



**Massachusetts Large Group 4-Tier Drug List  
Prescription Drug List by Therapeutic Categories**

Last Updated: 11/30/2020

## Key Terms

### Formulary

A formulary is a list of prescription medications developed by a committee of practicing physicians and practicing pharmacists who represent a variety of specialty areas and who are knowledgeable in the diagnosis and treatment of disease.

### Brand-Name Drugs

Brand-name drugs are typically the first products to gain U.S. Food and Drug Administration (FDA) approval.

### Generic Drugs

Generic drugs have the same active ingredients and come in the same strengths and dosage forms as the equivalent brand-name drug. Multiple manufacturers may produce the same generic drug and the product may differ from its brand name counterpart in color, size or shape, but the differences do not alter the effectiveness. Generic versions of brand-name drugs are reviewed and approved by the FDA. The FDA works closely with all pharmaceutical companies to make sure that all drugs sold in the U.S. meet appropriate standards for strength, quality, and purity.

Note: With limited exceptions, when a generic launches the brand name drug will move to not covered immediately following the generic launch.

### 4-Tier Pharmacy Copayment Program (4-Tier Program)

To help maintain affordability in the pharmacy benefit, we encourage the use of cost-effective drugs and preferred brand names through the four-tier program. This program gives you and your doctor the opportunity to work together to find a prescription medication that's affordable and appropriate for you.

All covered drugs are placed into one of four tiers. Your physician may have the option to write you a prescription for a Tier 1, Tier 2, Tier 3 or Tier 4 drug (as defined below); however, there may be instances when only a Tier 4 drug is appropriate, which will require a higher copayment. The program features a high cost tier mostly inclusive of specialty drugs included in and obtained through the Designated Specialty Pharmacy (SP) program. Drugs subject to the SP program include but are not limited to medications used in the treatment of rare diseases, infertility, hepatitis C, growth hormone deficiency, multiple sclerosis, rheumatoid arthritis, and cancers treated with oral medications.

- **Tier 1:** Medications on this tier have the lowest cost sharing amount
- **Tier 2:** Medications on this tier have a higher cost sharing amount
- **Tier 3:** Medications on this tier have a higher cost sharing amount
- **Tier 4:** Medications on this tier have the highest cost sharing amount; limited to a 30 day supply

Please note that tier placement is subject to change throughout the year.

**CM** Cancer Mandate  
**NTM** New-to-Market  
**SI** Specialty Infusion  
**WH** Women's Health

**MM** Mandatory Mail  
**PA** Prior Authorization  
**SP** Designated Specialty Pharmacy  
**ACA** Preventive Service

**NC** Non Covered Drugs  
**QL** Quantity Limitation Program  
**STPA** Step Therapy Prior Authorization  
**LCG** Low Cost Generic

## Copayment

A copayment is the fee a member pays for certain covered drugs. A member pays the copayment directly to the provider when he/she receives a covered drug, unless the provider arranges otherwise.

## Coinsurance

Coinsurance requires the member to pay a percentage of the total cost for certain covered drugs.

## Medical Review Process

Tufts Health Plan has pharmacy programs in place to help manage the pharmacy benefit. Requests for medically necessary review for coverage of drugs included in the New-to-Market Drug Evaluation Process (NTM), Prior Authorization Program (PA), Step Therapy Prior Authorization Program (STPA), Quantity Limitations Program (QL), Non-Covered Drugs (NC) With Suggested Alternatives Program should be completed by the physician and sent to Tufts Health Plan. Drugs excluded under your pharmacy benefit will not be covered through this process. The request must include clinical information that supports why the drug is medically necessary for you. Tufts Health Plan will approve the request if it meets coverage guidelines. If Tufts Health Plan does not approve the request, you have the right to appeal. The appeal process is described in your benefit document.

## Quantity Limitation (QL) Program

Because of potential safety and utilization concerns, Tufts Health Plan has placed quantity limitations on some prescription drugs. You are covered for up to the amount posted in our list of covered drugs. These quantities are based on recognized standards of care as well as from FDA-approved dosing guidelines. If your provider believes it is necessary for you to take more than the QL amount posted on the list, he or she may submit a request for coverage under the Medical Review Process.

## New-To-Market Drug Evaluation Process (NTM)

In an effort to make sure the new-to-market prescription drugs we cover are safe, effective and affordable, we delay coverage of many new drug products until the Plan's Pharmacy and Therapeutics Committee and physician specialists have reviewed them. This review process is usually completed within six months after a drug becomes available.

The review process enables us to learn a great deal about these new drugs, including how a physician can safely prescribe these new drugs and how physicians can choose the most appropriate patients for the new therapy. During the review process, if your physician believes you have a medical need for the New-To-Market drug, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

## Non-Covered Drugs (NC)

There are thousands of drugs listed on the Tufts Health Plan covered drug list. In fact, most drugs are covered. There is, however, a list of drugs that Tufts Health Plan currently does not cover.

In many cases, these drugs are not covered by Tufts Health Plan because there are safe, comparably effective, and cost effective alternatives available. Our goal is to keep pharmacy benefits as affordable as possible.

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<b>CM</b>	Cancer Mandate	<b>MM</b>	Mandatory Mail	<b>NC</b>	Non Covered Drugs
<b>NTM</b>	New-to-Market	<b>PA</b>	Prior Authorization	<b>QL</b>	Quantity Limitation Program
<b>SI</b>	Specialty Infusion	<b>SP</b>	Designated Specialty Pharmacy	<b>STPA</b>	Step Therapy Prior Authorization
<b>WH</b>	Women's Health	<b>ACA</b>	Preventive Service	<b>LCG</b>	Low Cost Generic

If your doctor feels that one of the non-covered drugs is needed, your doctor can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

Note: Drugs approved through the Medical Review Process may be subject to the highest copayment.

### **Prior Authorization (PA) Program**

In order to ensure safety and affordability for everyone, some medications require prior authorization. This helps us work with your doctor to ensure that medications are prescribed appropriately.

If your doctor feels it is medically necessary for you to take one of the drugs listed below, he/she can submit a request for coverage to Tufts Health Plan under the Medical Review Process.

### **Step Therapy Prior Authorization (STPA )**

Step Therapy is an automated form of Prior Authorization. It encourages the use of therapies that should be tried first, before other treatments are covered, based on clinical practice guidelines and cost-effectiveness. Some types of Step Therapy include requiring the use of generics before brand name drugs, preferred before non-preferred brand name drugs, and first-line before second-line therapies.

Medications included on step 1- the lowest step-are usually covered without authorization. We have noted the few exceptions, which may require your physician to submit a request to Tufts Health Plan for coverage. Medications on Step 2 or higher are automatically authorized at the point-of-sale if you have taken the required prerequisite drugs. However, if your physician prescribes a medication on a higher step, and you have not yet taken the required medication(s) on a lower step, or if you are a new Tufts Health Plan member and do not have any prescription drug claims history, the prescription will deny at the point-of-sale with a message indicating that a Prior Authorization (PA) is required. Physicians may submit requests for coverage to Tufts Health Plan for members who do not meet the Step Therapy criteria at the point of sale under the Medical Review process.

### **Designated Specialty Pharmacy Program (SP)**

Tufts Health Plan's goal is to offer you the most clinically appropriate and cost-effective services.

As a result, we have designated special pharmacies to supply up to a 30-day supply of a select number of medications used in the treatment of complex diseases. These pharmacies are specialized in providing these medications and are staffed with nurses, coordinators and pharmacists to provide support services for members.

Other special designated pharmacies and medications may be identified and added to this program from time to time.

Benefits vary; some members may not participate in this program. Please see your benefit document for complete information.

Physicians may obtain a select number of specialty medications through a designated SP for administration in the office as an alternative to direct purchase. These medications are covered under the medical benefit, and will be shipped directly to and administered in the office by the member's provider. The designated pharmacy will bill Tufts Health Plan directly for the medication.

For the most current listing of special designated pharmacies or to find out if your plan includes this program, please call us at the number listed on the back of your member identification card.

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**Designated Specialty Infusion Program for Drugs Covered Under the Medical Benefit (SI)**

Tufts Health Plan has designated home infusion providers for a select number of specialized pharmacy products and drug administration services.

The designated specialty infusion provider offers clinical management of drug therapies, nursing support, and care coordination to members with acute and chronic conditions. Place of service may be in the home or alternate infusion site based on availability of infusion centers and determination of the most clinically appropriate site for treatment. These medications are covered under the medical benefit (not the pharmacy benefit) and generally require support services, medication dose management, and special handling in addition to the drug administration services. Medications include, but are not limited to, medications used in the treatment of hemophilia, pulmonary arterial hypertension, and immune deficiency. Other specialty infusion providers and medications may be identified and added to this program from time to time.

**Over-The-Counter Drugs (OTC)**

When a medication with the same active ingredient or a modified version of an active ingredient that is therapeutically equivalent, becomes available over-the-counter, Tufts Health Plan may exclude coverage of the specific medication or all of the prescription drugs in the class. For more information, please call our Member Services Department at the number listed on the back of your member identification card.

**Cancer Mandate (CM)**

Oral Cancer medications may have a cost share of up to \$50 or the cost of the drug, whichever is less under the Massachusetts oral cancer therapy mandate. Please check your benefit document.

**Low Cost Generic (LCG)**

Certain medications may be included in the Low Cost Generic program and be subject to a \$5 copay for a 30-day supply rather than the tier 1 copay. Please check your benefit document.

**Women’s Health (WH)**

Certain medications may be covered without copayment under Women's Health Preventive Services Initiative. Please contact your plan sponsor / employer about applicability and effective date for your group.

**Affordable Care Act (ACA)**

Under the Patient Protection and Affordable Care Act (PPACA), commonly called the Affordable Care Act (ACA) or health care reform, these preventive medications may be covered at no cost (copay, coinsurance, or deductible) for Tufts Health Plan members, depending on their plan benefits. Please check the specific terms of your plan benefit document.

Note: A prescription is required for all listed medications, including over-the-counter (OTC) medications

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**Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.**

## Tufts Health Plan:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Tufts Health Plan at 800.462-0224.

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

### Tufts Health Plan, Attention:

Civil Rights Coordinator Legal Dept.  
705 Mount Auburn St. Watertown, MA 02472  
Phone: 888.880.8699 ext. 48000, [TTY number— 800.439.2370 or 711]  
Fax: 617.972.9048  
Email: OCRCoordinator@tufts-health.com.

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

### U.S. Department of Health and Human Services

200 Independence Avenue, SW  
Room 509F, HHH Building Washington, D.C. 20201  
800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

tuftshealthplan.com | 800.462.0224

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For no cost translation in English, call the number on your ID card.

**Arabic** للحصول على خدمة الترجمة المجانية باللغة العربية، يرجى الاتصال على الرقم المدون على بطاقة الهوية الخاصة بك.

**Chinese** 若需免費的中文版本，請撥打ID卡上的電話號碼。

**French** Pour demander une traduction gratuite en français, composez le numéro indiqué sur votre carte d'identité.

**German** Um eine kostenlose deutsche Übersetzung zu erhalten, rufen Sie bitte die Telefonnummer auf Ihrer Ausweiskarte an.

**Greek** Για δωρεάν μετάφραση στα Ελληνικά, καλέστε τον αριθμό που αναγράφεται στην αναγνωριστική κάρτα σας.

**Haitian Creole** Pou jwenn tradiksyon gratis nan lang Kreyòl Ayisyen, rele nimewo ki sou kat ID ou.

**Italian** Per la traduzione in italiano senza costi aggiuntivi, è possibile chiamare il numero indicato sulla tessera identificativa.

**Japanese** 日本語の無料翻訳についてはIDカードに書いてある番号に電話してください。

**Khmer (Cambodian)** សម្រាប់សេវាកម្រិតដោយឥតគិតថ្លៃជា ភាសាខ្មែរ សូមទូរស័ព្ទទៅកាន់លេខដែលមាននៅលើកាតសម្គាល់សមាជិករបស់អ្នក។

**Korean** 한국어로 무료 통역을 원하시면, ID 카드에 있는 번호로 연락하십시오.

**Navajo** Doo bą́ąh ilíní da Diné k'chjí álnéehgo, hodiilnih béesh bee hani'é bee née ho'dilzingo nantinígíí bikáá'.

**Laotian** ສຳລັບການແປພາສາແປັນພາສາລາວທີ່ໄດ້ໂດຍສອດໃຈຈຳພັດ, ໃຫ້ໂທຫາເບີທີ່ຢູ່ທັງບັດປະຈຳຕົວຂອງທ່ານ.

**Persian** برای ترجمه رایگا فارسی به شماره تلفن مندرج در کارت شناسائی تان زنگ بزنید.

**Polish** Aby uzyskać bezpłatne tłumaczenie w języku polskim, należy zadzwonić na numer znajdujący się na Pana/i dowodzie tożsamości.

**Portuguese** Para tradução grátis para português, ligue para o número no seu cartão de identificação.

**Russian** Для получения услуг бесплатного перевода на русский язык позвоните по номеру, указанному на идентификационной карточке.

