

Tufts Health Unify

Lista de Medicamentos Cubiertos 2022 (Formulario)

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Tufts Health Plan
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TuftsHealthUnify.org

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Tufts Health Unify | *Lista de medicamentos cubiertos* para 2022 (Formulario)

Introducción

Este documento se llama la *Lista de medicamentos cubiertos* (también conocido como Lista de medicamentos). Le informa sobre cuáles de sus medicamentos de receta y medicamentos de venta sin receta médica están cubiertos por Tufts Health Unify. La Lista de medicamentos también le notifica si hay reglas especiales o restricciones en algunos de los medicamentos cubiertos por Tufts Health Unify. Los términos clave y sus definiciones se encuentran en el último capítulo del *Manual del miembro*.

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Si tiene alguna pregunta, por favor llame a Tufts Health Unify al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita. **Para obtener más información**, visite TuftsHealthUnify.org.

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A. Declaraciones requeridas

Esta es una lista de medicamentos que los miembros pueden obtener en Tufts Health Unify.

- ❖ Tufts Health Unify es un plan de seguro médico que tiene contrato con Medicare y MassHealth (Medicaid) para proporcionar beneficios de ambos programas a los miembros.
- ❖ La Lista de Medicamentos Cubiertos y/o las redes de farmacias y proveedores de Tufts Health Unify pueden cambiar a lo largo del año. Le enviaremos un aviso antes de hacer un cambio que le afecte.
- ❖ Los beneficios pueden cambiar el 1 de enero de cada año.
- ❖ Usted siempre puede verificar la Lista de Medicamentos Cubiertos actualizada de Tufts Health Unify por internet en TuftsHealthUnify.org o llamando al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m.
- ❖ Se pueden aplicar limitaciones y restricciones. Para obtener más información, llame a Servicios para Miembros de Tufts Health Unify o lea el Manual del Miembro de Tufts Health Unify.
- ❖ **ATENCIÓN:** Si habla español, hay servicios de asistencia de idioma disponibles para usted sin cargo. Llame al **1.855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita.
- ❖ Puede obtener este documento gratis en otros formatos, por ejemplo, en letra grande, formatos que funcionen con tecnología de lector de pantalla, braille o audio. Llame al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita.
- ❖ Comuníquese con Servicios para Miembros para solicitar los materiales en idiomas distintos al español o en un formato alternativo o para solicitar los correos futuros en el idioma o formato alternativo. Asimismo, puede comunicarse con Servicios para Miembros para modificar su solicitud permanente de idioma o formato preferido.

B. Preguntas frecuentes (FAQ)

Aquí encontrará las respuestas a las preguntas que pueda tener sobre esta *Lista de medicamentos cubiertos*. Para obtener más información o buscar preguntas y respuestas, usted puede leer todas las Preguntas frecuentes.



Si tiene alguna pregunta, por favor llame a Tufts Health Unify al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita. **Para obtener más información**, visite TuftsHealthUnify.org.

B1. ¿Qué medicamentos de receta se encuentran en la *Lista de medicamentos cubiertos*? (Llamamos “Lista de medicamentos” a la *Lista de medicamentos cubiertos* para abreviar.)

Los medicamentos de la *Lista de medicamentos cubiertos* que comienza en la página 3 son los medicamentos cubiertos por Tufts Health Unify. Los medicamentos están disponibles en las farmacias dentro de nuestra red. Una farmacia está en nuestra red si tenemos un acuerdo con ellos para que pueda trabajar con nosotros y pueda proporcionarle servicios a usted. Nos referimos a estas farmacias como “farmacias de la red”.

- Tufts Health Unify cubrirá todos los medicamentos de la Lista de medicamentos, si:
 - Su médico u otro profesional autorizado dice que usted los necesita para mejorar o para seguir sano,
 - Tufts Health Unify está de acuerdo con que el medicamento es medicamento necesario para usted, **y**
 - Usted surte la receta en una farmacia de la red de Tufts Health Unify.
- En algunos casos, usted tendrá que hacer algo antes de poder obtener un medicamento (consulte la pregunta B4 de abajo).

Usted puede también consultar una lista actualizada de los medicamentos que cubrimos en nuestro sitio web en TuftsHealthUnify.org o llamando a Servicios al miembro al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. 8 p.m.

B2. ¿La Lista de medicamentos cambia alguna vez?

Sí, y Tufts Health Unify debe seguir las reglas de Medicare y MassHealth cuando se realicen los cambios. Podríamos agregar o quitar medicamentos de la Lista de Medicamentos durante el año.

También podríamos cambiar nuestras reglas sobre algunos medicamentos. Por ejemplo, podríamos:

- Decidir requerir o no requerir aprobación previa para algún medicamento. (La aprobación previa es el permiso de Tufts Health Unify antes de que usted pueda obtener un medicamento).
- Aumentar o reducir la cantidad de un medicamento que usted puede obtener (llamado límite de cantidad).
- Agregar o cambiar restricciones a la terapia escalonada de un medicamento. (Terapia escalonada significa que usted podría tener que probar un medicamento antes que cubramos otro medicamento.)

Para obtener más información acerca de estas restricciones, consulte la pregunta B4 pagina vi.

Si está tomando un medicamento que estaba cubierto al **principio** del año, generalmente no eliminaremos ni cambiaremos la cobertura de ese medicamento **durante el resto del año** a menos que:

- Salga al mercado un medicamento nuevo y más barato que funcione tan bien como un medicamento en la Lista de medicamentos actual, **o**
- Nos demos cuenta de que un medicamento no es seguro, **o**
- Un medicamento sea retirado del mercado.

Las preguntas B3 y B6 de abajo contienen más información sobre lo que sucederá cuando la Lista de medicamentos cambie.

- Usted siempre puede leer la Lista de medicamentos actualizada de Tufts Health Unify en Internet, en TuftsHealthUnify.org.
- También puede llamar a Servicios al miembro para revisar la Lista de medicamentos actual al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. 8 p.m.

B3. ¿Qué sucederá cuando haya un cambio en la Lista de medicamentos?

Algunos cambios a la Lista de medicamentos ocurren **de inmediato**. Por ejemplo:

- **Un nuevo medicamento genérico está disponible.** A veces, sale al mercado un medicamento genérico nuevo que funciona tan bien como un medicamento que existe en la Lista de medicamentos actual. Cuando eso ocurre, podemos eliminar el medicamento de marca y añadir el nuevo medicamento genérico, pero su gasto para el medicamento nuevo seguirá siendo el mismo.

Cuando agregamos un nuevo medicamento genérico, podemos también decidir mantener el medicamento de marca en la lista, pero cambiar sus reglas de cobertura o sus límites.

- Es posible que no le informemos antes de hacer este cambio, pero le enviaremos información sobre el cambio específico una vez realizado.
- Usted o su proveedor pueden pedir una “excepción” de estos cambios. Le mandaremos un aviso con los pasos que puede tomar para pedir una excepción. Para obtener más información sobre las excepciones, consulte la pregunta B10.
- **Un medicamento se retira del mercado.** Si la Administración de Alimentos y Medicamentos (FDA) determina que un medicamento que usted está tomando no es seguro o si el fabricante del medicamento lo retira del mercado, lo eliminaremos de la Lista de medicamentos. Le avisaremos del cambio si usted



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está tomando el medicamento. Llame a su médico u otro profesional que escribe recetas para considerar medicamentos alternativos y pedir una nueva receta.

Es posible que hagamos otros cambios que pueden afectar a los medicamentos que usted toma. Le informaremos por adelantado sobre estos cambios en la Lista de medicamentos. Estos cambios pueden ocurrir si:

- La FDA provee nuevas guías o hay nuevas pautas clínicas sobre un medicamento.
- Agregamos un medicamento genérico que no es nuevo en el mercado y
 - Reemplazamos un medicamento de marca que está en la Lista de medicamentos actualmente ○
 - Cambiamos las reglas de cobertura o los límites para el medicamento de marca.

Cuando sucedan estos cambios:

- Le informaremos al menos 30 días antes de que realicemos el cambio en la Lista de medicamentos, ○
- Le informaremos y le proporcionaremos un suministro para 30 días del medicamento luego de que usted solicite un nuevo surtido.

Esto le dará tiempo para hablar con su médico u otro profesional autorizado, que pueden ayudarlo a decidir:

- Si hay un medicamento similar en la Lista de medicamentos que usted puede tomar en su lugar ○
- Si debe pedir una excepción a estos cambios. Para obtener más información sobre las excepciones, consulte la pregunta B10.

B4. ¿La cobertura de medicamentos tiene alguna restricción o límite, o hay que hacer algo en particular para obtener ciertos medicamentos?

Sí, algunos medicamentos tienen reglas de cobertura o tienen límites de cantidad que usted puede obtener. En algunos casos, usted o su médico u otro profesional autorizado tendrán que hacer algo antes de poder obtener el medicamento. Por ejemplo:

- **Autorización previa (o aprobación previa):** Para algunos medicamentos, usted, su médico u otro profesional de la salud deben obtener una aprobación de Tufts Health Unify antes de surtir su receta. Tufts Health Unify podría no cubrir el medicamento si usted no consigue la aprobación.
- **Límites de cantidad:** A veces Tufts Health Unify limita la cantidad de un medicamento que usted puede obtener.

- **Terapia escalonada:** A veces Tufts Health Unify exige que usted siga una terapia escalonada. Esto significa que usted tendrá que probar los medicamentos para su enfermedad en un cierto orden. Usted podría tener que probar un medicamento antes de que cubramos otro medicamento. Si a su médico le parece que el primer medicamento no funciona para usted, entonces cubriremos el segundo.

Para averiguar si su medicamento tiene algún requisito o límite adicional, consulte las tablas que comienzan en la página 3. Usted también puede obtener más información visitando nuestro sitio web en TuftsHealthUnify.org.

Usted puede pedir una excepción a esos límites. Esto le dará tiempo para hablar con su médico u otro profesional autorizado, Él podrá ayudarlo a decidir si hay algún otro medicamento similar en la Lista de medicamentos que usted puede tomar en su lugar o si tiene que pedir una excepción. Para obtener más información sobre las excepciones, consulte las preguntas B10 - B12.

B5. ¿Cómo sabré si el medicamento que quiero tiene límites o si tengo que hacer algo para obtenerlo?

La tabla de medicamentos de la página 3 tiene una columna llamada “Medidas necesarias, restricciones o límites de uso”.

B6. ¿Qué sucederá si Tufts Health Unify cambia las reglas sobre cómo cubre algunos medicamentos (por ejemplo, requisitos de autorización (aprobación) previa, límites de cantidad o restricciones de terapia escalonada)?

En algunos casos, le avisaremos por adelantado si agregamos o cambiamos requisitos de autorización previa, límites de cantidad y restricciones de terapia escalonada a un medicamento. Para obtener más información sobre este aviso por adelantado y sobre las situaciones en las cuales no le notificaremos por adelantado cuando cambiemos nuestras reglas sobre medicamentos en la Lista de medicamentos, consulte la pregunta B3.

B7. ