablet, 120 mg tablet er, 180 mg cap24h pel, 180 mg tablet er, 200 mg cap24h pct, 240 mg cap24h pel, 300 mg cap24h pct, 360 mg cap24h pel)</i>	1	MN
<i>verapamil hcl 240 mg tablet er</i>	1	
<b>CARDIOVASCULAR AGENTS, OTHER</b>		
<b>ALDACTAZIDE 50-50 TABLET</b>	2	MN
<i>amiloride hcl/hydrochlorothiazide</i>	1	MN
<i>amlodipine besylate/benazepril hcl</i>	1	MN
<i>amlodipine besylate/valsartan</i>	3	MN
<i>amlodipine besylate/valsartan/hydrochlorothiazide</i>	3	MN
<i>atenolol/chlorthalidone</i>	1	MN
<i>benazepril hcl/hydrochlorothiazide (benazepril/hydrochlorothiazide 5-6.25mg tablet, benazepril/hydrochlorothiazide 20 mg-25mg tablet, benazepril/hydrochlorothiazide 20-12.5 mg tablet)</i>	1	MN
<i>benazepril/hydrochlorothiazide 10-12.5mg tablet</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	1	MN
<i>candesartan cilexetil/hydrochlorothiazide</i>	1	MN
<i>captopril/hydrochlorothiazide</i>	1	MN
<i>clonidine hcl/chlorthalidone</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CORLANOR	3	PA MN
<i>digoxin</i>	1	
<i>enalapril maleate/hydrochlorothiazide</i>	1	MN
ENTRESTO	3	PA MN
<i>fosinopril sodium/hydrochlorothiazide</i>	1	MN
<i>irbesartan/hydrochlorothiazide</i>	1	MN
LANOXIN (125 MCG TABLET, 250 MCG TABLET)	2	MN
<i>lisinopril/hydrochlorothiazide</i>	1	MN
<i>losartan potassium/hydrochlorothiazide</i>	1	MN
<i>mecamylamine hcl</i>	3	
<i>methyldopa/hydrochlorothiazide</i>	1	MN
<i>metoprolol tartrate/hydrochlorothiazide</i>	1	MN
<i>nadolol/bendroflumethiazide</i>	1	MN
<i>pentoxifylline</i>	1	
<i>propranolol hcl/hydrochlorothiazide</i>	1	MN
<i>quinapril hcl/hydrochlorothiazide</i>	1	MN
RANEXA	3	MN
<i>reserpine</i>	1	MN
<i>spironolactone/hydrochlorothiazide</i>	1	MN
TEKTURNA	3	MN
TEKTURNA HCT	3	MN
<i>triamterene/hydrochlorothiazide</i>	1	MN
<i>valsartan/hydrochlorothiazide</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DIURETICS, CARBONIC ANHYDRASE INHIBITORS</b>		
<i>acetazolamide</i>	1	MN
<b>DIURETICS, LOOP</b>		
<i>bumetanide (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	MN
<i>furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 40mg/5ml solution, 80 mg tablet)</i>	1	MN
<i>toremide 20 mg tablet</i>	1	MN
<b>DIURETICS, POTASSIUM-SPARING</b>		
<i>amiloride hcl</i>	1	MN
<i>spironolactone</i>	1	MN
<b>DIURETICS, THIAZIDE</b>		
<i>chlorothiazide</i>	1	MN
<i>chlorthalidone</i>	1	MN
<b>DIURIL</b>	2	MN
<i>hydrochlorothiazide (12.5 mg capsule, 12.5 mg tablet, 25 mg tablet)</i>	1	MN
<i>hydrochlorothiazide 50 mg tablet</i>	1	
<i>indapamide</i>	1	MN
<i>methyclothiazide</i>	1	MN
<i>metolazone</i>	1	MN
<b>DYSLIPIDEMICS, FIBRIC ACID DERIVATIVES</b>		
<i>fenofibrate (54 mg tablet, 160 mg tablet)</i>	1	MN
<i>fenofibrate nanocrystallized</i>	1	MN
<i>fenofibrate,micronized (67 mg capsule, 134 mg capsule, 200 mg capsule)</i>	1	MN
<i>fenofibric acid (choline)</i>	1	MN
<i>gemfibrozil</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DYSLIPIDEMICS, HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium (10 mg tablet, 20 mg tablet)</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>atorvastatin calcium (40 mg tablet, 80 mg tablet)</i>	1	MN
<i>lovastatin (10 mg tablet, 20 mg tablet)</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>lovastatin 40 mg tablet</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>pravastatin sodium (10 mg tablet, 80 mg tablet)</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>pravastatin sodium 20 mg tablet</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>pravastatin sodium 40 mg tablet</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>rosuvastatin calcium (20 mg tablet, 40 mg tablet)</i>	1	MN
<i>rosuvastatin calcium 10 mg tablet</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>rosuvastatin calcium 5 mg tablet</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN
<i>simvastatin</i>	1	C Ages 40-75 covered at \$0 preventive copay per ACA MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>DYSLIPIDEMICS, OTHER</b>		
ADVICOR	2	MN
<i>cholestyramine (with sugar) (4 g powd pack, 4 g powder)</i>	1	MN
<i>cholestyramine/aspartame (cholestyramine/aspartame 4 g powd pack, cholestyramine/aspartame 4 g powder)</i>	1	MN
COLESTID FLAVORED GRANULES	2	MN
<i>colestipol hcl</i>	1	MN
<i>ezetimibe</i>	3	MN
<i>niacin (500 mg tab er 24h, 750 mg tab er 24h, 1000 mg tab er 24h)</i>	1	MN
<i>omega-3 acid ethyl esters 1 g capsule</i>	3	MN
SIMCOR	2	MN
VASCEPA	3	MN
WELCHOL 625 MG TABLET	3	MN
<b>VASODILATORS, DIRECT-ACTING ARTERIAL</b>		
<i>hydralazine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet, 100 mg tablet)</i>	1	MN
<i>minoxidil (2.5 mg tablet, 10 mg tablet)</i>	1	MN
<b>VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS</b>		
DILATRATE-SR	2	MN
ISORDIL	2	
<i>isosorbide dinitrate (5 mg tablet, 10 mg tablet, 20 mg tablet, 30 mg tablet, 40 mg tablet er)</i>	1	MN
<i>isosorbide mononitrate</i>	1	MN
NITRO-BID	1	MN
NITRO-DUR (0.3 MG/HR PATCH, 0.8 MG/HR PATCH)	2	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nitroglycerin (0.1mg/hr patch td24, 0.2mg/hr patch td24, 0.3 mg tab subl, 0.4 mg tab subl, 0.4mg/hr patch td24, 0.6 mg tab subl, 0.6mg/hr patch td24, 2.5 mg capsule er, 6.5 mg capsule er, 9 mg capsule er, 400mcg/spr spray)</i>	1	MN
<b>CENTRAL NERVOUS SYSTEM AGENTS</b>		
<b>ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, AMPHETAMINES</b>		
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate</i>	1	
<i>dextroamphetamine sulfate (5 mg capsule er, 5 mg tablet, 10 mg capsule er, 10 mg tablet, 15 mg capsule er)</i>	1	
VYVANSE	2	
<b>ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, NON-AMPHETAMINES</b>		
<i>atomoxetine hcl</i>	1	
<i>clonidine hcl 0.1 mg tab er 12h</i>	1	
DAYTRANA	2	QL 30 / 30 DAY(S)
<i>dexmethylphenidate hcl (2.5 mg tablet, 5 mg tablet, 10 mg tablet)</i>	1	
<i>dexmethylphenidate hcl (5 mg cpbp 50-50, 10 mg cpbp 50-50, 15 mg cpbp 50-50, 20 mg cpbp 50-50, 25 mg cpbp 50-50, 30 mg cpbp 50-50, 35 mg cpbp 50-50, 40 mg cpbp 50-50)</i>	3	
<i>guanfacine hcl (1 mg tab er 24h, 2 mg tab er 24h, 3 mg tab er 24h, 4 mg tab er 24h)</i>	1	
<i>methylphenidate hcl (2.5 mg tab chew, 5 mg tab chew, 5 mg tablet, 5 mg/5 ml solution, 10 mg cpbp 30-70, 10 mg tab chew, 10 mg tablet, 10 mg tablet er, 10 mg/5 ml solution, 18 mg tab er 24, 20 mg cpbp 30-70, 20 mg cpbp 50-50, 20 mg tablet, 20 mg tablet er, 27 mg tab er 24, 30 mg cpbp 30-70, 30 mg cpbp 50-50, 36 mg tab er 24, 40 mg cpbp 30-70, 40 mg cpbp 50-50, 50 mg cpbp 30-70, 54 mg tab er 24, 60 mg cpbp 30-70, 60 mg cpbp 50-50)</i>	1	
QUILLICHEW ER	3	
QUILLIVANT XR	3	
RITALIN LA 10 MG CAPSULE	2	
<b>CENTRAL NERVOUS SYSTEM, OTHER</b>		
<i>butalbital/acetaminophen</i>	1	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>butalbital/acetaminophen/caffeine (butalb/acetaminophen/caffeine capsule, butalb/acetaminophen/caffeine tablet)</i>	1	
<i>riluzole</i>	3	
<b>FIBROMYALGIA AGENTS</b>		
<i>duloxetine hcl (20 mg capsule dr, 30 mg capsule dr, 60 mg capsule dr)</i>	1	MN
LYRICA (200 MG CAPSULE, 225 MG CAPSULE, 300 MG CAPSULE)	3	
LYRICA (25 MG CAPSULE, 50 MG CAPSULE, 75 MG CAPSULE, 100 MG CAPSULE, 150 MG CAPSULE)	3	MDD 3 PER DAY
LYRICA 20 MG/ML ORAL SOLUTION	3	QL 900 / 30 DAYS
SAVELLA	3	
<b>MULTIPLE SCLEROSIS AGENTS</b>		
AUBAGIO	SP2	PA
AVONEX (30 MCG VIAL KIT, PREFILLED SYR 30 MCG KT)	SP1	
AVONEX PEN	SP1	
COPAXONE	SP1	
EXTAVIA 0.3 MG KIT	SP2	
GILENYA	SP2	
<i>glatiramer acetate (20 mg/ml syringe, 40 mg/ml syringe)</i>	SP1	
PLEGRIDY	SP1	
PLEGRIDY PEN	SP1	
TECFIDERA	SP2	
TYSABRI	SP2	PA
<b>DENTAL AND ORAL AGENTS</b>		
<i>chlorhexidine gluconate 0.12 % mouthwash</i>	1	
<i>fluoride (sodium) (1.1 % cream (g), 1.1 % gel (gram))</i>	1	
FLUORIDEX SENSITIVITY RELIEF	2	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	1	
PREVIDENT	2	
PREVIDENT 5000	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVIDENT 5000 ENAMEL PROTECT	2	
PREVIDENT 5000 SENSITIVE	2	
<i>triamcinolone acetonide 0.1 % paste (g)</i>	1	
DERMATOLOGICAL AGENTS		
ABSORICA	2	PA
<i>acitretin</i>	3	
<i>adapalene (0.1 % cream (g), 0.1 % gel (gram), 0.1 % lotion, 0.3 % gel (gram), 0.3 % gel w/pump)</i>	1	
<i>adapalene/benzoyl peroxide</i>	3	
ANALPRAM HC 2.5%-1% LOTION	2	
AZELEX	2	
<i>calcipotriene (0.005 % cream (g), 0.005 % solution)</i>	1	
<i>calcipotriene/betamethasone dipropionate</i>	3	
<i>calcitriol 3 mcg/g oint. (g)</i>	3	
<i>clindamycin phosphate/benzoyl peroxide (phos/benzoyl 1 %-5 % gel (gram), phos/benzoyl 1 %-5 % gel w/pump, phos/benzoyl 1.2(1)%-5% gel (gram))</i>	1	
<i>clotrimazole/betamethasone dipropionate (clotrimazole/betamethasone 1 % cream (g), clotrimazole/betamethasone 1 % lotion)</i>	1	
CONDYLOX 0.5% GEL	2	
COSENTYX (2 SYRINGES)	SP2	PA
COSENTYX PEN	SP2	PA
COSENTYX PEN (2 PENS)	SP2	PA
COSENTYX SYRINGE	SP2	PA
<i>diclofenac sodium 1 % gel (gram)</i>	1	
ELIDEL	3	
EPIDUO 0.1-2.5% GEL	3	
EPIFOAM	2	
FLUOROPLEX	2	
<i>fluorouracil 0.5 % cream (g)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocortisone 2.5 % cream (g)</i>	1	
<i>hydrocortisone acetate/pramoxine hcl</i>	1	
<i>hydrocortisone/iodoquinol 1 %-1 % cream (g)</i>	1	
<i>imiquimod</i>	3	
<i>isotretinoin (10 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	1	
<i>methoxsalen 10 mg cap lq rap</i>	3	
<i>metronidazole (0.75 % cream (g), 0.75 % gel (gram), 0.75 % lotion, 1 % gel (gram), 1 % gel w/pump)</i>	1	
NORITATE	2	
PICATO	3	PA
<i>podofilox</i>	1	
PRAMOSONE (1% LOTION, 1%-1% CREAM, 1%-1% OINTMENT, 2.5%-1% CREAM, 2.5%-1% LOTION, 2.5%-1% OINTMENT)	2	
PROCTOFOAM-HC	2	
REGRANEX	2	
SANTYL	2	
<i>selenium sulfide (2.25 % shampoo, 2.5 % lotion)</i>	1	
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL, 90 MG/ML SYRINGE)	SP2	PA
<i>sulfacetamide sod/sulfur/urea 10%-5%-10% cleanser</i>	1	
<i>sulfacetamide sodium/sulfur (sodium/sulfur 9 %-4 % cleanser, sodium/sulfur 9 %-4.5 % cleanser, sodium/sulfur 10 %-1 % cleanser, sodium/sulfur 10 %-5 % foam, sodium/sulfur 10-5%(w/v) lotion, sodium/sulfur 10-5%(w/w) cleanser, sodium/sulfur 10-5%(w/w) lotion, sodium/sulfur 10-5%(w/w) suspension)</i>	1	
TACLONEX 0.005%-0.064% SUSPENS	3	
<i>tacrolimus (0.03 % oint. (g), 0.1 % oint. (g))</i>	3	
<i>tazarotene</i>	1	PA AL1 Up to 39 yrs old
TAZORAC (0.05% CREAM, 0.05% GEL, 0.1% GEL)	2	PA AL1 Up to 39 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRETIN-X 0.075% CREAM	2	PA AL1 Up to 39 yrs old
<i>tretinoin (0.01 % gel (gram), 0.025 % cream (g), 0.025 % gel (gram), 0.05 % cream (g), 0.1 % cream (g))</i>	1	PA AL1 Up to 39 yrs old
<i>tretinoin microspheres</i>	1	PA AL1 Up to 39 yrs old
ZYCLARA (2.5% CREAM PUMP, 3.75% CREAM, 3.75% CREAM PUMP)	3	
ENZYME REPLACEMENT/MODIFIERS		
ALDURAZYME	SP1	
CEREZYME	SP1	
CREON	2	
FABRAZYME	SP1	
PANCREAZE	2	
ZAVESCA	SP4	
ZENPEP	2	
GASTROINTESTINAL AGENTS		
ANTISPASMODICS, GASTROINTESTINAL		
<i>chlordiazepoxide/clidinium bromide</i>	1	
<i>dicyclomine hcl (10 mg capsule, 10 mg/5 ml solution, 20 mg tablet)</i>	1	
DONNATAL (ELIXIR, TABLET)	2	
<i>hyoscyamine sulfate (0.125 mg tab rapdis, 0.125 mg tab subl, 0.125 mg tablet, 0.125mg/ml drops, 0.375 mg tab er 12h, 125mcg/5ml elixir)</i>	1	
<i>phenobarb/hyoscy/atropine/scop 16.2 mg tablet</i>	1	
<i>propantheline bromide</i>	1	
SYMAX DUOTAB	2	
GASTROINTESTINAL AGENTS, OTHER		
<i>diphenoxylate hcl/atropine sulfate (hcl/atropine 2.5-.025/5 liquid, hcl/atropine 2.5-.025mg tablet)</i>	1	
<i>ursodiol</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>HISTAMINE2 (H2) RECEPTOR ANTAGONISTS</b>		
<i>cimetidine (300 mg tablet, 400 mg tablet, 800 mg tablet)</i>	1	
<i>cimetidine hcl</i>	1	
<i>nizatidine (150 mg capsule, 300 mg capsule)</i>	1	
<i>ranitidine hcl (15 mg/ml syrup, 150 mg capsule, 300 mg capsule, 300 mg tablet)</i>	1	
<b>IRRITABLE BOWEL SYNDROME AGENTS</b>		
<i>alosetron hcl</i>	3	
AMITIZA	3	
LINZESS	3	
VIBERZI	3	
<b>LAXATIVES</b>		
<i>bisac/nacl/nahco3/kcl/peg 3350 5 mg-210 g kit</i>	0	AL1 50 to 75 yrs old
<i>bisacodyl (5 mg tablet, 5 mg tablet dr)</i>	0	AL1 50 to 75 yrs old
CORRECTOL	0	AL1 50 to 75 yrs old
GOLYTELY PACKET	0	AL1 50 to 75 yrs old
<i>lactulose 10 g/15 ml solution</i>	1	
<i>peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride (peg3350/sod sulf,bicarb,cl/kcl 236-22.74g soln recon, peg3350/sod sulf,bicarb,cl/kcl 240-22.72g soln recon)</i>	0	AL1 50 to 75 yrs old
<i>polyethylene glycol 3350 (3350 17g powd pack, 3350 17g/dose powder)</i>	0	AL1 50 to 75 yrs old
<i>sodium chloride/nahco3/kcl/peg 420g soln recon</i>	0	AL1 50 to 75 yrs old
<b>PROTECTANTS</b>		
CARAFATE 1 GM/10 ML SUSP	2	
<i>misoprostol</i>	1	
<i>sucralfate</i>	1	
<b>PROTON PUMP INHIBITORS</b>		
PREVACID (15 MG, 30 MG)	2	AL1 Up to 11 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<b>GENITOURINARY AGENTS</b>		
<b>ANTISPASMODICS, URINARY</b>		
<i>darifenacin hydrobromide</i>	3	MN
<i>flavoxate hcl</i>	1	MN
<b>MYRBETRIQ</b>	2	MN
<i>oxybutynin chloride (5 mg tab er 24, 5 mg tablet, 5 mg/5 ml syrup, 10 mg tab er 24, 15 mg tab er 24)</i>	1	MN
<i>tolterodine tartrate</i>	1	MN
<i>tropium chloride 20 mg tablet</i>	1	MN
<i>tropium chloride 60 mg cap er 24h</i>	3	MN
<b>VESICARE</b>	2	MN
<b>BENIGN PROSTATIC HYPERTROPHY AGENTS</b>		
<i>alfuzosin hcl</i>	1	
<i>finasteride 5 mg tablet</i>	1	
<i>tamsulosin hcl</i>	1	
<b>GENITOURINARY AGENTS, OTHER</b>		
<i>bethanechol chloride</i>	1	
<b>CAVERJECT (IMPULSE 10 MCG KIT, 20 MCG VIAL, IMPULSE 20 MCG KIT, 40 MCG VIAL)</b>	3	
<i>citric acid/sodium citrate 334-500mg solution</i>	1	
<b>DEPEN</b>	SP2	PA
<b>EDEX</b>	3	
<b>ELMIRON</b>	2	
<b>K-PHOS NO.2</b>	2	
<b>K-PHOS ORIGINAL</b>	2	
<b>LITHOSTAT</b>	2	
<b>MUSE</b>	3	
<i>nonoxynol 9</i>	0	
<b>ORACIT</b>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>phenazopyridine hcl (100 mg tablet, 200 mg tablet)</i>	1	
<i>potassium citrate (5 tablet er, 10 tablet er)</i>	1	
<i>potassium citrate/citric acid</i>	1	
<i>sod phos di, mono/k phos mono 250 mg tablet</i>	1	
<i>sod/pot/k cit/sod cit/cit acid 500-550/5 solution</i>	1	
TODAY CONTRACEPTIVE SPONGE	0	
VCF	0	
<b>PHOSPHATE BINDERS</b>		
<i>calcium acetate 667 mg capsule</i>	1	
RENAGEL	3	
<i>sevelamer carbonate</i>	3	
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)</b>		
<i>alclometasone dipropionate</i>	1	
<i>amcinonide (0.1 % cream (g), 0.1 % lotion, 0.1 % oint. (g))</i>	1	
<i>betamethasone dipropionate (0.05 % cream (g), 0.05 % gel (gram), 0.05 % lotion, 0.05 % oint. (g))</i>	1	
<i>betamethasone dipropionate/propylene glycol (betamethasone/propylene 0.05 % cream (g), betamethasone/propylene 0.05 % lotion, betamethasone/propylene 0.05 % oint. (g))</i>	1	
<i>betamethasone valerate (0.1 % cream (g), 0.1 % lotion, 0.1 % oint. (g))</i>	1	
CAPEX SHAMPOO	2	
<i>clobetasol propionate (0.05 % cream (g), 0.05 % gel (gram), 0.05 % oint. (g), 0.05 % solution)</i>	1	
<i>clobetasol propionate (0.05 % foam, 0.05 % shampoo)</i>	3	
<i>clobetasol propionate/emoll 0.05 % cream (g)</i>	1	
<i>cortisone acetate</i>	1	
<i>desonide (0.05 % cream (g), 0.05 % lotion, 0.05 % oint. (g))</i>	1	
<i>desoximetasone (0.05 % cream (g), 0.05 % gel (gram), 0.25 % cream (g), 0.25 % oint. (g))</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexamethasone (0.5 mg tablet, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tablet, 1 mg tablet, 1 mg/ml drops, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	1	
<i>diflorasone diacetate (0.05 % cream (g), 0.05 % oint. (g))</i>	1	
<i>diflorasone diacetate/emollient base</i>	1	
<i>fludrocortisone acetate</i>	1	
<i>fluocinolone acetonide (0.01 % cream (g), 0.01 % oil, 0.01 % solution, 0.025 % cream (g), 0.025 % oint. (g))</i>	1	
<i>fluocinolone acetonide/shower cap</i>	1	
<i>fluocinonide (0.05 % cream (g), 0.05 % gel (gram), 0.05 % oint. (g), 0.05 % solution)</i>	1	
<i>fluocinonide/emollient base 0.05 % cream (g)</i>	1	
<i>fluticasone propionate (0.005 % oint. (g), 0.05 % cream (g))</i>	1	
<i>halobetasol propionate</i>	1	
HALOG	2	
<i>hydrocortisone (2.5 % crm/pe app, 2.5 % lotion, 2.5 % oint. (g), 5 mg tablet, 10 mg tablet, 20 mg tablet)</i>	1	
<i>hydrocortisone acetate 30 mg supp.rect</i>	1	
<i>hydrocortisone butyrate (0.1 % cream (g), 0.1 % oint. (g), 0.1 % solution)</i>	1	
<i>hydrocortisone valerate</i>	1	
MEDROL 2 MG TABLET	2	
<i>methylprednisolone</i>	1	
<i>mometasone furoate (0.1 % cream (g), 0.1 % oint. (g), 0.1 % solution)</i>	1	
<i>prednisolone (5 mg (21) tab ds pk, 5 mg (48) tab ds pk, 5 mg tablet, 15 mg/5 ml solution)</i>	1	
<i>prednisolone sod phosphate (5 mg/5 ml solution, 15 mg/5 ml solution, 25 mg/5 ml solution)</i>	1	
<i>prednisone</i>	1	
TEXACORT	2	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>triamcinolone acetonide (0.025 % cream (g), 0.025 % lotion, 0.025 % oint. (g), 0.05 % oint. (g), 0.1 % cream (g), 0.1 % lotion, 0.1 % oint. (g), 0.147mg/g aerosol, 0.5 % cream (g), 0.5 % oint. (g))</i>	1	
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)</b>		
<i>desmopressin (nonrefrigerated) 10/spray spray/pump</i>	1	
<i>desmopressin acetate</i>	1	
GENOTROPIN	SP4	PA
HUMATROPE	SP4	PA
NORDITROPIN FLEXPRO	SP1	PA
NORDITROPIN NORDIFLEX	SP1	PA
NUTROPIN	SP4	PA
NUTROPIN AQ	SP4	PA
NUTROPIN AQ NUSPIN (5, 20)	SP4	PA
SAIZEN	SP4	PA
SAIZEN-SAIZENPREP	SP4	PA
SEROSTIM	SP4	PA
STIMATE	2	
TEV-TROPIN	SP4	PA
ZOMACTON	SP4	PA
ZORBTIVE	SP4	PA
<b>HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)</b>		
<b>ANDROGENS</b>		
ANDRODERM	2	
ANDROGEL (1.62% GEL PUMP, 1.62%(1.25G) GEL PCKT, 1.62%(2.5G) GEL PCKT)	3	
<i>danazol</i>	1	
<i>fluoxymesterone</i>	1	
TESTOPEL	SP3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>testosterone (12.5/1.25g gel md pmp, 25mg(1%) gel packet, 50 mg (1%) gel (gram), 50 mg (1%) gel packet)</i>	3	
<i>testosterone cypionate</i>	1	
<i>testosterone enanthate 200 mg/ml vial</i>	1	
<b>ESTROGENS</b>		
ANGELIQ	2	MN
DELESTROGEN 10 MG/ML VIAL	2	
DEPO-ESTRADIOL	2	MN
<i>desog-e.estradiol/e.estradiol 21-5 tablet</i>	0	
<i>desogestrel-ethinyl estradiol (0.15-0.03 tablet, 7 days x 3 tablet)</i>	0	
<i>drosipir/eth estra/levomefol ca 3-0.02(24) tablet</i>	0	
DUAVEE	2	MN
ESTRACE 0.01% CREAM	2	
<i>estradiol (.025mg/24h patch tds, .025mg/24h patch tdwk, .0375mg/24 patch tds, .0375mg/24 patch tdwk, 0.05mg/24h patch tds, 0.05mg/24h patch tdwk, 0.06mg/24h patch tdwk, .075mg/24h patch tds, .075mg/24h patch tdwk, 0.1mg/24hr patch tds, 0.1mg/24hr patch tdwk, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	1	MN
<i>estradiol 10 mcg tablet</i>	3	
<i>estradiol valerate (20 mg/ml vial, 40 mg/ml vial)</i>	1	MN
<i>estradiol valerate 10 mg/ml vial</i>	1	
<i>estradiol/norethindrone acetate</i>	1	MN
<i>estrogens,esterified/methyltestosterone (estrogen,ester/me-testosterone 0.625-1.25 tablet, estrogen,ester/me-testosterone 1.25-2.5mg tablet)</i>	1	MN
<i>estropipate (0.75 mg tablet, 1.5 mg tablet)</i>	1	
<i>estropipate 3 mg tablet</i>	1	MN
<i>ethinyl estradiol/drospirenone (estradiol/drospirenone 0.02-3(24) tablet, estradiol/drospirenone 0.03mg-3mg tablet)</i>	0	
<i>ethynodiol diacetate-ethinyl estradiol (1 mg-35mcg tablet, 1 mg-50mcg tablet)</i>	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonorgestrel-ethinyl estradiol (0.1-0.02 tablet, 0.15-0.03 tablet, 0.15-0.03 tbdspk 3mo, 6-5-10 tablet, 90-20 mcg tablet)</i>	0	
<i>levonorgestrel/ethinyl estradiol and ethinyl estradiol (l-norgest/e.estradiol-e.estrad 0.15mg(84) tbdspk 3mo, l-norgest/e.estradiol-e.estrad 100-20(84) tbdspk 3mo, l-norgest/e.estradiol-e.estrad 150-30(84) tbdspk 3mo)</i>	0	
MENEST	2	MN
<i>norelgestromin/ethinyl estradiol</i>	0	
<i>norethindrone acetate-ethinyl estradiol (1mg-20mcg tablet, 1.5-0.03mg tablet)</i>	0	
<i>norethindrone acetate-ethinyl estradiol/ferrous fumarate (1mg-20(21) tablet, 1mg-20(24) tab chew, 1mg-20(24) tablet, 1.5-30(21) tablet, 5-7-9-7 tablet)</i>	0	
<i>norethindrone-ethinyl estradiol (0.4-0.035 tablet, 0.5-0.035 tablet, 1 mg-35mcg tablet, 7 days x 3 tablet, 7-9-5 tablet, 10-11 tablet)</i>	0	
<i>norethindrone-ethinyl estradiol/ferrous fumarate (estradiol/iron 0.4-35(21) tab chew, estradiol/iron 0.8-25(24) tab chew)</i>	0	
<i>norethindrone-mestranol</i>	0	
<i>norgestimate-ethinyl estradiol (0.25-0.035 tablet, 7daysx3 28 tablet, 7daysx3 lo tablet)</i>	0	
<i>norgestrel-ethinyl estradiol (0.3-0.03mg tablet, 0.5 mg-50 tablet)</i>	0	
NUVARING	0	
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	2	MN
PREMARIN VAGINAL CREAM-APPL	2	
PREMPHASE	2	MN
PREMPRO	2	MN
PROGESTERONE AGONISTS/ANTAGONISTS		
ELLA	0	
PROGESTINS		
DEPO-SUBQ PROVERA 104	0	
KYLEENA	0	
<i>levonorgestrel 1.5 mg tablet</i>	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LILETTA	0	
MAKENA (250 MG/ML VIAL, 1,250 MG/5 ML VIAL)	SP2	
<i>medroxyprogesterone acetate (150 mg/ml syringe, 150 mg/ml vial)</i>	0	
<i>medroxyprogesterone acetate (2.5 mg tablet, 5 mg tablet, 10 mg tablet)</i>	1	MN
<i>megestrol acetate (20 mg tablet, 40 mg tablet, 400mg/10ml oral susp)</i>	1	
MIRENA	0	
NEXPLANON	0	
<i>norethindrone 0.35 mg tablet</i>	0	
<i>norethindrone acetate</i>	1	MN
<i>progesterone</i>	1	MN
<i>progesterone, micronized</i>	1	
SKYLA	0	
SELECTIVE ESTROGEN RECEPTOR MODIFYING AGENTS		
<i>raloxifene hcl</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: black; color: white; padding: 5px; margin-right: 10px;">C</div> <div> <p>Covered at \$0 preventive copay for women 35 years and older per ACA. All other members covered at copay.</p> </div> </div> MN
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)		
ARMOUR THYROID	2	MN
<i>levothyroxine sodium (25 mcg tablet, 50 mcg tablet, 75 mcg tablet, 88 mcg tablet, 100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175mcg tablet, 200 mcg tablet, 300 mcg tablet)</i>	1	MN
<i>liothyronine sodium (5 mcg tablet, 25 mcg tablet, 50 mcg tablet)</i>	1	MN
NATURE-THROID	2	MN
SYNTHROID	2	MN
<i>thyroid,pork (15 mg tablet, 30 mg tablet, 60 mg tablet, 90 mg tablet, 120 mg tablet)</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THYROLAR-1	2	MN
THYROLAR-1/2	2	MN
THYROLAR-1/4	2	MN
THYROLAR-2	2	MN
THYROLAR-3	2	MN
WESTHROID	2	
WP THYROID	2	
HORMONAL AGENTS, SUPPRESSANT (PARATHYROID)		
SENSIPAR	SP4	
HORMONAL AGENTS, SUPPRESSANT (PITUITARY)		
<i>cabergoline</i>	1	
ELIGARD	SP1	
<i>leuprolide acetate 1 mg/0.2ml kit</i>	1	PA
LUPANETA PACK	SP1	
LUPRON DEPOT	SP1	
LUPRON DEPOT-PED	SP1	
<i>octreotide acetate (50 mcg/ml ampul, 50 mcg/ml syringe, 50 mcg/ml vial, 100 mcg/ml ampul, 100 mcg/ml syringe, 100 mcg/ml vial, 200 mcg/ml vial, 500 mcg/ml ampul, 500 mcg/ml syringe, 500 mcg/ml vial, 1000mcg/ml vial)</i>	SP1	
SANDOSTATIN LAR	SP1	
SANDOSTATIN LAR DEPOT	SP1	
SOMATULINE DEPOT	SP2	PA
SOMAVERT	SP2	
SUPPRELIN LA	SP1	PA
TRELSTAR (3.75 MG SYRINGE, 11.25 MG SYRINGE, 22.5 MG SYRINGE, 22.5 MG VIAL)	SP3	
VANTAS	SP2	
ZOLADEX	SP2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HORMONAL AGENTS, SUPPRESSANT (THYROID)		
ANTITHYROID AGENTS		
<i>methimazole</i>	1	
<i>potassium iodide 1 g/ml solution</i>	1	
<i>propylthiouracil</i>	1	
IMMUNOLOGICAL AGENTS		
IMMUNE SUPPRESSANTS		
<i>azathioprine</i>	1	
CELLCEPT (200 MG/ML ORAL SUSP, 250 MG CAPSULE, 500 MG TABLET, 500 MG VIAL)	SP1	
CIMZIA	SP2	PA
<i>cyclosporine (25 mg capsule, 100 mg capsule)</i>	1	
<i>cyclosporine 250 mg/5ml ampul</i>	SP1	
<i>cyclosporine, modified (25 mg capsule, 50 mg capsule, 100 mg capsule, 100 mg/ml solution)</i>	1	
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 50 MG/ML SYRINGE)	SP2	PA
ENBREL MINI	SP2	PA
ENBREL SURECLICK	SP2	PA
ENTYVIO	SP2	PA
ENVARUSUS XR	SP1	
HUMIRA	SP2	PA
HUMIRA PEDIATRIC CROHN'S	SP2	PA
HUMIRA PEN	SP2	PA
HUMIRA PEN CROHN-UC-HS STARTER	SP2	PA
HUMIRA PEN PSORIASIS-UVEITIS	SP2	PA
IMURAN	2	
KINERET	SP4	PA
<i>methotrexate sodium (2.5 mg tablet, 25 mg/ml vial)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methotrexate sodium/pf (sodium/pf 1 g vial, sodium/pf 25 mg/ml vial)</i>	1	
<i>mycophenolate mofetil (250 mg capsule, 500 mg tablet)</i>	1	
<i>mycophenolate mofetil 200 mg/ml susp recon</i>	SP1	
<i>mycophenolate mofetil hcl</i>	SP1	
<i>mycophenolate sodium</i>	SP1	
MYFORTIC	SP1	
NEORAL (25 MG GELATIN CAPSULE, 100 MG GELATIN CAPSULE, 100 MG/ML SOLUTION)	SP2	
ORENCIA (50 MG/0.4 ML SYRINGE, 87.5 MG/0.7 ML SYRINGE, 125 MG/ML SYRINGE, 250 MG VIAL)	SP3	PA
ORENCIA CLICKJECT	SP3	PA
PROGRAF (0.5 MG CAPSULE, 1 MG CAPSULE, 5 MG CAPSULE, 5 MG/ML AMPULE)	SP1	
RAPAMUNE (0.5 MG TABLET, 1 MG TABLET, 1 MG/ML ORAL SOLN, 2 MG TABLET)	SP2	
REMICADE	SP2	PA
RHEUMATREX	1	
SANDIMMUNE (25 MG CAPSULE, 50 MG/ML AMPUL, 100 MG CAPSULE, 100 MG/ML SOLN)	SP1	
SIMPONI	SP2	PA
<i>sirolimus</i>	SP2	
<i>tacrolimus (0.5 mg capsule, 1 mg capsule, 5 mg capsule)</i>	1	
IMMUNIZING AGENTS, PASSIVE		
ATGAM	SP3	
BIVIGAM	SP1	PA
CYTOGAM	SP3	PA
FLEBOGAMMA DIF	SP1	PA
GAMASTAN S-D	SP1	PA
GAMMAGARD LIQUID	SP1	PA
GAMMAGARD S-D	SP1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMMAKED	SP1	PA
GAMMAPLEX (5 GRAM/100 ML VIAL, 5 GRAM/50 ML VIAL, 10 GRAM/100 ML VIAL, 10 GRAM/200 ML VIAL, 20 GRAM/200 ML VIAL, 20 GRAM/400 ML VIAL)	SP1	PA
GAMUNEX-C	SP1	PA
<i>immune globulin,gamm(igg)/glycine/iga greater than 50 mcg/ml</i>	SP1	PA
<i>immune globulin,gamm(igg)/sucrose/iga greater than 50 mcg/ml</i>	SP1	PA
<i>immune globulin,gamma (igg)/proline/iga 0 to 50 mcg/ml</i>	SP1	PA
<i>immune globulin,gamma (igg)/sorbitol/iga 0 to 50 mcg/ml</i>	SP1	PA
NABI-HB	SP3	
OCTAGAM	SP1	PA
IMMUNOMODULATORS		
ACTEMRA	SP3	PA
ACTIMMUNE	SP3	
BENLYSTA (120 MG VIAL, 200 MG/ML AUTOINJECT, 200 MG/ML SYRINGE, 400 MG VIAL)	SP4	PA
<i>leflunomide</i>	1	
RIDAURA	2	
VACCINES		
ACA PREVENTIVE VACCINES	0	
BCG VACCINE (TICE STRAIN)	SP1	
SHINGRIX	0	AL1 At least 50 yrs old
VIVOTIF	2	
VIVOTIF BERNA	2	
ZOSTAVAX	0	AL1 At least 50 yrs old
INFLAMMATORY BOWEL DISEASE AGENTS		
AMINOSALICYLATES		
<i>balsalazide disodium</i>	1	
CANASA	2	



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DELZICOL	2	
DIPENTUM	2	
<i>mesalamine (4 g/60 ml enema, 800 mg tablet dr)</i>	1	
<i>mesalamine 1.2 g tablet dr</i>	3	
<i>mesalamine with cleansing wipes</i>	1	
PENTASA	2	
<b>GLUCOCORTICOIDS</b>		
<i>budesonide 3 mg capdr - er</i>	3	QL 90 / 30 DAYS
CORTIFOAM	2	
<i>hydrocortisone 100mg/60ml enema</i>	1	
<b>SULFONAMIDES</b>		
<i>sulfasalazine</i>	1	
<b>METABOLIC BONE DISEASE AGENTS</b>		
<i>alendronate sodium (5 mg tablet, 10 mg tablet, 35 mg tablet, 40 mg tablet, 70 mg tablet)</i>	1	MN
BONIVA 3 MG/3 ML SYRINGE	SP3	PA
<i>calcitonin, salmon, synthetic</i>	1	MN
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule, 1 mcg/ml solution)</i>	1	
<i>ergocalciferol (vitamin d2) 50000 unit capsule</i>	1	
<i>etidronate disodium</i>	1	MN
FORTEO	SP2	PA
<i>ibandronate sodium 150 mg tablet</i>	1	MN
<i>ibandronate sodium 3 mg/3 ml syringe</i>	SP3	PA
<i>pamidronate disodium (30 mg vial, 30mg/10ml vial, 60 mg/10ml vial, 90 mg vial, 90 mg/10ml vial)</i>	SP1	
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4mcg capsule)</i>	1	PA
<i>paricalcitol (2 mcg/ml vial, 5 mcg/ml vial)</i>	SP1	
PROLIA	SP3	QL 1 / 6 MONTH PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RECLAST	SP2	QL 100 / 12 MONTH
<i>risedronate sodium (5 mg tablet, 30 mg tablet, 35 mg tablet, 150 mg tablet)</i>	1	MN
TYMLOS	SP2	PA
XGEVA	SP3	PA
ZEMPLAR (2 MCG/ML VIAL, 5 MCG/ML VIAL, 10 MCG/2 ML VIAL)	SP1	
<i>zoledronic acid (4 mg vial, 4 mg/5 ml vial)</i>	SP2	
<i>zoledronic acid in mannitol and 0.9 % sodium chloride</i>	SP2	
<i>zoledronic acid in mannitol and water for injection</i>	SP2	QL 100 / 12 MONTH
ZOMETA (4 MG/100 ML INJECTION, 4 MG/5 ML VIAL)	SP2	
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>cervical cap</i>	0	
<i>condoms, female</i>	0	
<i>condoms, latex, lubricated each</i>	0	
<i>condoms, latex, non-lubricated each</i>	0	
<i>condoms, non-latex, lubricated</i>	0	
<i>diaphragms, contoured</i>	0	
<i>diaphragms, wide seal</i>	0	
EUFLEXXA	SP4	
HYALGAN	SP4	
<i>hyaluronate sod, cross-linked</i>	SP4	
<i>hyaluronate sodium 10 mg/ml syringe</i>	SP4	
<i>isomethept/dichlphn/acetaminop 65-100-325 capsule</i>	1	
<i>methylergonovine maleate 0.2 mg tablet</i>	1	
MONOVISC	SP4	
ORTHOVISC	SP4	
PARAGARD T 380-A	0	
PRIALT	SP4	
SYNVISC	SP4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNVISC-ONE	SP4	
THYROGEN	SP1	
XIAFLEX	SP3	PA
OPHTHALMIC AGENTS		
OPHTHALMIC AGENTS, OTHER		
<i>atropine sulfate (1 % drops, 1 % oint. (g))</i>	1	
<i>bacitracin/polymyxin b sulfate 500-10k/g oint. (g)</i>	1	
BLEPHAMIDE	2	
BLEPHAMIDE S.O.P.	2	
<i>cyclopentolate hcl</i>	1	
EYLEA	SP3	PA
<i>homatropine hbr 5 % drops</i>	1	
LACRISERT	2	
LUCENTIS	SP3	
MACUGEN	SP1	
<i>neomycin sulf/bacitracin/poly 3.5mg-400 oint. (g)</i>	1	
<i>neomycin/bacit/p-myx/hydrocort 3.5-10k-1 oint. (g)</i>	1	
<i>neomycin/polymyxin b sulfate/dexamethasone (neomycin/polymyxin b/dexametha 0.1 % drops susp, neomycin/polymyxin b/dexametha 3.5-10k-.1 oint. (g))</i>	1	
<i>neomycin/polymyxin b/hydrocort 3.5-10k-10 drops susp</i>	1	
<i>neomycin/polymyxn b/gramicidin 1.75mg-10k drops</i>	1	
<i>phenylephrine hcl (2.5 % drops, 10 % drops)</i>	1	
<i>polymyxin b sulfate/trimethoprim</i>	1	
PRED-G (1% DROPS, S.O.P. OINTMENT)	2	
RESTASIS	3	
RESTASIS MULTIDOSE	3	
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	1	
TOBRADEX EYE OINTMENT	2	
<i>tobramycin/dexamethasone</i>	1	
<i>tropicamide</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VISUDYNE	SP1	
OPHTHALMIC ANTI-ALLERGY AGENTS		
ALOCRIAL	2	
ALOMIDE	2	
<i>cromolyn sodium 4 % drops</i>	1	
<i>olopatadine hcl (0.1 % drops, 0.2 % drops)</i>	1	
OPHTHALMIC ANTI-INFLAMMATORIES		
<i>dexamethasone sod phosphate 0.1 % drops</i>	1	
<i>diclofenac sodium 0.1 % drops</i>	1	
FLAREX	2	
<i>fluorometholone</i>	1	
<i>flurbiprofen sodium</i>	1	
FML FORTE	2	
FML S.O.P.	2	
<i>ketorolac tromethamine (0.4 % drops, 0.5 % drops)</i>	1	
LOTEMAX (EYE DROPS, EYE OINTMENT, OPHTHALMIC GEL)	2	
MAXIDEX	2	
<i>prednisolone acetate</i>	1	
<i>prednisolone sod phosphate 1 % drops</i>	1	
VEXOL	2	
XIIDRA	3	
OPHTHALMIC ANTIGLAUCOMA AGENTS		
ALPHAGAN P 0.1% DROPS	2	MN
<i>apraclonidine hcl</i>	1	
AZOPT	2	
<i>betaxolol hcl 0.5 % drops</i>	1	MN
BETIMOL 0.25% EYE DROPS	2	
BETIMOL 0.5% EYE DROPS	2	MN
BETOPTIC S	2	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>brimonidine tartrate</i>	1	MN
<i>carteolol hcl</i>	1	MN
COMBIGAN	2	MN
<i>dorzolamide hcl</i>	1	MN
<i>dorzolamide hcl/timolol maleate</i>	1	MN
IOPIDINE 1% EYE DROPS	2	
<i>levobunolol hcl 0.25 % drops</i>	1	
<i>levobunolol hcl 0.5 % drops</i>	1	MN
<i>methazolamide</i>	1	MN
<i>metipranolol</i>	1	MN
PHOSPHOLINE IODIDE	2	MN
<i>pilocarpine hcl (1 % drops, 2 % drops, 4 % drops)</i>	1	MN
PILOPINE HS	2	
<i>timolol maleate (0.25 % drops, 0.5 % drops)</i>	1	
<i>timolol maleate (0.25 % sol-gel, 0.5 % drop daily, 0.5 % sol-gel)</i>	1	MN
TIMOPTIC OCUDOSE	2	MN
OPHTHALMIC PROSTAGLANDIN AND PROSTAMIDE ANALOGS		
<i>bimatoprost 0.03 % drops</i>	1	MN
<i>latanoprost</i>	1	MN
LUMIGAN	2	MN
OTIC AGENTS		
<i>acetic acid 2 % solution</i>	1	
CIPRO HC	2	
CIPRODEX	2	
COLY-MYCIN S	2	
CORTISPORIN-TC	2	
<i>hydrocortisone/acetic acid 1 %-2 % drops</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>neomycin sulfate/polymyxin b sulfate/hydrocortisone (neomycin/polymyxin b/hydrocort drops susp, neomycin/polymyxin b/hydrocort solution)</i>	1	
<b>RESPIRATORY TRACT/PULMONARY AGENTS</b>		
<b>ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS</b>		
ASMANEX	2	MN
ASMANEX HFA	2	MN
<i>budesonide (0.25mg/2ml ampul-neb, 0.5 mg/2ml ampul-neb, 1 mg/2 ml ampul-neb)</i>	1	AL1 Up to 8 yrs old MN
FLOVENT DISKUS	2	MN
FLOVENT HFA	2	MN
<i>flunisolide</i>	1	
<i>fluticasone propionate 50 mcg spray susp</i>	1	
PULMICORT FLEXHALER	2	MN
QVAR	2	MN
QVAR REDHALER	2	MN
<i>triamcinolone acetonide 55 mcg spray</i>	1	
<b>ANTIHISTAMINES</b>		
<i>azelastine hcl (137 mcg spray/pump, 205.5 mcg spray/pump)</i>	1	
<i>cyproheptadine hcl (2 mg/5 ml syrup, 4 mg tablet)</i>	1	
<i>hydroxyzine hcl (10 mg tablet, 10 mg/5 ml solution, 25 mg tablet, 50 mg tablet)</i>	1	
<i>hydroxyzine pamoate</i>	1	
<i>promethazine hcl (6.25mg/5ml syrup, 12.5 mg tablet, 25 mg tablet)</i>	1	
<b>ANTILEUKOTRIENES</b>		
<i>montelukast sodium</i>	1	MN
<b>BRONCHODILATORS, ANTICHOLINERGIC</b>		
ATROVENT HFA	2	MN
<i>ipratropium bromide</i>	1	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPIRIVA	2	MN
SPIRIVA RESPIMAT	2	MN
BRONCHODILATORS, SYMPATHOMIMETIC		
<i>albuterol sulfate (0.63mg/3ml vial-neb, 1.25mg/3ml vial-neb, 2 mg tablet, 2 mg/5 ml syrup, 2.5 mg/0.5 vial-neb, 2.5 mg/3ml vial-neb, 4 mg tab er 12h, 4 mg tablet, 5 mg/ml solution, 8 mg tab er 12h)</i>	1	MN
ARCAPTA NEOHALER	2	MN
EPINEPHRINE (0.15 MG AUTO-INJCT, 0.3 MG AUTO-INJECT)	2	QL 4 / 180 DAYS
<i>epinephrine (0.15/0.15 auto injct, 0.3mg/0.3 auto injct)</i>	1	QL 4 / 180 DAYS
FORADIL	2	MN
MAXAIR AUTOHALER	2	MN
<i>metaproterenol sulfate (10 mg tablet, 10 mg/5 ml syrup, 20 mg tablet)</i>	1	MN
PROAIR HFA	2	
PROAIR RESPICLICK	2	
PROVENTIL HFA	2	
SEREVENT DISKUS	2	MN
<i>terbutaline sulfate (2.5 mg tablet, 5 mg tablet)</i>	1	MN
VENTOLIN HFA	1	
CYSTIC FIBROSIS AGENTS		
TOBI	SP1	
TOBI PODHALER	SP1	
<i>tobramycin in 0.225 % sodium chloride</i>	SP1	
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
ELIXOPHYLLIN	2	MN
THEO-24	2	MN

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>theophylline anhydrous (80 mg/15ml solution, 100 mg tab er 12h, 200 mg tab er 12h, 300 mg tab er 12h, 400 mg tab er 24h, 450 mg tab er 12h, 600 mg tab er 24h)</i>	1	MN
<i>theophylline anhydrous 80 mg/15ml elixir</i>	1	
<b>PULMONARY ANTIHYPERTENSIVES</b>		
<i>epoprostenol sodium (glycine)</i>	SP2	
FLOLAN	SP2	
LETAIRIS	SP2	
OPSUMIT	SP2	
REVATIO 10 MG/12.5 ML VIAL	SP4	
<i>sildenafil citrate 10 mg/12.5 vial</i>	SP4	
<i>sildenafil citrate 20 mg tablet</i>	SP1	
TRACLEER (62.5 MG TABLET, 125 MG TABLET)	SP2	
TYVASO	SP2	
TYVASO INSTITUTIONAL START KIT	SP2	
TYVASO REFILL KIT	SP2	
TYVASO STARTER KIT	SP2	
VELETRI	SP2	
VENTAVIS	SP3	
<b>RESPIRATORY TRACT AGENTS, OTHER</b>		
ADVAIR DISKUS	2	MN
ADVAIR HFA	2	MN
ARALAST NP	SP3	
<i>benzonatate (100 mg capsule, 200 mg capsule)</i>	1	
BREO ELLIPTA	2	MN
<i>brompheniramine/pseudoephed/dm 2-30-10/5 syrup</i>	1	
<i>codeine phosphate/guaifenesin (phosphate/guaifenesin 6.3-100/5 liquid, phosphate/guaifenesin 10-100mg/5 liquid, phosphate/guaifenesin 20-200/10 liquid)</i>	1	
COMBIVENT RESPIMAT	2	MN
<i>cromolyn sodium 20 mg/2 ml ampul-neb</i>	1	MN



PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluticasone propionate/salmeterol xinafoate</i>	1	MN
<i>hydrocodone bitartrate/homatropine methylbromide</i>	1	
<i>hydrocodone polistirex/chlorpheniramine polistirex</i>	1	
<i>ipratropium bromide/albuterol sulfate</i>	1	MN
<i>phenylephrine hcl/prometh hcl 5-6.25mg/5 syrup</i>	1	
PROLASTIN C	SP3	
<i>promethazine hcl/codeine</i>	1	
<i>promethazine/dextromethorphan 6.25-15/5 syrup</i>	1	
<i>promethazine/phenyleph/codeine 6.25-5-10 syrup</i>	1	
<i>pseudoephed/codeine/guaifen 30-10-100 syrup</i>	1	
<i>pseudoephedrine hcl/codeine/chlorpheniramine</i>	1	
PULMOZYME	SP3	
REZIRA	2	
<i>sodium chloride for inhalation (0.9 % vial-neb, 3 % vial-neb, 7 % vial-neb, 10 % vial-neb)</i>	1	
SYMBICORT	3	MN
XOLAIR	SP3	PA
ZEMAIRA	SP3	
SKELETAL MUSCLE RELAXANTS		
BOTOX	SP1	PA
BOTOX COSMETIC	SP1	PA
<i>carisoprodol 350 mg tablet</i>	1	
<i>carisoprodol/aspirin 200-325 mg tablet</i>	1	
<i>chlorzoxazone 500 mg tablet</i>	1	
<i>cyclobenzaprine hcl (5 mg tablet, 10 mg tablet)</i>	1	
LIORESAL INTRATHECAL	SP4	
<i>metaxalone</i>	1	
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	1	
MYOBLOC	SP1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>orphenadrine citrate 100 mg tablet er</i>	1	
XEOMIN	SP2	PA
SLEEP DISORDER AGENTS		
GABA RECEPTOR MODULATORS		
<i>estazolam</i>	1	
<i>eszopiclone</i>	3	
<i>temazepam (7.5 mg capsule, 15 mg capsule, 30 mg capsule)</i>	1	
<i>triazolam</i>	1	
<i>zaleplon</i>	1	
<i>zolpidem tartrate (5 mg tablet, 10 mg tablet)</i>	1	
<i>zolpidem tartrate (6.25 mg tab mphase, 12.5 mg tab mphase)</i>	3	
SLEEP DISORDERS, OTHER		
<i>armodafinil</i>	1	
<i>flurazepam hcl</i>	1	
<i>modafinil</i>	3	
ROZEREM	3	
THERAPEUTIC NUTRIENTS/MINERALS/ELECTROLYTES		
ELECTROLYTE/MINERAL MODIFIERS		
EXJADE	SP1	PA
GALZIN	2	
<i>sodium polystyrene sulfonate (15 g/60 ml oral susp, 30 g/120ml enema, 50 g/200ml enema, powder)</i>	1	
<i>sodium polystyrene sulfonate/sorbitol solution</i>	1	
SPS	2	
ELECTROLYTE/MINERAL REPLACEMENT		
CITRANATAL BLOOM	2	
FERRALET 90	2	
<i>ferrous fumarate/ascorbic acid/b12-if/folic acid</i>	1	
<i>ferrous sulfate 15 mg/ml drops</i>	0	AL1 0.5 to 1 yrs old
FLORIVA 0.25 MG/ML DROPS	0	AL1 0.5 to 6 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUOR-A-DAY (0.25 MG TAB CHEW, 0.5 MG TAB CHEW, 2.5 MG/ML DROPS)	0	AL1 0.5 to 6 yrs old
FLUORABON	0	AL1 0.5 to 6 yrs old
<i>fluoride (sodium) (0.125/drop drops, 0.25(0.55) tab chew, 0.25mg/drp drops, 0.5 mg/ml drops, 0.5(1.1)mg tab chew)</i>	0	AL1 0.5 to 6 yrs old
<i>fluoride (sodium) 1mg(2.2mg) tab chew</i>	1	
FLUORITAB	2	
INTEGRA F	2	
INTEGRA PLUS	2	
<i>iron fumarate,polysac comp/folic acid/vitamin c/niacinamide</i>	1	
<i>iron,carbonyl 15mg/1.25 oral susp</i>	0	AL1 0.5 to 1 yrs old
IRONUP	0	AL1 0.5 to 1 yrs old
KLOR-CON	1	MN
MYKIDZ IRON 10	0	AL1 0.5 to 1 yrs old
NOVAFERRUM	0	AL1 0.5 to 1 yrs old
<i>potassium bicarbonate/cit ac 25 meq tablet eff</i>	1	MN
<i>potassium chloride (20 tab er prt, 20 tablet er)</i>	1	
<i>potassium chloride (8 meq capsule er, 8 meq tablet er, 10 meq capsule er, 10 meq tab er prt, 10 meq tablet er, 20 meq packet, 20meq/15ml liquid, 40meq/15ml liquid)</i>	1	MN
<i>potassium chloride 15 meq tab er prt</i>	2	
<i>potassium chloride/potassium bicarbonate/citric acid</i>	1	MN
PROFERRIN-FORTE	2	
CARNITOR 1 GM/5 ML VIAL	3	
CARNITOR SF	3	
CENTRUM SPECIALIST PRENATAL	0	
CLASSIC PRENATAL	0	
CONCEPT DHA	2	
<i>cyanocobalamin (vitamin b-12) 1000mcg/ml vial</i>	1	
EAA	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESCAVITE	0	AL1 0.5 to 6 yrs old
ESCAVITE D	0	AL1 0.5 to 6 yrs old
ESCAVITE LQ	0	AL1 0.5 to 6 yrs old
EXPECTA PRENATAL	0	
FLORIVA (0.25 MG CHEW TABLET, 0.5 MG CHEWABLE TABLET)	0	AL1 0.5 to 6 yrs old
FLORIVA PLUS	0	AL1 0.5 to 6 yrs old
<i>fluoride/iron/vitamins a,c,and d</i>	0	AL1 0.5 to 6 yrs old
<i>folic acid (0.4 mg tablet, 0.8 mg capsule, 0.8 mg tablet)</i>	0	
<i>folic acid 1 mg tablet</i>	1	
GLYTACTIN 15 PE BETTERMILK	2	
GLYTACTIN RESTORE 10 PE	2	
GLYTACTIN RESTORE 10 PE LITE	2	
GLYTACTIN RTD 10 PE	2	
GLYTACTIN RTD 15 PE	2	
KPN	0	
LANAFLEX	2	
<i>levocarnitine (200 mg/ml vial, 330 mg tablet)</i>	3	
<i>levocarnitine (with sugar)</i>	3	
LOPHLEX	2	
MAXINATE	0	
MEPHYTON	2	
MTERYTI FOLIC 5	0	
MVC-FLUORIDE (0.25 MG TAB CHEW, 0.5 MG TAB CHEW)	0	AL1 0.5 to 6 yrs old
MYKIDZ IRON	0	AL1 0.5 to 1 yrs old
MYKIDZ IRON FL	0	AL1 0.5 to 6 yrs old
NASCOBAL	2	
ONE A DAY WOMEN'S PRENATAL DHA	0	
ONE-A-DAY WOMEN'S PRENATAL 1	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pedi multivit no.16 w-fluoride 1 mg tab chew</i>	1	
<i>pedi multivit no.46/iron sulf 1500-10/ml drops</i>	0	AL1 0.5 to 1 yrs old
<i>pediatric multivit with a,c,d3 no.21/sodium fluoride (no.21/fluoride 0.25 mg/ml drops, no.21/fluoride 0.5 mg/ml drops)</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.150 with sodium fluoride</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.16/sodium fluoride (0.25 mg tab chew, 0.5 mg tab chew)</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.2/sodium fluoride (0.25 mg/ml drops, 0.5 mg/ml drops)</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.45/sodium fluoride/ferrous sulfate</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.75/sodium fluoride/ferrous sulfate</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamin no.82 with sodium fluoride</i>	0	AL1 0.5 to 6 yrs old
<i>pediatric multivitamins no.17 with sodium fluoride</i>	0	AL1 0.5 to 6 yrs old
PERIFLEX ADVANCE	2	
PERIFLEX INFANT	2	
PERIFLEX JUNIOR	2	
PERIFLEX LQ PKU	2	
PERRY PRENATAL	0	
PHENEX-1	2	
PHENEX-2	2	
PHENYL-FREE 1	2	
PHENYL-FREE 2	2	
PHENYL-FREE 2HP	2	
PHENYLADE (AMINO ACID POWDER, DRINK MIX POWDER)	2	
PHENYLADE AMINO ACID	2	
PHENYLADE ESSENTIAL (DRINK POWD, POWD PCKT)	2	
PHENYLADE GMP (POWDER, POWDER PKT)	2	
PHENYLADE MTE	2	
PHENYLADE PHEBLOC (POWDER PKT, TABLET)	2	
PHENYLADE RTD PKU 10	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENYLADE40	2	
PHENYLADE60 (DRINK MIX POWDER, POWDER PACKET)	2	
PHLEXY-10 DRINK MIX POWDER	2	
PKU 2	2	
PKU 3	2	
PKU COOLER 10	2	
PKU COOLER 15	2	
PKU COOLER 20	2	
PKU EASY MICROTAB	2	
PKU EXPRESS15	2	
PKU EXPRESS20	2	
PKU LOPHLEX	2	
PKU PERIFLEX JUNIOR PLUS	2	
<i>pnv no.95/ferrous fum/folic ac 28mg-0.8mg tablet</i>	0	
<i>pnv,calcium 72/iron/folic acid 27 mg-1 mg tablet</i>	1	
POLY-VI-FLOR (0.25 MG DROPS, 0.25 MG TAB CHEW, 0.5 MG TAB CHEW)	0	AL1 0.5 to 6 yrs old
POLY-VI-FLOR WITH IRON (0.25 MG, 0.5 MG)	0	AL1 0.5 to 6 yrs old
POLY-VI-SOL WITH IRON	0	AL1 0.5 to 1 yrs old
PRENATAL FORMULA-DHA	0	
<i>prenatal vit 40/iron/folic/dha 27-0.8-250 capsule</i>	0	
<i>prenatal vit calc,iron,folic tablet</i>	0	
<i>prenatal vit with calcium 75/iron/folic acid/omega-3/dha/epa (75/iron/folic/om3 28-800-223 combo. pkg, 75/iron/folic/om3 28-800-440 combo. pkg)</i>	0	
<i>prenatal vit with calcium 95/ferrous fumarate/folic acid/dha</i>	0	
<i>prenatal vit with calcium no.122/ferrous fumarate/folic acid</i>	0	
<i>prenatal vit with calcium no.128/ferrous fumarate/folic acid</i>	0	
<i>prenatal vit with calcium no.129/ferrous fumarate/folic acid</i>	0	
<i>prenatal vit with calcium no.130/ferrous fumarate/folic acid</i>	0	
<i>prenatal vit with calcium no.131/ferrous fumarate/folic acid</i>	0	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prenatal vit,cal 74/iron/folic 27 mg-1 mg tablet</i>	1	
<i>prenatal vitamin no.103/folic acid/omega-3s/dha/fish oil</i>	0	
<i>prenatal vitamin no.108/iron amino acid chelate/folic acid</i>	0	
<i>prenatal vitamins no.121/ferrous fumarate/folic acid</i>	0	
<i>prenatal vitamins no.62/folic acid/omega-3s/dha/epa/fish oil</i>	0	
<i>prenatal vitamins no.79/iron fum/folic acid/levomefolate/dha</i>	0	
<i>prenatal vitamins with calcium/ferrous fumarate/folic acid (vit/iron fum/folic 27mg-0.8mg tablet, vit/iron fum/folic 28mg-0.8mg tablet)</i>	0	
<i>prenatal vitamins with calcium/iron,carb/docusate/folic acid</i>	1	
<i>prenatal vits no.51/iron fumarate/folic acid/omega-3/dha/epa</i>	0	
<i>prenatal vits with calcium no.124/ferrous fumarat/folic acid</i>	0	
<i>prenatal vits with calcium no.21/ferrous fumarate/folic acid</i>	0	
<i>prenatal vits with calcium no.72/iron,carbonyl/folic acid</i>	1	
<i>prenatal vits with calcium no.90/ferrous fumarate/folic acid</i>	0	
<i>prenatal vits with calcium no.96/ferrous fumarate/folic acid</i>	0	
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QUFLORA (0.25 MG CHEW TAB, 0.25 MG/ML DROP, 0.5 MG CHEW TAB, 0.5 MG/ML DROP)	0	AL1 0.5 to 6 yrs old
QUFLORA FE 0.25 MG CHEW TABLET	0	AL1 0.5 to 6 yrs old
SIMILAC PRENATAL	0	
STUART ONE	0	
TEXAVITE LQ	0	AL1 0.5 to 6 yrs old
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Unclassified		
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GAMMAPLEX . . . . .	64	heparin sodium,porcine . . . . .	38
GAMUNEX-C . . . . .	64	heparin sodium,porcine in 0.9 % sodium chloride . . . . .	38
gatifloxacin . . . . .	16	heparin sodium,porcine/pf . . . . .	39
GAZYVA . . . . .	29	HEPLISAV-B . . . . .	79
gemcitabine hcl . . . . .	25	HEPSERA . . . . .	32
		HERCEPTIN . . . . .	29

HEXALEN . . . . .	24	hydromorphone hcl . . . . .	12
homatropine hbr . . . . .	67	hydroxychloroquine sulfate . . . . .	30
HUMALOG . . . . .	37	hydroxyurea . . . . .	25
HUMALOG JUNIOR KWIKPEN . . . . .	37	hydroxyzine hcl . . . . .	70
HUMALOG KWIKPEN U-100 . . . . .	37	hydroxyzine pamoate . . . . .	70
HUMALOG KWIKPEN U-200 . . . . .	37	hyoscyamine sulfate . . . . .	52
HUMALOG MIX 50-50 . . . . .	37		
HUMALOG MIX 50-50 KWIKPEN . . . . .	37		
HUMALOG MIX 75-25 . . . . .	37	ibandronate sodium . . . . .	65
HUMALOG MIX 75-25 KWIKPEN . . . . .	37	IBRANCE . . . . .	27
HUMATE-P . . . . .	40	ibuprofen . . . . .	10
HUMATROPE . . . . .	57	ICLUSIG . . . . .	27
HUMIRA . . . . .	62	IDHIFA . . . . .	26
HUMIRA PEDIATRIC CROHN'S . . . . .	62	imatinib mesylate . . . . .	27
HUMIRA PEN . . . . .	62	IMBRUVICA . . . . .	27
HUMIRA PEN CROHN-UC-HS STARTER . . . . .	62	imipramine hcl . . . . .	21
HUMIRA PEN PSORIASIS-UVEITIS . . . . .	62	imiquimod . . . . .	51
HUMULIN 70-30 . . . . .	37	immune globulin,gamm(igg)/glycine/iga greater than 50 mcg/ml . . . . .	64
HUMULIN 70/30 KWIKPEN . . . . .	37	immune globulin,gamm(igg)/sucrose/iga greater than 50 mcg/ml . . . . .	64
HUMULIN N . . . . .	37	immune globulin,gamma (igg)/proline/iga 0 to 50 mcg/ml . . . . .	64
HUMULIN N KWIKPEN . . . . .	37	immune globulin,gamma (igg)/sorbitol/iga 0 to 50 mcg/ml . . . . .	64
HUMULIN R . . . . .	37	IMURAN . . . . .	62
HUMULIN R U-500 . . . . .	37	indapamide . . . . .	45
HUMULIN R U-500 KWIKPEN . . . . .	37	INDOCIN . . . . .	10
HYALGAN . . . . .	66	indomethacin . . . . .	10
hyaluronate sod, cross-linked . . . . .	66	INFERGEN . . . . .	32
hyaluronate sodium . . . . .	66	INLYTA . . . . .	27
HYCANTIN . . . . .	27	INTEGRA F . . . . .	75
hydralazine hcl . . . . .	47	INTEGRA PLUS . . . . .	75
hydrochlorothiazide . . . . .	45	INTRON A . . . . .	32
hydrocodone bitartrate/acetaminophen . . . . .	12	INVIRASE . . . . .	34
hydrocodone bitartrate/homatropine methylbromide . 73		INVOKAMET . . . . .	36
hydrocodone polistirex/chlorpheniramine polistirex . 73		INVOKANA . . . . .	36
hydrocodone/ibuprofen . . . . .	12	IOPIDINE . . . . .	69
hydrocortisone . . . . .	51,56,65	ipratropium bromide . . . . .	70
hydrocortisone acetate . . . . .	56	ipratropium bromide/albuterol sulfate . . . . .	73
hydrocortisone acetate/pramoxine hcl . . . . .	51	irbesartan . . . . .	41
hydrocortisone butyrate . . . . .	56		
hydrocortisone valerate . . . . .	56		
hydrocortisone/acetic acid . . . . .	69		
hydrocortisone/iodoquinol . . . . .	51		

irbesartan/hydrochlorothiazide	44
IRESSA	27
irinotecan hcl	26
iron fumarate,polysac comp/folic acid/vitamin c/niacinamide	75
iron,carbonyl	75
IRONUP	75
ISENTRESS	33
ISENTRESS HD	33
isometheptene mucate/dichloralphenazone/acetaminophen	66
isoniazid	24
ISORDIL	47
isosorbide dinitrate	47
isosorbide mononitrate	47
isotretinoin	51
itraconazole	22
ivermectin	29
IXEMPRA	26

## J

JAKAFI	27
JANUMET	36
JANUMET XR	36
JANUVIA	36
JARDIANCE	36
JENTADUETO	36
JENTADUETO XR	36
JEVTANA	26

## K

K-PHOS NO.2	54
K-PHOS ORIGINAL	54
KADCYLA	29
KALETRA	34
KEPPRA	17
KEPPRA XR	17
ketoconazole	22
ketoprofen	10
ketorolac tromethamine	10,68
KEYTRUDA	29

KINERET	62
KISQALI	27
KISQALI FEMARA CO-PACK	27
KLONOPIN	35
KLOR-CON	75
KOATE-DVI	40
KOGENATE FS	40
KOVALTRY	40
KPN	76
KYLEENA	59

## L

labetalol hcl	42
LACRISERT	67
lactulose	53
LAMICTAL	18
LAMISIL	22
lamivudine	32,33
lamivudine/zidovudine	33
lamotrigine	18
LANAFLEX	76
LANOXIN	44
LANTUS	37
LANTUS SOLOSTAR	37
latanoprost	69
LATUDA	31
leflunomide	64
LENVIMA	28
LETAIRIS	72
letrozole	26
leucovorin calcium	26
LEUKERAN	24
LEUKINE	39
leuprolide acetate	61
LEVEMIR	37
LEVEMIR FLEXPEN	37
LEVEMIR FLEXTOUCH	37
levetiracetam	17
levobunolol hcl	69
levocarnitine	76
levocarnitine (with sugar)	76



levofloxacin . . . . .	16	MAVYRET . . . . .	33
levonorgestrel . . . . .	59	MAXAIR AUTOHALER . . . . .	71
levonorgestrel-ethinyl estradiol . . . . .	59	MAXIDEX . . . . .	68
levonorgestrel/ethinyl estradiol and ethinyl estradiol . . . . .	59	MAXINATE . . . . .	76
levorphanol tartrate . . . . .	11	mecamylamine hcl . . . . .	44
levothyroxine sodium . . . . .	60	meclofenamate sodium . . . . .	10
lidocaine . . . . .	12	MEDROL . . . . .	56
lidocaine hcl . . . . .	12	medroxyprogesterone acetate . . . . .	60
lidocaine/prilocaine . . . . .	12	mefenamic acid . . . . .	10
LILETTA . . . . .	60	mefloquine hcl . . . . .	30
lindane . . . . .	30	megestrol acetate . . . . .	60
LINZESS . . . . .	53	MEKINIST . . . . .	28
LIORESAL INTRATHECAL . . . . .	73	meloxicam . . . . .	10
liothyronine sodium . . . . .	60	melphalan . . . . .	24
lisinopril . . . . .	41	memantine hcl . . . . .	19
lisinopril/hydrochlorothiazide . . . . .	44	MENEST . . . . .	59
lithium carbonate . . . . .	35	meperidine hcl . . . . .	12
lithium citrate . . . . .	35	MEPHYTON . . . . .	76
LITHOSTAT . . . . .	54	meprobamate . . . . .	34
LOMUSTINE . . . . .	24	mercaptapurine . . . . .	25
LONSURF . . . . .	25	mesalamine . . . . .	65
LOPHLEX . . . . .	76	mesalamine with cleansing wipes . . . . .	65
lopinavir/ritonavir . . . . .	34	MESTINON . . . . .	23
lorazepam . . . . .	35	metaproterenol sulfate . . . . .	71
losartan potassium . . . . .	41	metaxalone . . . . .	73
losartan potassium/hydrochlorothiazide . . . . .	44	metformin hcl . . . . .	36
LOTEMAX . . . . .	68	methadone hcl . . . . .	11
lovastatin . . . . .	46	methazolamide . . . . .	69
LOVENOX . . . . .	39	methenamine hippurate . . . . .	14
loxapine succinate . . . . .	31	methenamine mandelate . . . . .	14
LUCENTIS . . . . .	67	methimazole . . . . .	62
LUMIGAN . . . . .	69	methocarbamol . . . . .	73
LUPANETA PACK . . . . .	61	methotrexate sodium . . . . .	62
LUPRON DEPOT . . . . .	61	methotrexate sodium/pf . . . . .	63
LUPRON DEPOT-PED . . . . .	61	methoxsalen . . . . .	51
LYNPARZA . . . . .	26	methyclothiazide . . . . .	45
LYRICA . . . . .	49	methyl dopa . . . . .	40
		methyl dopa/hydrochlorothiazide . . . . .	44
		methylergonovine maleate . . . . .	66
<b>M</b>		methylphenidate hcl . . . . .	48
MACUGEN . . . . .	67	methylprednisolone . . . . .	56
MAKENA . . . . .	60		

metipranolol . . . . .	69
metoclopramide hcl . . . . .	21
metolazone . . . . .	45
metoprolol succinate . . . . .	42
metoprolol tartrate . . . . .	42
metoprolol tartrate/hydrochlorothiazide . . . . .	44
metronidazole . . . . .	14,51
mexiletine hcl . . . . .	41
MIGRANAL . . . . .	23
minocycline hcl . . . . .	17
minoxidil . . . . .	47
MIRENA . . . . .	60
mirtazapine . . . . .	20
misoprostol . . . . .	53
mitoxantrone hcl . . . . .	26
modafinil . . . . .	74
mometasone furoate . . . . .	56
MONOCLATE-P . . . . .	40
MONONINE . . . . .	40
MONOVISC . . . . .	66
montelukast sodium . . . . .	70
MONUROL . . . . .	14
morphine sulfate . . . . .	11,12
moxifloxacin hcl . . . . .	16
MOZOBIL . . . . .	39
MTERYTI FOLIC 5 . . . . .	76
MULTAQ . . . . .	41
mupirocin . . . . .	14
mupirocin calcium . . . . .	14
MUSE . . . . .	54
MVC-FLUORIDE . . . . .	76
mycophenolate mofetil . . . . .	63
mycophenolate mofetil hcl . . . . .	63
mycophenolate sodium . . . . .	63
MYFORTIC . . . . .	63
MYKIDZ IRON . . . . .	76
MYKIDZ IRON 10 . . . . .	75
MYKIDZ IRON FL . . . . .	76
MYLERAN . . . . .	24
MYOBLOC . . . . .	73
MYRBETRIQ . . . . .	54

MYSOLINE . . . . .	18
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## N

NABI-HB . . . . .	64
nabumetone . . . . .	10
nadolol . . . . .	42
nadolol/bendroflumethiazide . . . . .	44
naftifine hcl . . . . .	22
NAFTIN . . . . .	22
naloxone hcl . . . . .	13
naltrexone hcl . . . . .	13
NAMENDA XR . . . . .	19
naproxen . . . . .	10
naproxen sodium . . . . .	10
naratriptan hcl . . . . .	23
NARCAN . . . . .	13
NASCOBAL . . . . .	76
NATACYN . . . . .	22
nateglinide . . . . .	36
NATURE-THROID . . . . .	60
NEBUPENT . . . . .	30
neomycin sulfate . . . . .	13
neomycin sulfate/bacitracin zinc/polymyxin b/hydrocortisone . . . . .	67
neomycin sulfate/bacitracin/polymyxin b . . . . .	67
neomycin sulfate/polymyxin b sulfate/gramicidin d . . . . .	67
neomycin sulfate/polymyxin b sulfate/hydrocortisone . . . . .	67,70
neomycin/polymyxin b sulfate/dexamethasone . . . . .	67
NEORAL . . . . .	63
NERLYNX . . . . .	28
NEULASTA . . . . .	39
NEUPOGEN . . . . .	39
NEURONTIN . . . . .	18
nevirapine . . . . .	33
NEXAVAR . . . . .	28
NEXPLANON . . . . .	60
niacin . . . . .	47
nicotine . . . . .	13
nicotine polacrilex . . . . .	13
NICOTROL . . . . .	13

NICOTROL NS	13	NUTROPIN	57
nifedipine	43	NUTROPIN AQ	57
NILANDRON	24	NUTROPIN AQ NUSPIN	57
nilutamide	24	NUVARING	59
nimodipine	43	nystatin	22
NINLARO	28	nystatin/triamcinolone acetonide	22
NITRO-BID	47		
NITRO-DUR	47	<b>O</b>	
nitrofurantoin	14	OCTAGAM	64
nitrofurantoin macrocrystal	14	octreotide acetate	61
nitrofurantoin monohydrate/macrocrystals	14	ODOMZO	28
nitroglycerin	48	ofloxacin	16
nizatidine	53	olanzapine	31
nonoxynol 9	54	olopatadine hcl	68
NORDITROPIN FLEXP	57	omega-3 acid ethyl esters	47
NORDITROPIN NORDIFLEX	57	ondansetron	21
norelgestromin/ethinyl estradiol	59	ondansetron hcl	21
norethindrone	60	ondansetron hcl/pf	21
norethindrone acetate	60	ONE A DAY WOMEN'S PRENATAL DHA	76
norethindrone acetate-ethinyl estradiol	59	ONE-A-DAY WOMEN'S PRENATAL 1	76
norethindrone acetate-ethinyl estradiol/ferrous fumarate	59	ONFI	18
norethindrone-ethinyl estradiol	59	OPDIVO	29
norethindrone-ethinyl estradiol/ferrous fumarate	59	OPSUMIT	72
norethindrone-mestranol	59	ORACIT	54
norgestimate-ethinyl estradiol	59	ORENCIA	63
norgestrel-ethinyl estradiol	59	ORENCIA CLICKJECT	63
NORITATE	51	orphenadrine citrate	74
NORPACE CR	42	ORTHOVISC	66
nortriptyline hcl	21	oseltamivir phosphate	34
NORVIR	34	oxaliplatin	26
NOVAFERRUM	75	oxaprozin	10
NOVOLIN 70-30	37	oxazepam	35
NOVOLIN N	37	oxcarbazepine	19
NOVOLIN R	37	oxiconazole nitrate	22
NOVOLOG	38	OXISTAT	22
NOVOLOG FLEXPEN	38	oxybutynin chloride	54
NOVOLOG MIX 70-30	38	oxycodone hcl	11,12
NOVOLOG MIX 70-30 FLEXPEN	38	oxycodone hcl/acetaminophen	12
NOVOSEVEN RT	40	oxycodone hcl/aspirin	12
NOXAFIL	22	OXYCONTIN	11

# P

paliperidone . . . . .	31	phenobarbital . . . . .	18
pamidronate disodium . . . . .	65	phenobarbital/hyoscyamine sulf/atropine	
PANCREAZE . . . . .	52	sulf/scopolamine hb . . . . .	52
PARAGARD T 380-A . . . . .	66	phenoxybenzamine hcl . . . . .	41
paricalcitol . . . . .	65	PHENYL-FREE 1 . . . . .	77
paroxetine hcl . . . . .	20	PHENYL-FREE 2 . . . . .	77
PAXIL . . . . .	20	PHENYL-FREE 2HP . . . . .	77
pediatric multivit with a,c,d3 no.21/sodium fluoride . . . . .	77	PHENYLADE . . . . .	77
pediatric multivitamin no.150 with sodium fluoride . . . . .	77	PHENYLADE AMINO ACID . . . . .	77
pediatric multivitamin no.16/sodium fluoride . . . . .	77	PHENYLADE ESSENTIAL . . . . .	77
pediatric multivitamin no.2/sodium fluoride . . . . .	77	PHENYLADE GMP . . . . .	77
pediatric multivitamin no.45/sodium fluoride/ferrous sulfate . . . . .	77	PHENYLADE MTE . . . . .	77
pediatric multivitamin no.46/ferrous sulfate . . . . .	77	PHENYLADE PHEBLOC . . . . .	77
pediatric multivitamin no.75/sodium fluoride/ferrous sulfate . . . . .	77	PHENYLADE RTD PKU 10 . . . . .	77
pediatric multivitamin no.82 with sodium fluoride . . . . .	77	PHENYLADE40 . . . . .	78
pediatric multivitamins no.17 with sodium fluoride . . . . .	77	PHENYLADE60 . . . . .	78
peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride . . . . .	53	phenylephrine hcl . . . . .	67
PEGASYS . . . . .	33	phenylephrine hcl/promethazine hcl . . . . .	73
PEGASYS PROCLICK . . . . .	33	phenytoin . . . . .	19
PEGINTRON . . . . .	33	phenytoin sodium extended . . . . .	19
PEGINTRON REDIPEN . . . . .	33	PHLEXY-10 . . . . .	78
penicillin v potassium . . . . .	15	PHOSPHOLINE IODIDE . . . . .	69
PENTASA . . . . .	65	PICATO . . . . .	51
pentazocine hcl/naloxone hcl . . . . .	12	pilocarpine hcl . . . . .	49,69
pentoxifylline . . . . .	44	PILOPINE HS . . . . .	69
PERIFLEX ADVANCE . . . . .	77	pimozide . . . . .	31
PERIFLEX INFANT . . . . .	77	pindolol . . . . .	42
PERIFLEX JUNIOR . . . . .	77	pioglitazone hcl . . . . .	36
PERIFLEX LQ PKU . . . . .	77	pioglitazone hcl/glimepiride . . . . .	36
PERJETA . . . . .	29	pioglitazone hcl/metformin hcl . . . . .	36
permethrin . . . . .	30	piroxicam . . . . .	10
PERRY PRENATAL . . . . .	77	PKU 2 . . . . .	78
phenazopyridine hcl . . . . .	55	PKU 3 . . . . .	78
phenelzine sulfate . . . . .	20	PKU COOLER 10 . . . . .	78
PHENEX-1 . . . . .	77	PKU COOLER 15 . . . . .	78
PHENEX-2 . . . . .	77	PKU COOLER 20 . . . . .	78
		PKU EASY . . . . .	78
		PKU EXPRESS15 . . . . .	78
		PKU EXPRESS20 . . . . .	78
		PKU LOPHLEX . . . . .	78
		PKU PERIFLEX JUNIOR PLUS . . . . .	78

PLEGRIDY . . . . .	49	prenatal vit with calcium no.131/ferrous fumarate/folic acid . . . . .	78
PLEGRIDY PEN . . . . .	49	prenatal vitamin calcium,iron,folic acid (less than 1 mg) . . . . .	78
podofilox . . . . .	51	prenatal vitamin no.103/folic acid/omega-3s/dha/fish oil . . . . .	79
POLY-VI-FLOR . . . . .	78	prenatal vitamin no.108/iron amino acid chelate/folic acid . . . . .	79
POLY-VI-FLOR WITH IRON . . . . .	78	prenatal vitamins no.121/ferrous fumarate/folic acid . . . . .	79
POLY-VI-SOL WITH IRON . . . . .	78	prenatal vitamins no.40/ferrous fumarate/folic acid/dha . . . . .	78
polyethylene glycol 3350 . . . . .	53	prenatal vitamins no.62/folic acid/omega-3s/dha/epa/fish oil . . . . .	79
polymyxin b sulfate/trimethoprim . . . . .	67	prenatal vitamins no.79/iron fum/folic acid/levomefolate/dha . . . . .	79
POMALYST . . . . .	24	prenatal vitamins with calcium/ferrous fumarate/folic acid . . . . .	79
potassium bicarbonate/citric acid . . . . .	75	prenatal vitamins with calcium/iron,carb/docusate/folic acid . . . . .	79
potassium chloride . . . . .	75	prenatal vits no.51/iron fumarate/folic acid/omega-3/dha/epa . . . . .	79
potassium chloride/potassium bicarbonate/citric acid . . . . .	75	prenatal vits with calcium 95/ferrous fumarate/folic acid . . . . .	78
potassium citrate . . . . .	55	prenatal vits with calcium no.124/ferrous fumarat/folic acid . . . . .	79
potassium citrate/citric acid . . . . .	55	prenatal vits with calcium no.21/ferrous fumarate/folic acid . . . . .	79
potassium iodide . . . . .	62	prenatal vits with calcium no.72/ferrous fumarate/folic acid . . . . .	78
pramipexole di-hcl . . . . .	30	prenatal vits with calcium no.72/iron,carbonyl/folic acid . . . . .	79
PRAMOSONE . . . . .	51	prenatal vits with calcium no.74/ferrous fumarate/folic acid . . . . .	79
prasugrel hcl . . . . .	40	prenatal vits with calcium no.90/ferrous fumarate/folic acid . . . . .	79
pravastatin sodium . . . . .	46	prenatal vits with calcium no.96/ferrous fumarate/folic acid . . . . .	79
prazosin hcl . . . . .	41	PREQUE 10 . . . . .	79
PRED-G . . . . .	67	PREVACID . . . . .	53
prednisolone . . . . .	56	PREVIDENT . . . . .	49
prednisolone acetate . . . . .	68	PREVIDENT 5000 . . . . .	49
prednisolone sod phosphate . . . . .	56,68		
prednisone . . . . .	56		
PREMARIN . . . . .	59		
PREMPHASE . . . . .	59		
PREMPRO . . . . .	59		
PRENATAL FORMULA-DHA . . . . .	78		
prenatal vit with calcium 75/iron/folic acid/omega-3/dha/epa . . . . .	78		
prenatal vit with calcium 95/ferrous fumarate/folic acid/dha . . . . .	78		
prenatal vit with calcium no.122/ferrous fumarate/folic acid . . . . .	78		
prenatal vit with calcium no.128/ferrous fumarate/folic acid . . . . .	78		
prenatal vit with calcium no.129/ferrous fumarate/folic acid . . . . .	78		
prenatal vit with calcium no.130/ferrous fumarate/folic acid . . . . .	78		

PREVIDENT 5000 ENAMEL PROTECT . . . . .	50	pyrazinamide . . . . .	24
PREVIDENT 5000 SENSITIVE . . . . .	50	pyridostigmine bromide . . . . .	23
PRIALT . . . . .	66		
primaquine phosphate . . . . .	30	<b>Q</b>	
primidone . . . . .	18	quetiapine fumarate . . . . .	31
PROAIR HFA . . . . .	71	QUFLORA . . . . .	79
PROAIR RESPICLICK . . . . .	71	QUFLORA FE . . . . .	79
probenecid . . . . .	22	QUILLICHEW ER . . . . .	48
probenecid/colchicine . . . . .	23	QUILLIVANT XR . . . . .	48
prochlorperazine . . . . .	21	quinapril hcl . . . . .	41
prochlorperazine edisylate . . . . .	21	quinapril hcl/hydrochlorothiazide . . . . .	44
prochlorperazine maleate . . . . .	21	quinidine gluconate . . . . .	42
PROCRT . . . . .	39	quinidine sulfate . . . . .	42
PROCTOFOAM-HC . . . . .	51	QVAR . . . . .	70
PROFERRIN-FORTE . . . . .	75	QVAR REDIHALER . . . . .	70
PROFILNINE . . . . .	40		
progesterone . . . . .	60	<b>R</b>	
progesterone, micronized . . . . .	60	raloxifene hcl . . . . .	60
PROGLYCEM . . . . .	36	ramipril . . . . .	41
PROGRAF . . . . .	63	RANEXA . . . . .	44
PROLASTIN C . . . . .	73	ranitidine hcl . . . . .	53
PROLEUKIN . . . . .	26	RAPAMUNE . . . . .	63
PROLIA . . . . .	65	rasagiline mesylate . . . . .	30
PROMACTA . . . . .	39	RECLAST . . . . .	66
promethazine hcl . . . . .	21,70	RECOMBIMATE . . . . .	40
promethazine hcl/codeine . . . . .	73	REGRANEX . . . . .	51
promethazine hcl/dextromethorphan hbr . . . . .	73	REMICADE . . . . .	63
promethazine/phenylephrine hcl/codeine . . . . .	73	RENAGEL . . . . .	55
propafenone hcl . . . . .	42	repaglinide . . . . .	36
propantheline bromide . . . . .	52	RESCRIPTOR . . . . .	33
propranolol hcl . . . . .	42	reserpine . . . . .	44
propranolol hcl/hydrochlorothiazide . . . . .	44	RESTASIS . . . . .	67
propylthiouracil . . . . .	62	RESTASIS MULTIDOSE . . . . .	67
PROVENGE . . . . .	26	REVATIO . . . . .	72
PROVENTIL HFA . . . . .	71	REVLIMID . . . . .	24
pseudoephedrine hcl/codeine		REYATAZ . . . . .	34
phosphate/guaifenesin . . . . .	73	REZIRA . . . . .	73
pseudoephedrine hcl/codeine/chlorpheniramine . . . . .	73	RHEUMATREX . . . . .	63
PULMICORT FLEXHALER . . . . .	70	ribavirin . . . . .	33
PULMOZYME . . . . .	73	RIDAURA . . . . .	64
PURIXAN . . . . .	25	rifabutin . . . . .	23

rifampin . . . . .	24	SIMILAC PRENATAL . . . . .	79
riluzole . . . . .	49	SIMPONI . . . . .	63
rimantadine hcl . . . . .	34	simvastatin . . . . .	46
risedronate sodium . . . . .	66	sirolimus . . . . .	63
RISPERDAL CONSTA . . . . .	31	SKYLA . . . . .	60
risperidone . . . . .	32	sodium chloride for inhalation . . . . .	73
RITALIN LA . . . . .	48	sodium chloride/sodium bicarbonate/potassium chloride/peg . . . . .	53
RITUXAN . . . . .	29	sodium phosphate,dibasic/pot phos,monob/sod phosphate mono . . . . .	55
rivastigmine . . . . .	19	sodium polystyrene sulfonate . . . . .	74
rivastigmine tartrate . . . . .	19	sodium polystyrene sulfonate/sorbitol solution . . . . .	74
RIXUBIS . . . . .	40	sodium/potassium/potassium citrate/sodium citrate/cit ac . . . . .	55
rizatriptan benzoate . . . . .	23	SOMATULINE DEPOT . . . . .	61
ropinirole hcl . . . . .	30	SOMAVERT . . . . .	61
rosuvastatin calcium . . . . .	46	sotalol hcl . . . . .	42
ROZEREM . . . . .	74	SPIRIVA . . . . .	71
RUBRACA . . . . .	26	SPIRIVA RESPIMAT . . . . .	71
RYDAPT . . . . .	26	spironolactone . . . . .	45
<b>S</b>		spironolactone/hydrochlorothiazide . . . . .	44
SAIZEN . . . . .	57	SPORANOX . . . . .	22
SAIZEN-SAIZENPREP . . . . .	57	SPRYCEL . . . . .	28
salsalate . . . . .	10	SPS . . . . .	74
SANDIMMUNE . . . . .	63	stavudine . . . . .	33
SANDOSTATIN LAR . . . . .	61	STELARA . . . . .	51
SANDOSTATIN LAR DEPOT . . . . .	61	STIMATE . . . . .	57
SANTYL . . . . .	51	STIVARGA . . . . .	28
SAPHRIS . . . . .	32	STRIBILD . . . . .	33
SAVELLA . . . . .	49	STUART ONE . . . . .	79
scopolamine . . . . .	21	sucralfate . . . . .	53
selegiline hcl . . . . .	31	sulfacetamide sodium . . . . .	16
selenium sulfide . . . . .	51	sulfacetamide sodium/prednisolone sodium phosphate . . . . .	67
SELZENTRY . . . . .	34	sulfacetamide sodium/sulfur . . . . .	51
SENSIPAR . . . . .	61	sulfacetamide sodium/sulfur/urea . . . . .	51
SEREVENT DISKUS . . . . .	71	sulfadiazine . . . . .	16
SEROSTIM . . . . .	57	sulfamethoxazole/trimethoprim . . . . .	16
sertraline hcl . . . . .	20	sulfasalazine . . . . .	65
sevelamer carbonate . . . . .	55	sulindac . . . . .	11
SHINGRIX . . . . .	64	sumatriptan . . . . .	23
sildenafil citrate . . . . .	72		
silver sulfadiazine . . . . .	16		
SIMCOR . . . . .	47		

sumatriptan succinate . . . . .	23	TEV-TROPIN . . . . .	57
SUPPRELIN LA . . . . .	61	TEXACORT . . . . .	56
SUPRAX . . . . .	15	TEXAVITE LQ . . . . .	79
SUSTIVA . . . . .	33	THALOMID . . . . .	25
SUTENT . . . . .	28	THEO-24 . . . . .	71
SYMAX DUOTAB . . . . .	52	theophylline anhydrous . . . . .	72
SYMBICORT . . . . .	73	THERACYS . . . . .	26
SYNJARDY . . . . .	36	thioridazine hcl . . . . .	31
SYNTHROID . . . . .	60	thiothixene . . . . .	31
SYNVISC . . . . .	66	THROMBATE III . . . . .	39
SYNVISC-ONE . . . . .	67	THYROGEN . . . . .	67
 		thyroid,pork . . . . .	60
<b>T</b>		THYROLAR-1 . . . . .	61
TACLONEX . . . . .	51	THYROLAR-1/2 . . . . .	61
tacrolimus . . . . .	51,63	THYROLAR-1/4 . . . . .	61
TAFINLAR . . . . .	28	THYROLAR-2 . . . . .	61
TAGRISSE . . . . .	28	THYROLAR-3 . . . . .	61
tamoxifen citrate . . . . .	25	tiagabine hcl . . . . .	18
tamsulosin hcl . . . . .	54	ticlopidine hcl . . . . .	40
TARCEVA . . . . .	28	timolol maleate . . . . .	42,69
TARGRETIN . . . . .	29	TIMOPTIC OCUDOSE . . . . .	69
TASIGNA . . . . .	28	tizanidine hcl . . . . .	32
tazarotene . . . . .	51	TOBI . . . . .	71
TAZORAC . . . . .	51	TOBI PODHALER . . . . .	71
TECFIDERA . . . . .	49	TOBRADEX . . . . .	67
TEGRETOL . . . . .	19	tobramycin . . . . .	13
TEGRETOL XR . . . . .	19	tobramycin in 0.225 % sodium chloride . . . . .	71
TEKTURNA . . . . .	44	tobramycin/dexamethasone . . . . .	67
TEKTURNA HCT . . . . .	44	TOBREX . . . . .	13
temazepam . . . . .	74	TODAY CONTRACEPTIVE SPONGE . . . . .	55
TEMODAR . . . . .	24	tolazamide . . . . .	36
temozolomide . . . . .	24	tolbutamide . . . . .	36
terazosin hcl . . . . .	41	tolmetin sodium . . . . .	11
terbinafine hcl . . . . .	22	tolterodine tartrate . . . . .	54
terbutaline sulfate . . . . .	71	TOPAMAX . . . . .	18
terconazole . . . . .	22	topiramate . . . . .	18
TESTOPEL . . . . .	57	topotecan hcl . . . . .	27
testosterone . . . . .	58	TORISEL . . . . .	28
testosterone cypionate . . . . .	58	torseamide . . . . .	45
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tramadol hcl/acetaminophen	12
tranexamic acid	40
tranylcypromine sulfate	20
trazodone hcl	20
TREANDA	24
TRELSTAR	61
TRESIBA FLEXTOUCH U-100	38
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TRI-VI-FLOR	79
triamcinolone acetonide	50,57,70
triamterene/hydrochlorothiazide	44
triazolam	74
trifluoperazine hcl	31
trifluridine	34
trihexyphenidyl hcl	30
TRILEPTAL	19
trimethobenzamide hcl	21
trimethoprim	14
trimipramine maleate	21
TRINTELLIX	20
TRISENOX	26
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tropium chloride	54
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TYMLOS	66
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VENCLEXTA STARTING PACK	28
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VENTAVIS	72
VENTOLIN HFA	71
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