**Spanish** Por servicio de traducción gratuito en español, llame al número de su tarjeta de miembro.

**Tagalog** Para sa walang bayad na pagsasalin sa Tagalog, tawagan ang numero na nasa inyong ID card.

**Vietnamese** Để có bản dịch tiếng Việt không phải trả phí, gọi theo số trên thẻ căn cước của bạn.

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<b>NTM</b> New-to-Market	<b>PA</b> Prior Authorization	<b>QL</b> Quantity Limitation Program	
<b>SI</b> Specialty Infusion	<b>SP</b> Designated Specialty Pharmacy	<b>STPA</b> Step Therapy Prior Authorization	
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## ANTI-INFECTIVES AND INFECTIOUS DISEASES

### ANTI-INFECTIVES, MISCELLANEOUS

#### Tier 1

ivermectin (Stromectol)  
 linezolid 600 mg tablets (Zyvox 600 mg tablets)  
 metronidazole (Flagyl)  
 nitrofurantoin ext-rel (Macrobid)  
 nitrofurantoin macrocrystals (Macrodantin)  
 nitrofurantoin suspension  
 tinidazole  
 trimethoprim

#### Tier 2

fosfomycin tromethamine (Monurol)  
 Impavido

vancomycin (Vancocin)  
 Xifaxan PA QL

#### Tier 3

Aemcolo QL  
 Alinia  
 First-Vancomycin 25 QL  
 Firvanq QL  
 linezolid 100 mg/5 mL oral suspension (Zyvox 100 mg/5 mL oral suspension)  
 Primsol  
 Sivextro tablets  
 Xenleta

### ANTIFUNGALS, SYSTEMIC AND ORAL TOPICAL

#### Tier 1

clotrimazole troches  
 fluconazole  
 fluconazole (Diflucan)  
 ketoconazole  
 nystatin  
 terbinafine tablets QL  
 terbinafine tablets (Lamisil tablets) QL  
 voriconazole suspension 40 mg/mL (Vfend suspension) QL

#### Tier 2

griseofulvin microsize (Grifulvin V tablets)  
 griseofulvin microsize suspension  
 griseofulvin ultramicrosize  
 itraconazole capsules (Sporanox capsules NC) PA  
 itraconazole solution (Sporanox solution NC)  
 voriconazole tablets 50 mg, 200 mg (Vfend) QL

#### Tier 3

Cresemba capsule

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Emverm  
Lamisil oral granules packet QL

## ANTIMALARIALS AND ANTIPROTOZOALS

### Tier 1

chloroquine phosphate PA  
dapsone  
doxycycline hyclate (Vibramycin)  
hydroxychloroquine (Plaquenil) PA  
mefloquine  
metronidazole (Flagyl)  
quinine sulfate (Qualaquin)  
tafenoquine (Krintafel) QL

### Tier 2

atovaquone (Mepron suspension)  
atovaquone/proguanil (Malarone)  
Benznidazole  
Coartem QL  
paromomycin

## ANTIVIRALS

### AIDS (adjunctive)

#### Tier 1

megestrol acetate

#### Tier 2

megestrol acetate 625 mg/5 mL

### Cytomegalovirus

#### Tier 1

valganciclovir tablets (Valcyte Tablets)

#### Tier 2

valganciclovir solution (Valcyte Solution)

#### Tier 4

Prevymis tablets PA

### Hepatitis B

#### Tier 1

adefovir dipivoxil (Hepsera)  
lamivudine tablets (Epivir-HBV tablets)

#### Tier 2

entecavir (Baraclude tablets)  
Epivir-HBV solution  
Vemlidy

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**Tier 4**

Intron A SP  
Pegasys/Pegasys ProClick SP QL

**Hepatitis C****Tier 1**

ribavirin 200 mg capsules SP QL  
ribavirin 200 mg tablets SP QL

**Tier 4**

Epclusa SP PA  
Harvoni 45mg/200mg SP PA QL  
Harvoni 90mg/400mg SP PA  
Harvoni pak SP PA QL  
Intron A SP  
Pegasys/Pegasys ProClick SP QL  
PegIntron SP QL  
Vosevi SP PA

**Herpes****Tier 1**

acyclovir capsules, tablets  
acyclovir capsules, tablets (Zovirax)  
famciclovir (Famvir)  
valacyclovir (Valtrex=NC)

**HIV/AIDS****Tier 1**

abacavir/lamivudine/zidovudine (Trizivir)  
didanosine delayed-rel  
lamivudine (EpiVir)  
lamivudine/zidovudine (Combivir)  
nevirapine (Viramune)  
nevirapine ext-rel (Viramune XR)  
stavudine (Zerit)  
zidovudine (Retrovir)

**Tier 2**

abacavir (Ziagen)  
abacavir/lamivudine (Epzicom)  
Aptivus  
atazanavir (Reyataz)  
Biktarvy  
Cimduo  
Complera  
Crixivan  
Delstrigo  
Descovy PA  
Dovato

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Edurant  
 efavirenz (Sustiva)  
 efavirenz/emtricitabine/tenofovir  
 efavirenz/emtricitabine/tenofovir (Atripla)  
 efavirenz/lamivudine/tenofovir disoproxil fumarate (Symfi Lo)  
 efavirenz/lamivudine/tenofovir disoproxil fumarate (Symfi)  
 emtricitabine (Emtriva)  
 emtricitabine/tenofovir  
 emtricitabine/tenofovir (Truvada)  
 Evotaz  
 fosamprenavir tablet 700 mg (Lexiva)  
 Genvoya  
 Intelence  
 Invirase  
 Isentress QL  
 Isentress HD QL  
 Isentress Oral Suspension QL  
 Juluca  
 Kaletra tablets  
 lopinavir/ritonavir solution (Kaletra solution)  
 Norvir Capsules, Solution  
 Norvir Powder Packet  
 Odefsey  
 Pifeltro  
 Prezcobix  
 Prezista  
 Reyataz oral powder  
 ritonavir tablets (Norvir Tablets)  
 Rukobia  
 Selzentry QL  
 Selzentry solution QL  
 Stribild  
 Symtuza  
 tenofovir 300 mg (Viread 300 mg)  
 Tivicay  
 Tivicay PD  
 Triumeq  
 Tybost  
 Viracept  
 Viread  
 Vitekta  
**Tier 4**  
 Fuzeon SP

## Influenza

### Tier 1

amantadine  
 rimantadine

### Tier 2

oseltamivir capsules (Tamiflu capsules NC) QL

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oseltamivir suspension (Tamiflu suspension NC) QL

Relenza QL

**Tier 3**

Xofluza QL

## BETA-LACTAM ANTIBIOTICS

**Tier 1**

amoxicillin

amoxicillin/clavulanate (Augmentin)

amoxicillin/clavulanate ext-rel

ampicillin

cefaclor

cefadroxil

cefdinir

cefditoren pivoxil

cefprozil

cefuroxime axetil (Ceftin)

dicloxacillin

penicillin VK

**Tier 2**

Cefaclor ER

cefixime capsules, suspension (Suprax capsules, suspension)

cefpodoxime

cephalexin

cephalexin (Keflex)

**Tier 3**

Suprax tablets

## IMMUNE GLOBULINS

**Medical Benefit**

Immune Globulin (IVIG, SCIG) PA SI

## MACROLIDES AND CLINDAMYCIN

**Tier 1**

azithromycin (Zithromax)

clarithromycin (Biaxin)

clarithromycin ext-rel

clindamycin (Cleocin)

clindamycin palmitate oral solution (Cleocin Pediatric)

erythromycin delayed-rel

erythromycin ethylsuccinate tablets

erythromycin stearate

**Tier 2**

Ery-Tab

erythromycin ethylsuccinate (E.E.S. 200 suspension)

erythromycin ethylsuccinate susp 400 mg/5 mL (Eryped)

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**Tier 3**

Dificid PA  
PCE  
Zmax

**MYCOBACTERIAL INFECTIONS (TUBERCULOSIS AND MYCOBACTERIUM AVIUM COMPLEX)****Tier 1**

azithromycin (Zithromax)  
clarithromycin (Biaxin)  
ethambutol (Myambutol)  
isoniazid  
pyrazinamide  
rifampin (Rifadin)

**Tier 2**

rifabutin (Mycobutin)  
Sirturo PA

**Tier 3**

Pretomanid

**QUINOLONES****Tier 1**

ciprofloxacin  
ciprofloxacin (Cipro)  
levofloxacin  
levofloxacin (Levaquin=NC)  
ofloxacin

**Tier 2**

moxifloxacin

**Tier 3**

Baxdela

**SULFONAMIDES****Tier 1**

sulfamethoxazole/trimethoprim  
sulfamethoxazole/trimethoprim (Bactrim/Bactrim DS)

**TETRACYCLINES****Tier 1**

doxycycline hyclate (Vibramycin)  
doxycycline monohydrate  
minocycline capsules (Minocin=NC)

**Tier 2**

doxycycline hyclate 75 mg tablets (Acticlate NC)  
minocycline tablets

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**Tier 3**

doxycycline hyclate delayed-rel tablets (Doryx NC)  
 minocycline SR (Solodyn NC)  
 Nuzyra tablets  
 tetracycline

## BIOLOGIC AND IMMUNOLOGICAL AGENTS

### ALLERGEN EXTRACTS

**Tier 3**

Grastek PA QL  
 Odactra PA QL  
 Oralair PA QL  
 Palforzia capsules PA  
 Palforzia packets PA  
 Ragwitek PA QL

### IMMUNOMODULATORS

**Medical Benefit**

Actemra vial PA  
 Inflectra PA  
 Orencia vial PA  
 Remicade PA  
 Renflexis PA  
 Rituxan PA  
 Simponi Aria PA  
 Truxima PA

**Tier 4**

Actemra prefilled syringe SP PA QL  
 Cimzia SP PA QL  
 Dupixent SP PA QL  
 Dupixent pen SP PA QL  
 Enbrel SP PA QL  
 Enbrel Mini SP PA QL  
 Humira SP PA QL  
 Kevzara SP PA QL  
 Kevzara auto-injector SP PA QL  
 Kineret PA QL  
 Olumiant SP PA  
 Orencia auto-injector / prefilled syringe SP PA QL  
 Rinvoq SP PA QL  
 Siliq SP PA QL  
 Simponi SP PA QL  
 Stelara SP PA QL  
 Taltz SP PA QL  
 Tremfya SP PA QL

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**IMMUNOSUPPRESSANT DRUGS****Medical Benefit**

Benlysta PA

**Tier 1**

azathioprine (Imuran)

cyclosporine (Sandimmune)

cyclosporine, modified (Neoral)

mycophenolate mofetil (Cellcept)

mycophenolate sodium (Myfortic)

prednisone

sirolimus (Rapamune)

tacrolimus capsules (Prograf)

**Tier 2**

everolimus (Zortress NC) QL

mycophenolate mofetil suspension

mycophenolate sodium delayed-rel tablets

**Tier 3**

Prograf granules

**Tier 4**

Benlysta Sub Q Injection SP PA

Enspryng SP PA

**BLOOD THINNERS AND BLOOD MODIFYING AGENTS****ANTIPLATELET THERAPY****Tier 1**

clopidogrel

clopidogrel (Plavix)

dipyridamole (Persantine)

**Tier 2**

dipyridamole ext-rel/aspirin (Aggrenox)

prasugrel (Effient NC)

**Tier 3**

Brilinta

Zontivity

**BLOOD MODIFYING AGENTS****Tier 2**

Aranesp SP QL

Epogen SP QL

Mircera QL

Procrit SP QL

Retacrit SP QL

**Tier 4**

Cabliivi

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Doptelet SP PA  
 Fulphila SP PA QL  
 Granix prefilled syringe SP PA QL  
 Hemlibra SP PA  
 Leukine SP QL  
 Mulpleta SP PA  
 Neulasta SP PA QL  
 Neupogen SP PA QL  
 Neupogen/Single-Ject SP PA QL  
 Nivestym SP PA QL  
 Promacta SP QL  
 Tavalisse QL  
 Udenyca SP PA QL  
 Zarxio SP QL  
 Ziextenzo SP PA QL

## BLOOD THINNERS

### Tier 1

enoxaparin (Lovenox)  
 warfarin

### Tier 2

Eliquis  
 fondaparinux sodium (Arixtra)

Xarelto

### Tier 3

Fragmin

## BLOOD, MISCELLANEOUS

### Tier 1

anagrelide (Agrylin)  
 cilostazol  
 cilostazol (Pletal)  
 pentoxifylline ext-rel

### Tier 2

aminocaproic acid oral solution (Amicar oral solution)  
 aminocaproic acid tablets (Amicar tablets)  
 deferasirox 180 mg tablets  
 deferasirox granules  
 deferasirox tablets (Jadenu NC)  
 Ferriprox oral solution QL  
 Ferriprox tablets QL

### Tier 3

Chemet

### Tier 4

deferasirox (Exjade NC)

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**CANCER DRUGS****Antineoplastic Drugs****Medical Benefit**

Xgeva PA

**Tier 1**

anastrozole (Arimidex=NC)

bexarotene capsules SP

bexarotene capsules (Targretin capsules=NC) SP

bicalutamide (Casodex=NC)

capecitabine (Xeloda=NC) SP QL

exemestane (Aromasin=NC)

flutamide

hydroxyurea (Hydrea=NC)

imatinib mesylate SP

imatinib mesylate (Gleevec=NC) SP

letrozole (Femara=NC)

leucovorin calcium

megestrol acetate

mercaptopurine

methotrexate

tamoxifen

**Tier 2**

Cyclophosphamide Capsules SP

Droxia

Ibrance SP PA

Iressa PA

Lysodren

melphalan (Alkeran NC)

octreotide SP

Rheumatrex

Siklos PA

Soltamox

Tabloid SP

temozolomide SP

temozolomide (Temodar NC) SP

toremifene (Fareston NC)

Trexall

Vistogard QL

**Tier 3**

Gleostine SP

Leukeran

Mesnex

Purixan

Xatmep PA

**Tier 4**

abiraterone 250 mg SP PA QL

abiraterone 250 mg (Zytiga 250 mg NC) SP PA QL

Afinitor Disperz SP PA QL

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Alecensa SP PA  
 Alunbrig SP PA  
 Ayvakit PA QL  
 Balversa PA  
 Bosulif SP PA QL  
 Braftovi PA  
 Brukinsa PA  
 Bynfezia SP PA  
 Cabometyx SP PA  
 Calquence PA  
 Caprelsa PA QL  
 Cometriq PA  
 Copiktra PA  
 Cotellic SP PA  
 Daurismo SP PA  
 Emcyt SP  
 Erivedge SP PA  
 erlotinib SP QL  
 erlotinib (Tarceva NC) SP QL  
 etoposide capsules SP  
 everolimus (Afinitor NC) SP QL  
 Farydak SP PA  
 Gavreto PA  
 Gilotrif PA  
 Hycamtin oral capsules SP PA QL  
 Iclusig PA QL  
 Idhifa SP PA QL  
 Imbruvica PA  
 Inlyta SP PA  
 Inqovi SP PA  
 Inrebic SP PA  
 Jakafi SP PA  
 Kisqali SP PA  
 Koselugo PA  
 lapatinib SP PA QL  
 lapatinib (Tykerb) SP PA QL  
 Lenvima SP PA  
 Lonsurf SP PA  
 Lorbreina SP PA  
 Lynparza SP PA  
 Matulane  
 Mekinist SP PA  
 Mektovi PA  
 Mycapssa SP PA  
 Myleran tablets  
 Nerlynx SP PA  
 Nexavar SP PA QL  
 nilutamide (Nilandron NC)  
 Ninlaro SP PA  
 Odomzo SP PA  
 Onureg SP PA

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Pemazyre PA  
 Piqray SP PA  
 Pomalyst SP PA  
 Qinlock PA  
 Retevmo SP PA QL  
 Revlimid SP PA  
 Rozlytrek SP PA  
 Rubraca SP PA QL  
 Rydapt SP PA  
 Sprycel SP PA QL  
 Stivarga SP PA QL  
 Sutent SP PA  
 Tabrecta SP PA  
 Tafinlar SP PA  
 Tagrisso 40 mg PA QL  
 Tagrisso 80 mg PA  
 Talzenna SP PA  
 Targretin gel SP  
 Tasisna SP PA  
 Tazverik PA  
 Thalomid SP  
 Tibsovo PA  
 tretinoin capsules SP  
 Tukysa PA  
 Turalio PA  
 Valchlor PA  
 Venclexta PA  
 Verzenio SP PA  
 Vitrakvi SP PA  
 Vizimpro SP PA  
 Votrient SP PA QL  
 Xalkori SP PA  
 Xospata PA  
 Xpovio Pak PA  
 Xtandi SP PA QL  
 Zejula PA  
 Zelboraf SP PA  
 Zolanza SP PA  
 Zydelig SP PA  
 Zykadia SP PA

## CARDIOVASCULAR AGENTS

### ACE INHIBITORS

#### Tier 1

benazepril  
 benazepril (Lotensin)  
 enalapril

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enalapril (Vasotec)  
 fosinopril  
 lisinopril (Prinivil)  
 lisinopril (Zestril)  
 moexipril  
 perindopril  
 quinapril  
 quinapril (Accupril)  
 ramipril  
 ramipril (Altace=NC)  
 trandolapril (Mavik)  
**Tier 2**  
 captopril  
**Tier 3**  
 Epaned

## ALPHA-1 BLOCKERS

**Tier 1**  
 doxazosin (Cardura=NC)  
 phenoxybenzamine (Dibenzylamine)  
 prazosin (Minipress)  
 terazosin

## ANGINA

**Tier 1**  
 amlodipine  
 amlodipine (Norvasc=NC)  
 atenolol  
 atenolol (Tenormin=NC)  
 diltiazem (Cardizem=NC)  
 diltiazem ext-rel (Cardizem CD=NC)  
 diltiazem ext-rel (Tiazac=NC)  
 isosorbide mononitrate ext-rel  
 metoprolol succinate ext-rel (Toprol-XL)  
 metoprolol tartrate  
 metoprolol tartrate (Lopressor=NC)  
 nadolol (Corgard)  
 nifedipine  
 nifedipine 10 mg (Procardia)  
 nifedipine ext-rel (Procardia XL=NC)  
 nitroglycerin lingual spray (Nitrolingual)  
 nitroglycerin sublingual (Nitrostat)  
 nitroglycerin transdermal (Nitro-Dur)  
 propranolol  
 verapamil  
**Tier 2**  
 Corlanor  
 Nifedipine 20 mg  
 ranolazine (Ranexa NC)

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**Tier 3**

metoprolol tartrate 37.5 mg, 75 mg

**ANGIOTENSIN II RECEPTOR BLOCKERS****Tier 1**

irbesartan (Avapro=NC)

losartan

losartan (Cozaar=NC)

telmisartan

telmisartan (Micardis=NC)

valsartan (Diovan)

**Tier 2**

candesartan (Atacand NC)

olmesartan (Benicar NC)

**ANTI-ARRHYTHMICS AND CARDIAC GLYCOSIDES****Tier 1**

amiodarone

digoxin (Lanoxin)

disopyramide (Norpace)

flecainide

mexiletine

propafenone (Rythmol)

sotalol (Betapace)

sotalol AF (Betapace AF)

**Tier 2**

dofetilide (Tikosyn)

pacerone

propafenone ext-rel (Rythmol SR)

quinidine gluconate ext-rel

**Tier 3**

Multaq

Norpace CR

Sotylize 5 mg/mL

**ANTIHYPERTENSIVE FIXED-DOSE COMBINATION PRODUCTS****Tier 1**

amlodipine/benazepril (Lotrel=NC)

amlodipine/valsartan (Exforge)

amlodipine/valsartan/hydrochlorothiazide (Exforge HCT)

atenolol/chlorthalidone (Tenoretic=NC)

benazepril/hydrochlorothiazide (Lotensin HCT=NC)

bisoprolol/hydrochlorothiazide

bisoprolol/hydrochlorothiazide (Ziac)

captopril/hydrochlorothiazide

enalapril/hydrochlorothiazide (Vaseretic)

fosinopril/hydrochlorothiazide

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irbesartan/hydrochlorothiazide (Avalide=NC)  
 lisinopril/hydrochlorothiazide (Zestoretic)  
 losartan/hydrochlorothiazide  
 losartan/hydrochlorothiazide (Hyzaar=NC)  
 metoprolol/hydrochlorothiazide (Lopressor HCT)  
 quinapril/hydrochlorothiazide (Accuretic=NC)  
 trandolapril/verapamil ext-rel (Tarka)  
 valsartan/hydrochlorothiazide (Diovan HCT)

**Tier 2**

amlodipine/olmesartan (Azor NC)  
 candesartan/hydrochlorothiazide (Atacand HCT NC)  
 olmesartan/amlodipine/hydrochlorothiazide (Tribenzor NC)  
 olmesartan/hydrochlorothiazide (Benicar HCT NC)  
 telmisartan/amlodipine (Twynsta NC)  
 telmisartan/hydrochlorothiazide (Micardis HCT NC)

**Tier 3**

Dutoprol  
 Tekturna HCT

**BETA BLOCKERS**

**Beta And Alpha Blockers**

**Tier 1**

carvedilol  
 carvedilol (Coreg)  
 labetalol (Trandate)

**Tier 2**

carvedilol phosphate ext-rel (Coreg CR NC)

**Beta Blockers**

**Tier 1**

acebutolol (Sectral=NC)  
 atenolol  
 atenolol (Tenormin=NC)  
 betaxolol  
 bisoprolol (Zebeta)  
 metoprolol succinate ext-rel (Toprol-XL)  
 metoprolol tartrate  
 metoprolol tartrate (Lopressor=NC)  
 nadolol (Corgard)  
 pindolol  
 propranolol  
 propranolol ext-rel (Inderal LA=NC)

**Tier 3**

Bystolic  
 Innopran XL  
 Levatol  
 metoprolol tartrate 37.5 mg, 75 mg

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**CALCIUM CHANNEL BLOCKER/HMG-CoA REDUCTASE INHIBITOR****Tier 2**

amlodipine/atorvastatin (Caduet)

**CALCIUM CHANNEL BLOCKERS****Tier 1**

amlodipine

amlodipine (Norvasc=NC)

diltiazem (Cardizem=NC)

diltiazem ext-rel (Cardizem CD=NC)

diltiazem ext-rel (Cardizem LA=NC)

diltiazem ext-rel (Tiazac=NC)

felodipine ext-rel

isradipine

nicardipine

nifedipine 10 mg (Procardia)

nifedipine ext-rel

nisoldipine ext-rel (Sular=NC)

verapamil

verapamil ext-rel (Calan SR=NC)

verapamil ext-rel (Verelan PM=NC)

verapamil ext-rel (Verelan=NC)

**Tier 2**

Nifedipine 20 mg

**Tier 3**

Nymalize

**CARDIOMYOPATHY AGENTS****Tier 4**

Vyndamax SP PA QL

Vyndaqel SP PA QL

**CENTRALLY ACTING AGENTS****Tier 1**

clonidine

clonidine (Catapres=NC)

guanfacine

guanfacine (Tenex=NC)

methyldopa

**Tier 2**

clonidine transdermal (Catapres-TTS NC)

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**DIRECT RENIN INHIBITORS****Tier 2**

aliskiren (Tekturna)

**DIURETICS****Tier 1**

amiloride

amiloride/hydrochlorothiazide

bumetanide

chlorothiazide

chlorthalidone

furosemide

furosemide (Lasix)

hydrochlorothiazide

indapamide

metolazone

spironolactone

spironolactone (Aldactone=NC)

spironolactone/hydrochlorothiazide (Aldactazide=NC)

torsemide

triamterene/hydrochlorothiazide capsules 37.5/25

triamterene/hydrochlorothiazide capsules 37.5/25 (Dyazide)

triamterene/hydrochlorothiazide capsules 50/25

triamterene/hydrochlorothiazide tablets 37.5/25

triamterene/hydrochlorothiazide tablets 37.5/25 (Maxzide-25)

triamterene/hydrochlorothiazide tablets 75/50

triamterene/hydrochlorothiazide tablets 75/50 (Maxzide)

**Tier 2**

ethacrynic acid (Edecrin)

triamterene (Dyrenium NC)

**Tier 3**

Keveyis PA

**LIPID LOWERING AGENTS****HMG-CoA Reductase Inhibitors****Tier 1**

atorvastatin 10 mg, 20 mg (Lipitor 10 mg, 20 mg=NC) QL

atorvastatin 40 mg, 80 mg (Lipitor 40 mg, 80 mg=NC)

fluvastatin (Lescol=NC) QL

lovastatin (Mevacor=NC) QL

pravastatin (Pravachol=NC) QL

simvastatin 5 mg, 10 mg, 20 mg, 40 mg (Zocor 5 mg, 10 mg, 20 mg, 40 mg=NC) QL

simvastatin 80 mg (Zocor 80 mg=NC)

**Tier 2**

fluvastatin ext-rel (Lescol XL NC) QL

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rosuvastatin 20 mg, 40 mg (Crestor 20 mg, 40 mg NC)  
 rosuvastatin 5 mg, 10 mg (Crestor 5 mg, 10 mg NC) QL

**Lipid Lowering Combinations**

**Tier 2**

ezetimibe/simvastatin (Vytorin NC)

**Tier 3**

Advicor

**Others**

**Tier 1**

cholestyramine (Prevalite)  
 cholestyramine (Questran/Questran Light=NC)  
 colestipol (Colestid=NC)  
 fenofibrate 43 mg, 130 mg (Antara=NC)  
 fenofibrate 48 mg, 145 mg  
 fenofibrate 48 mg, 145 mg (Tricor=NC)  
 fenofibrate 54 mg, 67 mg, 134 mg, 160 mg, 200 mg  
 fenofibric acid (Fibricor=NC)  
 fenofibric acid delayed-rel (Trilipix=NC)  
 gemfibrozil (Lopid=NC)

**Tier 2**

colesevelam (Welchol NC)  
 ezetimibe (Zetia)  
 fenofibrate 120 mg (Fenoglide 120 mg NC)  
 fenofibrate 40 mg, 120 mg  
 fenofibrate 50 mg, 150 mg (Lipofen NC)  
 fenofibrate micronized capsule 130 mg  
 niacin ext-rel (Niaspan)  
 omega-3 acid ethyl esters (Lovaza NC)  
 Vascepa PA

**Tier 4**

Juxtapid PA QL

**PCSK9 Inhibitors**

**Tier 2**

Repatha PA QL

**NEPRILYSIN INHIBITOR/ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS**

**Tier 2**

Entresto

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**NITRATE/VASODILATOR COMBINATIONS****Tier 2**

BiDil

**POTASSIUM REPLACEMENT****Tier 1**

potassium chloride ext-rel

potassium chloride/potassium bicarbonate/citric acid effervescent tablets 25 mE

**Tier 2**

potassium chloride liquid

potassium chloride powder

**Tier 3**

Effer-K 10 mEq, 20 mEq

**PULMONARY HYPERTENSION****Medical Benefit**

epoprostenol sodium PA SI

epoprostenol sodium (Flolan) PA SI

Remodulin PA SI

Tyvaso PA SI

Veletri PA SI

Ventavis PA SI

**Tier 4**

Adempas SP PA

ambrisentan (Letairis) SP PA

bosentan tablets 62.5 mg, 125 mg SP

bosentan tablets 62.5 mg, 125 mg (Tracleer NC) SP

Opsumit SP PA

Orenitram SP PA

sildenafil 20 mg SP PA

sildenafil 20 mg (Revatio) SP PA

sildenafil oral suspension (Revatio oral suspension) SP PA

tadalafil (Adcirca) SP PA

Uptravi SP PA

**SELECTIVE ALDOSTERONE BLOCKER****Tier 2**

eplerenone

eplerenone (Inspra)

**VASODILATORS****Tier 1**

hydralazine

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**DIABETES MELLITUS****DIABETIC SUPPLIES****Tier 2**

Insulin Pen Needles  
OneTouch test strips

**Tier 3**

Injection device for insulin (Humapen/Novopen)

**GLUCOSE ELEVATING****Tier 2**

Baqsimi QL  
diazoxide suspension (Proglycem NC)  
Glucagen  
Glucagon Emergency Kit

**INJECTABLE AGENTS****Tier 2**

Ozempic  
Trulicity  
Victoza

**Tier 3**

SymLinPen

**INSULINS****Tier 2**

Humalog  
Humulin  
Lantus  
Omnipod DASH Pods QL  
Toujeo

**ORAL AGENTS****Tier 1**

acarbose (Precose)  
alogliptin (Nesina=NC)  
alogliptin/metformin (Kazano=NC)  
alogliptin/pioglitazone (Oseni=NC)  
glimepiride  
glimepiride (Amaryl)  
glipizide  
glipizide (Glucotrol)  
glipizide ext-rel (Glucotrol XL)  
glipizide/metformin

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glyburide  
 glyburide (DiaBeta)  
 glyburide, micronized  
 glyburide, micronized (Glynase)  
 glyburide/metformin  
 metformin  
 metformin (Glucophage)  
 metformin ext-rel (Glucophage XR)  
 nateglinide (Starlix)  
 pioglitazone  
 pioglitazone (Actos)  
 pioglitazone/glimepiride (Duetact)  
 pioglitazone/metformin (Actoplus Met)  
 repaglinide  
**Tier 2**  
 Cycloset  
 Farxiga  
 Janumet  
 Janumet XR  
 Januvia  
 Jardiance  
 metformin ext-rel (Glumetza NC) PA  
 metformin oral solution  
 miglitol (Glyset)  
 Synjardy  
 Synjardy XR  
 Xigduo XR  
**Tier 3**  
 Actoplus Met XR  
 Glyxambi  
 metformin ext-rel (Fortamet NC) PA

## EAR, NOSE, AND THROAT

### EAR

#### Antimicrobials

##### Tier 1

acetic acid otic  
 acetic acid/aluminum acetate otic  
 acetic acid/hydrocortisone otic  
 ciprofloxacin otic (Cetraxal)  
 neomycin/polymyxin B/hydrocortisone otic  
 ofloxacin otic

##### Tier 2

ciprofloxacin-dexamethasone otic suspension (Ciprodex)

##### Tier 3

Cipro HC Otic

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**Miscellaneous****Tier 1**

fluocinolone acetonide oil (Dermotic)

**MOUTH AND THROAT****Tier 1**

chlorhexidine gluconate  
 chlorhexidine gluconate (Peridex)  
 doxycycline hyclate 20 mg tablets  
 lidocaine viscous  
 pilocarpine (Salagen)  
 triamcinolone paste

**Tier 2**

cevimeline (Evoxac)  
 Episil QL  
 Gelclair

**Tier 3**

First-BXN  
 First-Duke's Mouthwash  
 Numoisyn

**NOSE****Antihistamines****Tier 1**

clemastine 2.68 mg  
 cyproheptadine  
 diphenhydramine 50 mg  
 hydroxyzine HCl  
 hydroxyzine pamoate (Vistaril)  
 promethazine

**Other****Tier 1**

azelastine spray QL  
 ipratropium nasal spray QL  
 ipratropium nasal spray (Atrovent nasal aerosol) QL

**Tier 2**

olopatadine nasal spray (Patanase NC) QL

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**EYE****ANTI-INFECTIVES****Tier 1**

bacitracin eye ointment  
 bacitracin/polymyxin B eye ointment  
 ciprofloxacin eye drops (Ciloxan)  
 erythromycin eye ointment  
 gentamicin eye drops, eye ointment  
 levofloxacin eye drops  
 neomycin/polymyxin B/gramicidin eye drops  
 ofloxacin eye drops (Ocuflox)  
 polymyxin B/trimethoprim eye drops (Polytrim)  
 sulfacetamide 10% eye drops (Bleph-10)  
 tobramycin eye drops, eye ointment (Tobrex)

**Tier 2**

gatifloxacin eye drops (Zymaxid NC) QL  
 moxifloxacin (Moxeza NC) QL  
 moxifloxacin (Vigamox NC) QL

**Tier 3**

Azasite QL  
 Besivance QL  
 Ciloxan ointment

**ANTI-INFLAMMATORIES****Tier 1**

dexamethasone sodium phosphate eye drops, eye ointment  
 diclofenac sodium eye drops (Voltaren ophthalmic solution)  
 fluorometholone eye drops, eye ointment (FML)  
 ketorolac 0.4% eye drops (Acular LS)  
 ketorolac 0.5% eye drops (Acular)  
 neomycin/polymyxin B/bacitracin/hydrocortisone eye ointment  
 neomycin/polymyxin B/dexamethasone eye drops, eye ointment (Maxitrol)  
 prednisolone acetate 1% eye drops (Pred Forte)  
 sulfacetamide/prednisolone phosphate eye drops, eye ointment

**Tier 2**

Alrex  
 bromfenac sodium eye drops  
 loteprednol suspension 0.5% (Lotemax suspension NC)  
 neomycin/polymyxin B/hydrocortisone eye drops  
 Pred Mild  
 Pred-G  
 Prednisolone Phosphate 1%  
 tobramycin/dexamethasone 0.3%/0.1% eye suspension (Tobradex)

Vexol

**Tier 3**

Blephamide  
 Flarex

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Ilevro  
 Inveltys  
 Lotemax  
 Maxidex  
 Nevanac  
 Prolensa  
 Tobradex ointment  
 Tobradex ST  
 Zylet

**ANTIVIRAL**

**Tier 2**

trifluridine eye drops

**Tier 3**

Zirgan

**GLAUCOMA**

**Oral**

**Tier 1**

acetazolamide  
 acetazolamide ext-rel (Diamox Sequels)  
 methazolamide

**Topical**

**NTM**

Rocklatan STPA

**Tier 1**

apraclonidine 0.5% eye drops (Iopidine 0.5%)  
 brimonidine 0.2% eye drops  
 carteolol eye drops  
 dorzolamide HCl eye drops (Trusopt)  
 dorzolamide HCl/timolol maleate eye drops (Cosopt)  
 latanoprost eye drops (Xalatan=NC)  
 levobunolol eye drops  
 timolol maleate eye drops  
 timolol maleate eye drops (Timoptic)  
 timolol maleate gel forming solution (Timoptic-XE)

**Tier 2**

Azopt  
 Betimol  
 bimatoprost 0.03% STPA  
 brimonidine 0.15% eye drops (Alphagan P 0.15%)  
 dorzolamide/timolol/preservative-free (Cosopt PF)  
 Pilopine HS gel  
 timolol maleate 0.5% eye drops (Istalol NC)  
 travoprost (Travatan Z NC) STPA

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**Tier 3**

Alphagan P 0.1%  
 Betoptic S  
 Combigan QL  
 Iopidine 1%  
 Lumigan STPA  
 Rhopressa STPA  
 Simbrinza  
 Vyzulta STPA  
 Xelpros STPA  
 Zioptan QL STPA

**OPHTHALMIC DRUGS, MISCELLANEOUS****Tier 1**

atropine eye drops, eye ointment  
 cyclopentolate ophthalmic solution (Cyclogyl)  
 naphazoline eye drops

**Tier 2**

Cystaran  
 Restasis PA  
 Xiidra PA

**Tier 3**

Cequa PA QL  
 Freshkote

**Tier 4**

Oxervate PA

**GASTROINTESTINAL DRUGS****DIARRHEA****Tier 1**

diphenoxylate/atropine (Lomotil)  
 loperamide

**Tier 2**

Mytesi PA

**EMESIS****Tier 1**

meclizine  
 metoclopramide  
 metoclopramide (Reglan)  
 ondansetron QL  
 ondansetron (Zofran=NC) QL  
 prochlorperazine  
 promethazine  
 trimethobenzamide capsules (Tigan capsules)

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**Tier 2**

Anzemet tablets QL  
 aprepitant capsules (Emend NC) QL  
 dronabinol capsule  
 granisetron tablets QL  
 promethazine suppositories  
 scopolamine transdermal (Transderm Scop)

**Tier 3**

Akynzeo QL  
 Emend suspension QL  
 Sancuso QL  
 Zuplenz QL

**Tier 4**

Varubi QL

## GASTROINTESTINAL DRUGS, MISCELLANEOUS

**Tier 1**

alosetron (Lotronex)  
 constulose  
 enulose  
 Gavilyte-C  
 Gavilyte-G  
 Gavilyte-H  
 lactulose  
 peg 3350/electrolytes  
 peg 3350/electrolytes (Nulytely)  
 peg 3350/electrolytes disposable jug (Golytely)  
 Peg-prep  
 Trilyte  
 ursodiol (Urso Forte)  
 ursodiol (Urso)

**Tier 2**

Amitiza  
 Cholbam  
 Golytely packets  
 Linzess QL  
 Movantik  
 peg 3350/electrolytes (Moviprep)  
 Viberzi PA QL

**Tier 3**

Clenpiq  
 Nulytely with Flavor Packs  
 Plenvu  
 Sucraid  
 Suprep

**Tier 4**

Gattex SP QL  
 Ocaliva SP PA QL  
 Xermelo

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**GASTROINTESTINAL DRUGS/PEPTIC ULCER TREATMENT/REFLUX (GERD)****H2 Receptor Antagonists****Tier 1**

famotidine  
famotidine (Pepcid=NC)

**Tier 2**

cimetidine  
nizatidine

**Tier 3**

famotidine suspension (Pepcid suspension)

**Others****Tier 1**

lansoprazole + amoxicillin + clarithromycin (Prevpac)  
metoclopramide orally disintegrating tablets 5 mg QL  
metoclopramide orally disintegrating tablets 5 mg (Metozolv ODT 5 mg) QL  
misoprostol  
misoprostol (Cytotec)  
sucralfate tablets (Carafate)

**Tier 2**

Pylera

**Tier 3**

Metoclopramide orally disintegrating tablets 10 mg QL  
sucralfate suspension (Carafate suspension NC)

**Proton Pump Inhibitors****Tier 1**

esomeprazole delayed-rel capsules (Nexium 24HR OTC)  
omeprazole delayed-rel (Prilosec) PA QL  
pantoprazole delayed-rel (Protonix) PA QL

**Tier 2**

esomeprazole delayed-rel oral suspension PA QL  
lansoprazole delayed-rel (Prevacid) PA QL  
omeprazole/sodium bicarbonate oral packets (Zegerid oral packets) PA QL  
omeprazole/sodium bicarbonate OTC capsules PA  
pantoprazole sodium suspension (Protonix Oral Suspension) PA QL  
rabeprazole delayed-rel (AcipHex) PA QL

**Tier 3**

Dexilant PA QL  
First-Lansoprazole QL  
First-Omeprazole QL  
lansoprazole soluble tablets (Prevacid Solutab) PA QL  
omeprazole/sodium bicarbonate capsules (Zegerid capsules) PA QL  
Prilosec Oral Suspension PA QL

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**INFLAMMATORY BOWEL DISEASE****Medical Benefit**

Entyvio PA

**Tier 1**

balsalazide (Colazal)

budesonide delayed-release capsules (Entocort EC)

hydrocortisone enema

mesalamine rectal suspension (Rowasa)

sulfasalazine (Azulfidine)

sulfasalazine delayed-rel (Azulfidine EN-Tablets)

**Tier 2**

budesonide ext-rel (Uceris tablets NC)

Cortifoam

Dipentum

mesalamine delayed-rel (Delzicol NC)

mesalamine delayed-rel 1.2 gm (Lialda NC)

mesalamine delayed-rel tablets

mesalamine ext-rel capsules (Apriso NC)

mesalamine suppositories (Canasa)

Pentasa

Uceris rectal foam

**PANCREATIC ENZYMES****Tier 2**

Creon

**Tier 3**

Pancreaze

Pertzze

Viokace

Zenpep

**SPASM****Tier 1**

dicyclomine (Bentyl)

hyoscyamine sulfate (Levsin)

hyoscyamine sulfate ext-rel (Levbid)

**Tier 3**

chlordiazepoxide/clidinium (Librax NC)

**HORMONES****ADRENAL CORTICOSTEROIDS****Tier 1**

cortisone acetate

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dexamethasone  
dexamethasone therapy pack  
fludrocortisone  
hydrocortisone (Cortef)  
methylprednisolone (Medrol)  
prednisolone sodium phosphate  
prednisolone sodium phosphate (Millipred)  
prednisolone sodium phosphate 5 mg/5 mL  
prednisolone sodium phosphate orally disintegratin (Orapred ODT)  
prednisolone syrup  
prednisone  
**Tier 2**  
oxandrolone  
**Tier 3**  
Prednisone Intensol  
**Tier 4**  
Acthar SP PA

## ANDROGENS

**Tier 1**  
testosterone cypionate  
testosterone enanthate  
**Tier 2**  
testosterone 50 mg/5 g gel  
testosterone gel (AndroGel NC)  
testosterone gel (Testim NC)  
testosterone gel (Vogelxo NC)  
testosterone gel 10 mg (Fortesta Gel NC)  
testosterone soln  
**Tier 3**  
Jatenzo PA QL  
testosterone 1.62% gel

## ENDOMETRIOSIS

**Tier 1**  
danazol  
leuprolide acetate 1 mg kit  
**Tier 2**  
Synarel  
**Tier 3**  
Orilissa PA QL

## GROWTH HORMONES

**Tier 4**  
Egrifta SP PA  
Increlex SP PA  
Norditropin Products SP PA  
Serostim SP PA

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<b>CM</b> Cancer Mandate	<b>MM</b> Mandatory Mail	<b>NC</b> Non Covered Drugs	35
<b>NTM</b> New-to-Market	<b>PA</b> Prior Authorization	<b>QL</b> Quantity Limitation Program	
<b>SI</b> Specialty Infusion	<b>SP</b> Designated Specialty Pharmacy	<b>STPA</b> Step Therapy Prior Authorization	
<b>WH</b> Women's Health	<b>ACA</b> Preventive Service	<b>LCG</b> Low Cost Generic	

Zorbitive SP PA

**OVULATION INDUCING AGENTS****Tier 1**

chorionic gonadotropin SP  
 chorionic gonadotropin (Novarel) SP PA  
 chorionic gonadotropin (Pregnyl) SP PA  
 clomiphene

**Tier 2**

Ovidrel SP

**Tier 4**

Cetrotide SP PA  
 Follistim AQ SP PA  
 Ganirelix SP PA  
 Gonal-F SP PA  
 Menopur SP PA

**THYROID REPLACEMENT AND ANTITHYROID AGENTS****Tier 1**

Levothroid  
 levothyroxine (Synthroid)  
 Levoxyl  
 liothyronine (Cytomel)  
 methimazole  
 methimazole (Tapazole)  
 propylthiouracil  
 Unithroid

**Tier 2**

Armour Thyroid

**Tier 3**

Tirosint  
 Tirosint-sol

**MISCELLANEOUS DRUGS****ACROMEGALY****Medical Benefit**

Signifor LAR PA

**Tier 4**

Somavert SP PA

**AMYOTROPHIC LATERAL SCLEROSIS****Medical Benefit**

Radicava PA

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**Tier 1**  
riluzole (Rilutek)  
**Tier 4**  
Tiglutik

**ANAPHYLAXIS EMERGENCY**

**Tier 1**  
epinephrine (generic for Adrenacllick) (Adrenacllick=NC) QL  
**Tier 2**  
epinephrine (generic for Epipen Jr.) (Epipen Jr. NC) QL  
epinephrine (generic for Epipen) (Epipen NC) QL

**ANTIHEMOPHILIC AGENTS**

**Medical Benefit**  
Factor Products, various PA SI

**AUTOSOMAL DOMINANT POLYCYSTIC KIDNEY DISEASE (ADPKD)**

**Tier 4**  
Jynarque

**BOTULINUM TOXINS**

**Medical Benefit**  
Botulinum Toxins PA

**CHRONIC GRANULOMATOUS DISEASE**

**Tier 2**  
Actimmune

**CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES**

**Medical Benefit**  
Ilaris PA  
**Tier 4**  
Arcalyst SP PA QL

**CUSHING'S DISEASE**

**Tier 3**  
Isturisa PA  
**Tier 4**  
Signifor PA QL

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**CUSHING'S SYNDROME****Tier 4**

Korlym PA QL

**CYSTIC FIBROSIS****Tier 4**

Arikayce

Cayston SP

Kalydeco PA QL

Orkambi PA QL

Pulmozyme

Symdeko PA QL

TOBI Podhaler

tobramycin inhalation solution (Bethkis)

tobramycin inhalation solution (Kitabis Pak)

tobramycin inhalation solution (TOBI)

Trikafta PA QL

**DIABETES INSIPIDUS****Tier 1**

desmopressin (DDAVP)

**Tier 3**

Stimate SP

**ERECTILE DYSFUNCTION****Tier 2**

sildenafil (Viagra NC) QL

vardenafil (Levitra NC) QL

**Tier 3**

Caverject

Edex

MUSE

tadalafil 2.5 mg, 10 mg, 20 mg (Cialis NC) QL

**EXCESSIVE SWEATING****Tier 1**

aluminum chloride soln 20% (Drysol)

**Tier 3**

Qbrexza PA QL

**FABRY DISEASE****Medical Benefit**

Fabrazyme PA SI

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**Tier 4**  
Galafold PA

## FIBROMYALGIA

**Tier 1**  
duloxetine delayed-rel (Cymbalta=NC) QL  
pregabalin  
pregabalin (Lyrica=NC STPA)  
**Tier 2**  
Savella QL STPA

## GAUCHER DISEASE

**Medical Benefit**  
Cerezyme PA SI  
Elelyso PA  
Vpriv PA SI  
**Tier 3**  
miglustat (Zavesca NC) PA  
**Tier 4**  
Cerdelga SP

## HEMOSTATICS - SYSTEMIC

**Tier 1**  
tranexamic acid (Lysteda) QL  
**Tier 3**  
Oriahnn cap PA QL

## HEREDITARY ANGIOEDEMA

**Medical Benefit**  
Berinert SI  
Cinryze PA SI  
Ruconest SI  
**Tier 4**  
Haegarda SP PA  
icatibant (Firazyr) SP PA QL  
Takhzyro SP PA

## HEREDITARY OROTIC ACIDURIA

**Tier 2**  
Xuriden QL

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## HEREDITARY TYROSINEMIA TYPE I

### Tier 4

nitisinone 2, 5, 10 mg capsules (Orfadin 2, 5, 10 mg capsules NC)

Nityr

Orfadin 20mg capsules

Orfadin suspension

## HUNTER SYNDROME

### Medical Benefit

Elaprase SI

## HUNTINGTON'S DISEASE

### Tier 4

Austedo SP PA QL

tetrabenazine SP QL

tetrabenazine (Xenazine NC) SP QL

## HYPERAMMONEMIA

### Tier 2

Carbaglu

## HYPERCALCEMIA

### Tier 2

cinacalcet (Sensipar NC)

## HYPERPARATHYROIDISM

### Tier 1

calcitriol (Rocaltrol)

paricalcitol capsules (Zemlar)

### Tier 2

doxercalciferol (Hectorol)

## HYPONATREMIA

### Tier 2

tolvaptan (Samsca) QL

## HYPOPARATHYROIDISM

### Tier 4

Natpara SP QL

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**HYPOPHOSPHATASIA****Tier 2**

Strensiq PA QL

**KIDNEY STONES****Tier 2**

potassium citrate ext-rel

**Tier 3**

Thiola

Thiola EC

**LC-FAOD****Tier 4**

Dojolvi PA

**LIPODYSTROPHY****Tier 3**

Myalept PA QL

**LYSOSOMAL ACID LIPASE DEFICIENCY****Medical Benefit**

Kanuma PA SI

**MORQUIO A SYNDROME****Medical Benefit**

Vimizim PA SI

**MUCOPOLYSACCHARIDOSIS****Medical Benefit**

Aldurazyme SI

Naglazyme SI

**MULTIPLE SCLEROSIS****Tier 4**

Aubagio SP QL

Avonex SP QL

Avonex Pen SP QL

Bafiertam SP

Betaseron SP QL

Copaxone 20 mg/mL prefilled syringe SP QL

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Copaxone 40 mg/mL prefilled syringe SP QL  
 dalfampridine ext-rel (Ampyra NC) SP QL  
 dalfampridine ext-rel (dalfampridine) SP QL  
 Gilenya SP QL  
 Mavenclad SP PA QL  
 Mayzent SP QL  
 Plegridy SP QL  
 Rebif/Rebif Rebidose SP QL  
 Tecfidera SP QL  
 Vumerity SP  
 Zeposia SP

## MUSCULAR DYSTROPHY AGENTS

### Medical Benefit

Exondys 51 PA

#### Tier 1

guanidine

#### Tier 4

Emflaza PA QL

Firdapse PA

Ruzurgi PA

## MYASTHENIA GRAVIS

#### Tier 1

pyridostigmine (Mestinon)

#### Tier 2

pyridostigmine ext-rel (Mestinon Timespan)

## OBESITY MANAGEMENT

#### Tier 1

benzphetamine

diethylpropion

phendimetrazine (Phendimetrazine)

phendimetrazine ext-rel PA

phentermine

phentermine (Adipex-P) PA

#### Tier 2

Saxenda PA

#### Tier 3

Contrave PA

Lomaira PA

Qsymia PA

Xenical PA

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## ORTHOSTATIC HYPOTENSION

**Tier 1**

midodrine

**Tier 4**

Northera PA

## PAGET'S DISEASE

**Tier 1**

alendronate

alendronate (Fosamax=NC)

**Tier 2**

risedronate (Actonel NC)

## PAROXYSMAL NOCTURNAL HEMOGLOBINURIA

**Medical Benefit**

Soliris PA

Ultomiris PA

## PHENYLKETONURIA TREATMENT

**Tier 4**

Palynziq PA QL

sapropterin SP PA

sapropterin (Kuvan) SP PA

## PHEOCHROMOCYTOMA

**Tier 2**

metyrosine

## PHOSPHATE BINDERS

**Tier 1**

calcium acetate (PhosLo=NC)

**Tier 2**

Fosrenol oral powder NC

lanthanum carbonate chew tabs (Fosrenol NC)

Phoslyra NC

Renagel NC

sevelamer carbonate oral powder packets (Renvela Pak NC)

sevelamer carbonate tablets 800 mg (Renvela tablets NC)

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**LCG** Low Cost Generic

**POLYNEUROPATHY OF HEREDITARY AMYLOIDOSIS**

**Tier 4**

Tegsedi PA QL

**POTASSIUM-REMOVING AGENTS**

**Tier 2**

Lokelma

Veltassa

**PSEUDOBULBAR AFFECT**

**Tier 2**

Nuedexta PA

**PSORIATIC ARTHRITIS**

**Tier 4**

Otezla SP PA QL

**RADIOACTIVE CONTAMINATION**

**Tier 3**

Radiogardase

**RESPIRATORY SYNCYTIAL VIRUS PROPHYLAXIS**

**Medical Benefit**

Synagis SP PA

**RESTLESS LEGS SYNDROME**

**Tier 3**

Horizant QL

**SICKLE CELL DISEASE**

**Tier 4**

Endari PA

Oxbryta SP PA

**SPINAL MUSCULAR ATROPHY**

**Medical Benefit**

Spinraza PA

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**SUBARACHNOID HEMORRHAGE****Tier 1**

nimodipine

**SYMPTOMATIC BENIGN PROSTATIC HYPERPLASIA****Tier 1**

alfuzosin ext-rel (Uroxatral=NC)

doxazosin (Cardura=NC)

dutasteride

dutasteride (Avodart)

dutasteride/tamsulosin (Jalyn=NC)

finasteride 5 mg (Proscar=NC)

tamsulosin

tamsulosin (Flomax)

terazosin

**Tier 3**

tadalafil 5 mg (Cialis 5 mg NC) PA QL

**TARDIVE DYSKINESIA****Tier 2**

Ingrezza PA QL

**UREA CYCLE DISORDERS****Tier 2**

sodium phenylbutyrate (Buphenyl)

**Tier 3**

Ravicti SP PA

**UROLOGIC DISORDERS****Tier 1**

bethanechol

desmopressin (DDAVP)

flavoxate hydrochloride

oxybutynin

oxybutynin ext-rel (Ditropan XL)

propantheline 15 mg

tolterodine (Detrol STPA)

trospium

uribel (Uribel)

**Tier 2**

darifenacin (Enablex STPA)

solifenacin succinate (Vesicare)

tolterodine ext-rel (Detrol LA STPA)

trospium ext-rel

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**Tier 3**

Elmiron  
 Gelnique STPA  
 methenamine/hyoscyamine/methylene blue/phenyl sali (Urogesic Blue)  
 Myrbetriq STPA

**WILSON'S DISEASE**

**Tier 2**

Galzin  
 penicillamine (Cuprimine NC)  
 penicillamine (Depen Titratabs NC)  
 trientine (Syprine NC)

**X-LINKED HYPOPHOSPHATEMIA**

**Medical Benefit**

Crysvita PA

**NEUROLOGICAL DRUGS**

**ALZHEIMER'S DISEASE**

**Tier 1**

donepezil  
 donepezil (Aricept)  
 galantamine (Razadyne)  
 galantamine ext-rel (Razadyne ER)  
 rivastigmine capsules (Exelon capsules)

**Tier 2**

memantine (Namenda)  
 memantine ext-rel (Namenda XR NC)  
 rivastigmine transdermal (Exelon Patch)

**Tier 3**

Exelon solution  
 Namenda oral solution

**MIGRAINE THERAPY**

**Medical Benefit**

Vyepi PA

**Abortive Therapy**

**Tier 1**

dihydroergotamine injection (D.H.E. 45)  
 ibuprofen (Rx Only)  
 naratriptan (Amerge=NC) QL  
 rizatriptan (Maxalt/Maxalt-MLT=NC) QL

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sumatriptan (Imitrex=NC) QL  
**Tier 2**  
 almotriptan QL  
 eletriptan (Relpax NC) QL  
 ergotamine/caffeine tablets (Cafegot NC)  
 frovatriptan (Frova NC) QL  
 naproxen sodium  
 naproxen sodium (Anaprox/Anaprox DS NC)  
 Nurtec PA QL  
 Reyvow PA QL  
 sumatriptan/naproxen 85 mg/500 mg (Treximet 85 mg/500 mg NC) PA QL  
 Ubrelvy PA QL  
 zolmitriptan (Zomig/Zomig-ZMT NC) QL  
**Tier 3**  
 dihydroergotamine spray (Migranal NC) QL  
 Migergot suppository  
 Onzetra Xsail QL STPA  
 Zomig Nasal Spray QL STPA

**Prophylactic Therapy**

**Tier 1**  
 amitriptyline PA  
 atenolol  
 atenolol (Tenormin=NC)  
 cyproheptadine  
 divalproex sodium delayed-rel (Depakote)  
 divalproex sodium ext-rel (Depakote ER)  
 doxepin PA  
 metoprolol tartrate (Lopressor=NC)  
 nadolol (Corgard)  
 nortriptyline (Pamelor=NC) PA  
 propranolol  
 propranolol ext-rel (Inderal LA=NC)  
 topiramate  
 topiramate (Topamax)  
 verapamil

**Tier 2**  
 Aimovig PA QL  
 Ajovy PA QL  
 Ajovy Auto-injector PA QL  
 Emgality PA QL

**Tier 3**  
 metoprolol tartrate 37.5 mg, 75 mg

**MUSCLE SPASM**

**Tier 1**  
 carisoprodol 250 mg (Soma 250 mg=NC)  
 carisoprodol 350 mg (Soma 350 mg)  
 carisoprodol/aspirin

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chlorzoxazone  
 cyclobenzaprine  
 methocarbamol (Robaxin)  
 orphenadrine ext-rel  
**Tier 2**  
 metaxalone (Skelaxin NC)  
 orphenadrine/aspirin/caffeine (Norgesic Forte NC)

**PARKINSON'S DISEASE**

**Tier 1**  
 amantadine  
 benzotropine  
 bromocriptine (Parlodel)  
 cabergoline  
 carbidopa (Lodosyn)  
 carbidopa/levodopa (Sinemet)  
 carbidopa/levodopa ext-rel  
 carbidopa/levodopa orally disintegrating tablets  
 diphenhydramine 50 mg  
 entacapone (Comtan)  
 pramipexole (Mirapex)  
 ropinirole  
 ropinirole ext-rel (Requip XL) QL  
 selegiline capsules  
 selegiline tablets  
 tolcapone (Tasmar)  
 trihexyphenidyl

**Tier 2**  
 Apokyn  
 carbidopa/levodopa/entacapone (Stalevo)  
 Duopa  
 pramipexole ext-rel (Mirapex ER)  
 rasagiline mesylate (Azilect)

**Tier 3**  
 Inbrija PA  
 Neupro QL  
 Nourianz PA QL  
 Xadago PA

**SEIZURES**

**Tier 1**  
 carbamazepine (Tegretol)  
 carbamazepine ext-rel (Carbatrol)  
 carbamazepine ext-rel (Tegretol-XR)  
 clonazepam  
 clonazepam (Klonopin=NC)  
 divalproex sodium delayed-rel (Depakote)  
 divalproex sodium ext-rel (Depakote ER)  
 ethosuximide (Zarontin)

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felbamate (Felbatol)  
gabapentin (Neurontin)  
lamotrigine  
lamotrigine (Lamictal)  
levetiracetam (Keppra)  
levetiracetam ext-rel (Keppra XR=NC)  
oxcarbazepine (Trileptal)  
phenobarbital  
phenytoin sodium (Dilantin Infatabs)  
phenytoin sodium ext-rel (Dilantin)  
pregabalin  
pregabalin (Lyrica=NC STPA)  
primidone (Mysoline)  
tiagabine 2 mg, 4 mg (Gabitril 2 mg, 4 mg)  
topiramate  
topiramate (Topamax)  
valproic acid  
zonisamide (Zonegran=NC)

**Tier 2**

Aptiom  
Banzel QL  
clobazam (Onfi)  
diazepam rectal gel QL  
diazepam rectal gel (Diastat/Diastat AcuDial) QL  
divalproex sodium sprinkle (Depakote Sprinkle)  
Fycompa  
lamotrigine ext-rel (Lamictal XR) QL  
lamotrigine orally disintegrating tablets (Lamictal ODT)  
lamotrigine starter kit (Lamictal Starter Kit)  
tiagabine 12 mg, 16 mg (Gabitril 12 mg, 16 mg NC)  
topiramate ext-rel (Qudexy XR NC)  
Vimpat QL  
Xcopri

**Tier 3**

Briviact  
Fintepla PA  
Oxtellar XR QL  
Peganone  
Potiga  
Stavzor  
Sympazan PA  
Valtoco PA QL

**Tier 4**

Diacomit PA  
Epidiolex SP PA  
vigabatrin (Sabril)

**SPASTICITY**

**Tier 1**

baclofen

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diazepam  
 diazepam (Valium=NC)  
 tizanidine (Zanaflex)

**Tier 2**

dantrolene (Dantrium)

**Tier 4**

Ozobax PA

**PAIN AND INFLAMMATORY DISEASES**

**ARTHRITIS**

**Anti-Inflammatory Drugs: Rheumatoid And Osteoarthritis**

**Tier 1**

diclofenac potassium  
 diclofenac sodium delayed-rel  
 diclofenac sodium solution (Pennsaid=NC) QL  
 diflunisal  
 etodolac  
 flurbiprofen  
 ibuprofen (Rx Only)  
 meloxicam  
 meloxicam (Mobic)  
 nabumetone  
 naproxen  
 naproxen (Naprosyn=NC)  
 piroxicam (Feldene)  
 sulindac

**Tier 2**

celecoxib (Celebrex NC)  
 diclofenac sodium delayed-rel/misoprostol (Arthrotec)  
 etodolac ext-rel  
 naproxen sodium  
 naproxen sodium (Anaprox/Anaprox DS NC)

**Tier 3**

fenoprofen (Nalfon)  
 meclofenamate  
 oxaprozin (Daypro NC)

**Disease Modifying Antirheumatic Drugs (DMARDs): Rheumatoid Arthritis-Additional**

**Tier 1**

azathioprine (Imuran)  
 hydroxychloroquine (Plaquenil) PA  
 methotrexate  
 sulfasalazine (Azulfidine)

**Tier 2**

leflunomide (Arava NC)

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penicillamine (Cuprimine NC)  
 penicillamine (Depen Titratabs NC)  
 Rheumatrex  
 Ridaura  
**Tier 3**  
 Rasuvo  
**Tier 4**  
 Xeljanz SP PA QL  
 Xeljanz XR SP PA QL

**Viscosupplements**

**Medical Benefit**  
 Durolane PA NC  
 Euflexxa PA  
 Gel-One PA NC  
 Gelsyn-3 PA NC  
 Genvisc 850 PA NC  
 Hyalgan PA NC  
 Hymovis PA NC  
 Monovisc PA NC  
 Orthovisc PA NC  
 Supartz FX SP NC  
 Synvisc PA NC  
 Synvisc-One PA NC  
 Trivisc PA NC  
 Visco-3 PA NC

**GOUT**

**Medical Benefit**  
 Krystexxa PA  
**Tier 1**  
 allopurinol  
 allopurinol (Zyloprim)  
 naproxen  
 naproxen (Naprosyn=NC)  
 probenecid  
 sulindac  
**Tier 2**  
 colchicine capsules (Mitigare 0.6 mg NC) QL  
 colchicine tablets (Colcrys) QL  
 febuxostat (Uloric STPA)

**PAIN, NSAID ANALGESICS**

**Tier 1**  
 diclofenac sodium gel 1% (Voltaren gel 1%) QL  
 diflunisal  
 etodolac  
 ibuprofen (Rx Only)

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ketorolac tablets  
 naproxen  
 naproxen (Naprosyn=NC)  
 naproxen delayed-rel (EC-Naprosyn)

**Tier 2**

celecoxib (Celebrex NC)  
 ketoprofen  
 naproxen sodium  
 naproxen sodium (Anaprox/Anaprox DS NC)  
 naproxen sodium ext-rel (Naprelan NC)  
 naproxen suspension

**Tier 3**

ketoprofen ext-rel  
 meclofenamate  
 mefenamic acid (Ponstel)

**PAIN, OPIOID AND OTHER ANALGESICS**

**Moderate To Moderately Severe Pain**

**Tier 1**

codeine/acetaminophen (Tylenol w/Codeine=NC) QL  
 codeine/acetaminophen solution QL  
 hydrocodone/acetaminophen QL  
 hydrocodone/acetaminophen (Norco=NC) QL  
 hydrocodone/acetaminophen 5/300, 7.5/300 (Xodol) QL  
 hydrocodone/acetaminophen solution QL  
 hydrocodone/ibuprofen (Vicoprofen=NC) QL  
 oxycodone QL  
 oxycodone/acetaminophen (Percocet=NC) QL  
 oxycodone/acetaminophen 5 mg/325 mg/5 mL solution (Roxicet solution) QL  
 oxycodone/aspirin (Percodan=NC) QL  
 oxycodone/ibuprofen QL  
 oxymorphone (Opana=NC) QL  
 tramadol (Ultram=NC) QL  
 tramadol ext-rel QL  
 tramadol/acetaminophen (Ultracet=NC) QL

Zamiset

**Tier 2**

acetaminophen/caffeine/dihydrocodeine capsules (Trezix) QL  
 acetaminophen/caffeine/dihydrocodeine tablets QL  
 oxymorphone ext-rel QL

**Tier 3**

Capital w/Codeine  
 Hysingla ER QL  
 Hysingla ER 100 mg, 120 mg PA QL  
 Xartemis XR QL

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**Moderate To Severe Pain****Tier 1**

butorphanol nasal spray QL  
 codeine sulfate QL  
 fentanyl citrate lollipop QL  
 fentanyl citrate lollipop (Actiq=NC) QL  
 fentanyl patch 50, 75, 100 mcg/hr PA QL  
 fentanyl transdermal (Duragesic=NC) QL  
 hydromorphone suppository QL  
 hydromorphone tablets, liquid (Dilaudid=NC) QL  
 meperidine oral solution QL  
 meperidine tablets (Demerol) QL  
 methadone PA QL  
 methadone injection PA QL  
 methadone intensol concentrate 10 mg/mL PA QL  
 morphine QL  
 morphine ext-rel (MS Contin=NC) QL  
 morphine ext-rel 60, 100, 200 mg (MS Contin 60, 100, 200 mg=NC) PA QL  
 morphine sulfate beads QL  
 morphine sulfate beads 120 mg PA QL  
 morphine sulfate ext-rel 10, 20, 30, 40 mg (Kadian 10, 20, 30, 40 mg) QL  
 morphine sulfate ext-rel 50, 60, 80, 100 mg (Kadian 50, 60, 80, 100 mg) PA QL  
 morphine sulfate ext-rel tablets (Arymo ER) QL  
 morphine sulfate ext-rel tablets 60 mg (Arymo ER 60 mg) PA QL  
 morphine suppositories 5 mg, 10 mg, 20 mg QL  
 oxycodone (Roxicodone=NC) QL  
 pentazocine/naloxone QL

**Tier 2**

buprenorphine transdermal (Butrans NC) PA QL  
 fentanyl citrate buccal (Fentora NC) QL  
 fentanyl patch 37.5 mcg/hr QL  
 fentanyl patch 62.5 mcg/hr, 87.5 mcg/hr (fentanyl patch 62.5, 87.5 mcg/hr) PA QL  
 hydromorphone ext-rel QL  
 hydromorphone ext-rel 32 mg PA QL  
 Morphine suppositories 30 mg QL  
 oxycodone ext-rel (OxyContin) QL

**Tier 3**

Abstral QL  
 Belbuca PA QL  
 Kadian 200 mg PA QL  
 Nucynta ER QL  
 Oxaydo QL  
 Subsys QL  
 Xtampza ER QL

**Tension Headaches****Tier 1**

butalbital/acetaminophen

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butalbital/aspirin/caffeine (Fiorinal=NC)

**Tier 3**

butalbital/acetaminophen/caffeine (Fioricet NC)

butalbital/acetaminophen/caffeine tabs (Esgic tablets NC)

esgic capsules

**PSYCHIATRIC**

**ALCOHOL DETERRENTS**

**Medical Benefit**

Vivitrol

**Tier 1**

acamprosate calcium

disulfiram (Antabuse)

naltrexone (Revia)

**ANXIETY**

**Tier 1**

alprazolam

alprazolam (Xanax=NC)

alprazolam ext-rel (Xanax XR=NC)

alprazolam orally disintegrating tablets

bupirone

chlordiazepoxide

clonazepam

clonazepam (Klonopin=NC)

diazepam

diazepam (Valium=NC)

escitalopram

escitalopram (Lexapro=NC)

hydroxyzine HCl (hydroxyzine hcl)

hydroxyzine pamoate (Vistaril)

lorazepam

lorazepam (Ativan=NC)

oxazepam

**Tier 2**

clorazepate (Tranxene T-Tab NC)

paroxetine HCl ext-rel (Paxil CR NC) PA

**Tier 3**

Nayzilam PA QL

**ATTENTION DEFICIT DISORDER**

**Tier 1**

amphetamine/dextroamphetamine mixed salts PA

amphetamine/dextroamphetamine mixed salts (Adderall STPA) PA

dexmethylphenidate PA

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dexamethylphenidate (Focalin=NC) PA  
 dextroamphetamine PA  
 dextroamphetamine solution (Procentra STPA) PA  
 guanfacine ext-rel (Intuniv) QL  
 Metadate ER 20 mg PA QL  
 methylphenidate PA  
 methylphenidate (Ritalin STPA) PA  
 methylphenidate chewable tablets (Methylin chewable tablets) PA

**Tier 2**

amphetamine/dextroamphetamine mixed salts ext-rel (Adderall XR STPA) PA QL  
 atomoxetine (Strattera NC) QL  
 clonidine ext-rel (Kapvay)  
 dexamethylphenidate ext-rel (Focalin XR STPA) PA QL  
 dextroamphetamine ext-rel (Dexedrine Spansule NC) PA QL  
 methylphenidate ext-rel 10 mg, 20 mg, 30 mg, 40 mg, 60 mg (Ritalin LA STPA) PA QL  
 methylphenidate ext-rel capsules PA QL  
 methylphenidate ext-rel capsules (Metadate CD STPA) PA QL  
 methylphenidate ext-rel tablets PA QL  
 methylphenidate HCl ER (Concerta STPA) PA QL  
 methylphenidate oral solution (Methylin Oral Solution STPA) PA

**Tier 3**

Daytrana PA QL STPA  
 Dyanavel XR PA QL STPA  
 methamphetamine (Desoxyn NC) PA QL  
 methylphenidate ER osmotic release 72 mg (methylphenidate ER osmotic release 72 mg Brand NC) PA QL  
 Quillivant XR PA QL STPA  
 Vyvanse PA QL STPA  
 Vyvanse Chew PA QL STPA

## BIPOLAR DISORDER

**Tier 1**

divalproex sodium delayed-rel (Depakote)  
 divalproex sodium ext-rel (Depakote ER)  
 lithium carbonate (Lithium Carbonate)  
 lithium carbonate ext-rel tablets 300 mg (Lithobid)  
 lithium carbonate ext-rel tablets 450 mg  
 olanzapine/fluoxetine  
 olanzapine/fluoxetine (Symbyax STPA)  
 quetiapine  
 quetiapine (Seroquel=NC)  
 risperidone (Risperdal STPA)  
 risperidone orally disintegrating tablets

**Tier 2**

Lithium Citrate

**Tier 3**

Equetro

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**DEPRESSION****Tier 1**

amitriptyline PA  
 amitriptyline/perphenazine PA  
 amoxapine PA  
 bupropion (Wellbutrin=NC) PA  
 bupropion ext-rel (Wellbutrin XL=NC) PA  
 bupropion HCl SR (Wellbutrin SR=NC) PA  
 citalopram  
 citalopram (Celexa=NC)  
 doxepin PA  
 doxepin oral concentrate PA  
 duloxetine delayed-rel (Cymbalta=NC) QL  
 escitalopram  
 escitalopram (Lexapro=NC)  
 fluoxetine capsules  
 fluoxetine capsules (Prozac=NC)  
 fluoxetine solution  
 fluvoxamine  
 imipramine HCl  
 maprotiline PA  
 mirtazapine PA  
 mirtazapine (Remeron=NC) PA  
 mirtazapine orally disintegrating tablets (Remeron Soltab=NC) PA  
 nortriptyline (Pamelor=NC) PA  
 paroxetine HCl PA  
 paroxetine HCl (Paxil=NC) PA  
 phenelzine PA  
 protriptyline PA  
 sertraline  
 sertraline (Zoloft=NC)  
 trazodone PA  
 venlafaxine  
 venlafaxine ext-rel capsules (Effexor XR=NC)

**Tier 2**

bupropion ext-rel (Forfivo XL NC) PA  
 clomipramine (Anafranil NC)  
 desipramine (Norpramin NC) PA  
 desvenlafaxine succinate ext-rel (Pristiq NC) PA STPA  
 Fluoxetine 60 mg PA  
 fluoxetine tablets 10 mg, 20 mg PA  
 imipramine pamoate  
 nefazodone PA  
 paroxetine HCl ext-rel (Paxil CR NC) PA  
 tranlycypromine (Parnate NC) PA

**Tier 3**

Aplenzin PA STPA  
 Desvenlafaxine ER PA STPA  
 Desvenlafaxine Fumarate ER PA STPA

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Drizalma QL STPA  
 Emsam PA STPA  
 Marplan PA  
 Pexeva PA STPA  
 trimipramine PA  
 Trintellix PA STPA  
 venlafaxine ext-rel tablets 225 mg  
 Viibryd PA STPA

**INSOMNIA**

**Tier 1**

estazolam  
 eszopiclone (Lunesta=NC) QL  
 flurazepam  
 hydroxyzine HCl (hydroxyzine hcl)  
 hydroxyzine pamoate (Vistaril)  
 temazepam  
 temazepam (Restoril=NC)  
 triazolam (Halcion=NC)  
 zaleplon QL  
 zolpidem QL  
 zolpidem (Ambien=NC) QL  
 zolpidem tartrate CR QL  
 zolpidem tartrate CR (Ambien CR=NC STPA) QL

**Tier 2**

ramelteon (Rozerem NC) QL STPA  
 zolpidem sublingual (Intermezzo NC) QL STPA

**Tier 3**

Belsomra QL STPA  
 Dayvigo QL STPA  
 Zolpimist 5 mg Spray QL STPA

**Tier 4**

Hetlioz PA QL

**MISCELLANEOUS**

**Tier 3**

Addyi PA  
 Lucemyra QL  
 Vyleesi PA QL

**Tier 4**

Nuplazid SP PA QL  
 Xyrem

**NARCOLEPSY**

**Tier 1**

amphetamine/dextroamphetamine mixed salts (Adderall STPA) PA  
 dextroamphetamine PA

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methylphenidate (Ritalin STPA) PA

**Tier 2**

dextroamphetamine ext-rel (Dexedrine Spansule NC) PA QL

modafinil (Provigil NC) PA QL

**Tier 3**

armodafinil (Nuvigil NC) PA QL

Sunosi PA QL

Wakix PA QL

**OPIOID ANTAGONISTS**

**No copayment**

naloxone injection

Narcan QL

**Tier 1**

buprenorphine QL

buprenorphine/naloxone SL tablets

**Tier 2**

buprenorphine/naloxone film (Suboxone film NC)

**Tier 3**

Bunavail PA

Evzio PA QL

Zubsolv PA

**PSYCHOSES**

**Tier 1**

chlorpromazine

clozapine (Clozaril STPA)

clozapine orally disintegrating tablets

fluphenazine

haloperidol

loxapine

molindone

olanzapine (Zyprexa STPA)

olanzapine orally disintegrating tablets

olanzapine orally disintegrating tablets (Zyprexa Zydys STPA)

perphenazine

pimozide

quetiapine

quetiapine (Seroquel=NC)

risperidone (Risperdal STPA)

risperidone orally disintegrating tablets

thioridazine

thiothixene

trifluoperazine

ziprasidone HCl

ziprasidone HCl (Geodon STPA)

**Tier 2**

aripiprazole oral solution QL STPA

aripiprazole orally disintegrating tablets QL STPA

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aripiprazole tablets (Abilify tablets STPA) QL  
 paliperidone ext-rel tablets (Invega NC) STPA

**Tier 3**

Abilify Mycite PA QL  
 Caplyta QL STPA  
 Latuda QL STPA  
 quetiapine ext-rel (Seroquel XR STPA)  
 Rexulti QL STPA  
 Secuado STPA  
 Versacloz STPA  
 Vraylar STPA

**SMOKING DETERRENTS**

**No copayment**

bupropion SR  
 Chantix  
 Nicotine Gum  
 Nicotine Lozenge  
 Nicotine Patch  
 Nicotrol Inhaler  
 Nicotrol NS Spray

**RESPIRATORY DRUGS**

**COUGH SUPPRESSANTS AND EXPECTORANTS**

**Tier 1**

benzonatate (Zonatuss)  
 benzonatate capsules  
 benzonatate capsules (Tessalon Perles)  
 codeine/chlorpheniramine (Z-tuss AC) QL  
 codeine/chlorpheniramine/pseudoephedrine  
 codeine/guaifenesin (Ambitussin) QL  
 codeine/guaifenesin (CGU WC) QL  
 codeine/guaifenesin (Codar GF) QL  
 codeine/guaifenesin (Coditussin AC) QL  
 codeine/guaifenesin (Guiatuss AC)  
 codeine/guaifenesin (MAR-COF CG) QL  
 codeine/guaifenesin/pseudoephedrine (Guiatuss DAC)  
 codeine/promethazine QL  
 codeine/promethazine/phenylephrine (codeine/promethazine VC) QL  
 dextromethorphan/brompheniramine/pseudoephedrine syrup (Bromfed DM)  
 dextromethorphan/promethazine  
 guaifenesin/pseudoephedrine/codeine (Coditussin DAC) QL  
 guaifenesin/pseudoephedrine/codeine (Lortuss EX) QL  
 guaifenesin/pseudoephedrine/codeine (Suttar-2) QL  
 guaifenesin/pseudoephedrine/codeine (Virtussin DAC) QL  
 hydrocodone polistirex/chlorpheniramine polistirex QL  
 hydrocodone/homatropine syrup (Hydromet) QL

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hydrocodone/homatropine tabs (Tussigon) QL

**Tier 3**

hydrocodone/chlorpheniramine (Tussicaps) QL

**INHALATION SOLUTIONS**

**Tier 1**

albuterol sulfate nebulizer solution QL

albuterol sulfate nebulizer solution (Ventolin nebulizer solution) QL

budesonide inhalation suspension (Pulmicort Respules) QL

cromolyn sodium nebulizer solution QL

ipratropium nebulizer solution QL

ipratropium/albuterol nebulizer solution QL

levalbuterol inhalation solution (Xopenex inhalation solution) QL

**Tier 2**

Nebusal 6%

Perforomist QL

**Tier 3**

Brovana QL

**INHALERS**

**Anticholinergics/Combinations**

**Tier 2**

Anoro Ellipta QL

Atrovent HFA QL

Combivent Respimat QL

Spiriva HandiHaler QL

Spiriva Respimat QL

Stiolto Respimat QL

**Bronchodilator Inhalers**

**Tier 1**

albuterol sulfate, CFC-free aerosol (ProAir HFA=NC) QL

albuterol sulfate, CFC-free aerosol (Ventolin HFA=NC) QL

**Tier 2**

levalbuterol tartrate, CFC-free aerosol (Xopenex HFA NC) QL

Striverdi Respimat QL

**Tier 3**

Serevent Diskus QL

**Steroid Inhalers**

**Tier 2**

Arnuity Ellipta QL

Flovent Diskus QL

Flovent HFA QL

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Pulmicort Flexhaler QL

**Steroid/Beta Agonist Combinations****Tier 1**

fluticasone/salmeterol - Wixela Inhub QL  
 fluticasone/salmeterol (Advair Diskus=NC) QL  
 fluticasone/salmeterol (AirDuo RespiClick) (AirDuo RespiClick=NC) QL

**Tier 2**

Advair HFA QL  
 Breo Ellipta QL  
 Symbicort QL

**MISCELLANEOUS****Medical Benefit**

Cinqair PA  
 Nucala vials PA  
 Xolair PA

**Tier 4**

Esbriet SP QL  
 Fasenra Pen SP PA  
 Nucala auto-injector, prefilled syringe SP PA  
 Ofev SP QL

**ORAL AGENTS****Beta Agonists****Tier 1**

albuterol ext-rel  
 albuterol syrup  
 albuterol tablets  
 metaproterenol syrup/tablets  
 terbutaline tablets

**Leukotriene Modifiers****Tier 1**

montelukast  
 montelukast (Singulair)  
 montelukast chewable tabs (montelukast chewable tablets)  
 zafirlukast (Accolate)

**Tier 2**

zileuton ext-rel

**Tier 3**

Zyflo

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**Phosphodiesterase-4 Inhibitors**

**Tier 3**  
Daliresp

**Theophylline**

**Liquids**

**Tier 2**  
Elixophyllin

**Solids**

**Tier 1**  
theophylline ext-rel tablets  
**Tier 2**  
Theo-24

**SKIN**

**ACNE ROSACEA**

**Tier 1**  
metronidazole cream (MetroCream)  
**Tier 2**  
azelaic acid gel (Finacea NC)  
doxycycline delayed-rel 40 mg (Oracea NC)  
Finacea Aerosol  
ivermectin cream (Soolantra cream 1%)  
metronidazole gel (MetroGel NC)  
metronidazole lotion (MetroLotion)  
**Tier 3**  
Noritate

**ACNE VULGARIS**

Differin lotion PA NC  
**Tier 1**  
benzoyl peroxide (Benzac AC)  
clindamycin pads 1% (Cleocin T Pads)  
Differin 0.1% Gel OTC PA  
erythromycin gel  
erythromycin solution  
erythromycin/benzoyl peroxide (Benzamycin)  
sulfacetamide sodium 10% (Klaron)  
sulfacetamide/sulfur

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tretinoin (Avita) PA  
 tretinoin gel 0.01%, 0.025% (Retin-A gel=NC) PA  
**Tier 2**  
 adapalene/benzoyl peroxide gel 0.1%-2.5% (Epiduo NC)  
 benzoyl peroxide wash 7% (BP Wash 7%)  
 clindamycin gel, lotion (Cleocin T)  
 clindamycin phosphate gel 1% (Clindagel 1% NC)  
 dapsone gel 5% (Aczone gel 5% NC)  
 dapsone gel 7.5% (Aczone gel 7.5% NC)  
 Pacnex  
 tazarotene cream 0.1% (Tazorac) (Tazorac cream 0.1%) PA  
 Tazorac cream 0.05%, gel 0.05%, 0.1% PA  
 tretinoin cream 0.025%, 0.05%, 0.1% (Retin-A cream NC) PA  
**Tier 3**  
 adapalene cream (Differin cream NC) PA  
 adapalene gel 0.1% (Differin gel 0.1% NC) PA  
 adapalene gel 0.3% (Differin gel 0.3% NC) PA  
 Altreno PA  
 Azelex  
 benzoyl peroxide foam 5.3% (Benzepro Aerosol 5.3%)  
 benzoyl peroxide foam 9.8% (Benzepro SC Aerosol 9.8%)  
 benzoyl peroxide foaming cloths 6% (Benzepro Foaming Cloths 6%)  
 benzoyl peroxide liquid 2.5% (BP Wash)  
 Claravis  
 clindamycin 1%/benzoyl peroxide 5%  
 clindamycin phosphate foam 1% (Evoclin 1% NC)  
 clindamycin/benzoyl peroxide gel (Benzaclin Gel NC)  
 clindamycin/tretinoin gel (Ziana NC)  
 Fabior PA  
 tretinoin gel 0.05% (Atralin NC) PA  
 tretinoin gel microsphere 0.04%, 0.1% (Retin-A Micro NC) PA

**BACTERIAL INFECTIONS, TOPICAL**

**Tier 1**  
 gentamicin  
 silver sulfadiazine (Silvadene)  
**Tier 2**  
 mafenide acetate 5%  
 mupirocin  
**Tier 3**  
 Altabax QL  
 Cortisporin  
 Xepi QL

**CORTICOSTEROIDS, TOPICAL**

**Tier 1**  
 alclometasone (Aclovate) PA  
 betamethasone dipropionate augmented cream (Diprolene AF) PA  
 betamethasone dipropionate augmented gel, lotion, ointment (Diprolene) PA

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betamethasone dipropionate cream, lotion  
 betamethasone valerate  
 fluocinolone cream, ointment (Synalar) PA  
 fluocinonide cream 0.05% QL  
 fluticasone propionate cream, ointment (Cutivate cream, ointment) PA  
 hydrocortisone (prescription only)  
 hydrocortisone butyrate ointment (Locoid ointment) PA  
 mometasone  
 mometasone lotion 0.1% (mometasone 0.1% lotion) PA  
 prednicarbate ointment  
 triamcinolone acetonide

**Tier 2**

amcinonide cream, lotion PA  
 Amcinonide ointment PA  
 betamethasone dipropionate ointment 0.05% PA  
 betamethasone valerate foam (Luxiq) PA  
 clobetasol propionate (Temovate) PA  
 clobetasol propionate 0.05% (Clobex) PA  
 clobetasol propionate emollient cream (Temovate-E) PA  
 clobetasol propionate foam (Olux foam 0.05%) PA  
 clobetasol propionate spray 0.05% (Clobex spray NC) PA  
 clobetasol propionate/emollient foam (Olux-E NC) PA  
 clocortolone (Cloderm) PA  
 desonide (Desowen) PA  
 desoximetasone cream, gel, ointment (Topicort) PA  
 diflorasone diacetate (Psorcon) PA  
 fluocinolone oil, body or scalp 0.01% (Derma-Smoothe/FS) PA  
 fluocinolone solution 0.01% (Synalar solution) PA  
 fluocinonide PA QL  
 fluocinonide cream 0.1% (Vanos) PA QL  
 flurandrenolide cream, lotion, ointment (Cordran) PA  
 fluticasone propionate lotion (Cutivate lotion) PA  
 halcinonide (Halog NC)  
 halobetasol propionate (Ultravate) PA  
 hydrocortisone butyrate cream, solution (Locoid) PA  
 hydrocortisone butyrate lipid cream 0.1% (Locoid Lipocream) PA  
 hydrocortisone butyrate lotion 0.1% (Locoid Lotion NC) PA  
 hydrocortisone valerate PA  
 prednicarbate cream 0.1% PA  
 triamcinolone acetonide aerosol 0.2% (Kenalog Spray) PA

**Tier 3**

Capex PA  
 Pandel PA  
 Texacort PA

**DERMATOLOGY, MISCELLANEOUS**

**Medical Benefit**

Xiaflex PA

**Tier 1**

ammonium lactate 12% (Lac-Hydrin)

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fluorouracil (Efudex)  
 hydrocortisone cream (Anusol-HC 2.5%)  
 ketoconazole 2%  
 lidocaine gel 2%  
 lidocaine/prilocaine cream QL  
 Lidocort Rectal kit  
 methoxsalen (Oxsoralen-Ultra)  
 salicylic acid liquid 27.5% (Virasal=NC)  
 selenium sulfide lotion, shampoo 2.5%

**Tier 2**

doxepin cream (Zonalon NC) QL  
 doxepin cream 5% (Prudoxin NC) QL  
 Fluoroplex  
 imiquimod (Zyclara Cream NC) QL  
 lidocaine ointment 5% QL  
 lidocaine patch 4% (Lidocare) QL  
 pimecrolimus 1% (Elidel STPA)  
 Regranex  
 tacrolimus (Protopic STPA)

**Tier 3**

Bionect  
 Derma-N  
 diclofenac sodium gel 3% QL  
 Eleton  
 Eucrisa PA  
 Keralyt  
 lidocaine patch 5% (Lidoderm NC) PA QL  
 lidocaine/tetracaine cream (Pliaglis NC)  
 Panretin  
 Picato QL  
 ProctoFoam-HC  
 Rectiv Ointment QL  
 Santyl  
 Silvrstat

**FUNGAL INFECTIONS, TOPICAL**

**Tier 1**

ciclopirox (Loprox)  
 ciclopirox topical solution 8% QL  
 clotrimazole (Rx only)  
 econazole  
 ketoconazole  
 nystatin  
 nystatin/triamcinolone

**Tier 2**

ciclopirox shampoo 1%  
 clotrimazole/betamethasone  
 luliconazole cream (Luzu NC)  
 naftifine cream 1%  
 naftifine cream 2% (Naftin cream 2%)

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naftifine gel 1%  
 oxiconazole cream (Oxistat cream)  
 Oxistat lotion  
**Tier 3**  
 Ertaczo  
 ketoconazole foam 2% (Extina foam 2% NC)

## PSORIASIS AND SEBORRHEA

### Tier 1

acitretin (Soriatane)  
 calcipotriene ointment, solution QL  
 methotrexate  
 salicylic acid (Salex)

### Tier 2

calcipotriene cream (Dovonex cream NC) QL  
 calcipotriene/betamethasone dipropionate ointment (Taclonex NC)  
 calcitriol ointment (Vectical NC)  
 tazarotene cream 0.1% (Tazorac) (Tazorac cream 0.1%) PA  
 Tazorac cream 0.05%, gel 0.05%, 0.1% PA

### Tier 3

salicylic acid foam 6%

### Tier 4

Cosentyx SP PA QL  
 Skyrizi SP PA QL

## SCABIES AND PEDICULOSIS

### Tier 1

lindane  
 permethrin 5%

### Tier 2

albendazole (Albenza NC)  
 crotamiton  
 malathion (Ovide NC)  
 praziquantel (Biltricide NC)  
 spinosad (Natroba NC) QL

### Tier 3

Sklice QL

## VIRAL INFECTIONS, TOPICAL

### Tier 1

imiquimod (Aldara=NC)  
 podofilox (Condylox=NC)

### Tier 2

acyclovir cream 5% (Zovirax cream 5% NC) QL  
 acyclovir ointment 5% (Zovirax ointment 5% NC) QL

### Tier 3

Denavir

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**SUPPLEMENTS****ENZYMES****Tier 3**

Ultra CoQ10 75 mg PA

**VITAMINS****Tier 1**

b complex + c/folic acid (Nephrocaps)  
 cyanocobalamin injection  
 cyanocobalamin injection (vitamin B-12)  
 ergocalciferol (D2) (Drisdol)  
 fluoride drops  
 fluoride drops (Luride drops)  
 fluoride tablets  
 fluoride tablets (Luride Lozi-Tabs)  
 folic acid  
 prenatal vitamins w/folic acid (Prenatal Vitamins)  
 ubidecarenone (Coenzyme Q10) PA

**Tier 2**

Nascobal  
 phytonadione (Mephyton NC)

**Tier 3**

Atabex EC  
 Citranatal Rx  
 Concept DHA  
 Concept OB  
 Corvite 150  
 Feriva  
 Ferralet 90  
 Fusion Plus  
 Integra F  
 Integra Plus  
 Irospan  
 Marnatal-F  
 Maxaron Forte  
 Neevo DHA  
 Novaferum oral solution  
 OB Complete caplet  
 OB Complete DHA  
 Obtrex DHA  
 Preque 10  
 Select-OB + DHA  
 Tricare DHA  
 Vitafof-OB + DHA  
 Vitatru  
 Viva DHA

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**WOMEN'S HEALTH**

**CONTRACEPTIVES**

**Biphasic**

- Tier 1**
- amethia (Seasonique) PA
- camrese (Seasonique) PA
- Tier 3**
- Necon 10/11

**Emergency Contraception**

- Tier 1**
- next choice one dose (Plan B One-Step)
- Tier 3**
- Ella QL

**Extended Cycle**

- Tier 1**
- fayosim (Quartette) PA

**Four Phase**

- Tier 2**
- Natazia

**Monophasic**

- Tier 1**
- amethia lo (LoSeasonique) PA
- amethyst (Amethyst)
- apri (Apri)
- aviane (Aviane)
- balziva (Ovcon 35) PA
- cryselle (Cryselle)
- drosiprenone/EE/levomefolate and levomefolate (Beyaz) PA
- drosiprenone/EE/levomefolate and levomefolate (Safyral) PA
- ethynodiol diacetate/EE
- gianvi (YAZ) PA
- jolessa (Jolessa)
- junel (Loestrin) PA
- junel fe (Loestrin Fe) PA
- kariva (Mircette) PA

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kelnor (Kelnor)  
 layolis fe (Generess Fe) PA  
 lessina (Lessina)  
 levora (Levora)  
 lomedial 24 fe (Lomedial 24 Fe)  
 low-ogestrel (Low-Ogestrel)  
 luteria (Luteria)  
 microgestin (Loestrin) PA  
 microgestin fe (Loestrin Fe) PA  
 mononessa (Ortho-Cyclen) PA  
 necon 0.5/35 (Brevicon) PA  
 necon 1/35 (Ortho-Novum 1/35) PA  
 necon 1/50 (Necon 1/50)  
 norethindrone acetate/EE 1/20 and iron chewable (Minastrin 24 Fe) PA  
 norethindrone/EE 0.4/35 and iron chewable  
 nortrel 0.5/35 (Modicon) PA  
 nortrel 1/35 (Norinyl 1+35) PA  
 ocella (Yasmin) PA  
 ogestrel (Ogestrel)  
 portia (Portia)  
 previfem (Ortho-Cyclen) PA  
 quasense (Quasense)  
 reclipen (Reclipen)  
 sprintec (Ortho-Cyclen) PA  
 wymzya fe (Wymzya Fe)  
 zovia (Zovia)

**Tier 2**

Lo Loestrin Fe  
 Taytulla

**Tier 3**

Balcoltra  
 Femcon FE PA

**Other**

**Tier 1**

etonogestrel/EE ring (Nuvaring) PA  
 xulane (Xulane)

**Tier 3**

Annovera QL  
 Phexxi  
 Twirla Dis

**Progestin**

**Tier 1**

camila (Ortho Micronor) PA  
 errin (Ortho Micronor) PA  
 jolivette (Nor-QD) PA

**Tier 3**

Slynd

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**Triphasic****Tier 1**

aranelle (Tri-Norinyl) PA  
 enpresse (Enpresse)  
 leena (Tri-Norinyl) PA  
 necon 7/7/7 (Ortho-Novum 7/7/7) PA  
 nortrel 7/7/7 (Ortho-Novum 7/7/7) PA  
 tilia fe (Estrostep Fe) PA  
 tri-legest fe (Estrostep Fe) PA  
 trinessa (Ortho Tri-Cyclen) PA  
 trinessa lo (Ortho Tri-Cyclen Lo) PA  
 tri-previfem (Ortho Tri-Cyclen) PA  
 tri-sprintec (Ortho Tri-Cyclen) PA  
 trivora (Trivora)  
 velivet (Cyclessa) PA

**MENOPAUSAL SYMPTOMS/OSTEOPOROSIS****Estrogens-Systemic****Tier 1**

EE/norethindrone acetate (Femhrt 0.5 mg/2.5 mcg)  
 estradiol  
 estradiol transdermal (Climara=NC)  
 estradiol valerate (Delestrogen)  
 estradiol/norethindrone acetate (Activella)  
 jinteli (Jinteli)

**Tier 2**

Climara Pro  
 CombiPatch  
 Duavee  
 estradiol (Estrace)  
 estradiol transdermal (Minivelle)  
 estradiol transdermal (Vivelle-Dot)  
 Prefest  
 Prempro

**Tier 3**

Alora  
 Angeliq  
 Divigel  
 Elestrin  
 Estrogel  
 Evamist QL  
 Menest  
 Menostar  
 Premarin  
 Premphase

**CM** Cancer Mandate  
**NTM** New-to-Market  
**SI** Specialty Infusion  
**WH** Women's Health

**MM** Mandatory Mail  
**PA** Prior Authorization  
**SP** Designated Specialty Pharmacy  
**ACA** Preventive Service

**NC** Non Covered Drugs  
**QL** Quantity Limitation Program  
**STPA** Step Therapy Prior Authorization  
**LCG** Low Cost Generic

**Estrogens-Vaginal****Tier 1**

estradiol vaginal cream (Estrace vaginal cream=NC)

estradiol vaginal tablets (Vagifem=NC)

**Tier 2**

Estring

Femring

Premarin cream

**Other****Medical Benefit**

Evenity PA

Prolia PA

**Tier 1**

alendronate

alendronate (Fosamax=NC)

calcitonin-salmon spray (Miacalcin nasal)

ibandronate 150 mg (Boniva 150 mg=NC)

**Tier 2**

Miacalcin injection

paroxetine mesylate 7.5 mg (Brisdelle NC)

risedronate (Actonel NC)

risedronate delayed-rel (Atelvia NC)

**Tier 3**

Fortical

Intrarosa

**Tier 4**

Forteo SP PA

Tymlos SP PA

**Progestins-Systemic****Tier 1**

medroxyprogesterone acetate

medroxyprogesterone acetate (Provera)

norethindrone acetate (Aygestin)

progesterone, micronized (Prometrium)

**Progestins-Vaginal****Tier 2**

First-Progesterone VGS

**Tier 3**

Crinone

Endometrin

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## Selective Estrogen Receptor Modulators

### Tier 1

raloxifene  
raloxifene (Evista)

### Tier 3

Osphena

## PREMENSTRUAL DYSPHORIC DISORDER

### Tier 1

fluoxetine (Sarafem tablets=NC)

### Tier 2

paroxetine HCl ext-rel (Paxil CR NC) PA

## VAGINAL INFECTIONS

### Tier 1

clindamycin vaginal cream (Cleocin vaginal cream)  
fluconazole  
fluconazole (Diflucan)  
metronidazole tablets (Flagyl)  
terconazole cream (Terazol Vaginal cream)  
terconazole suppositories  
Vandazole

### Tier 2

metronidazole vaginal gel

### Tier 3

Cleocin vaginal suppositories  
Clindesse  
Nuessa  
Solosec

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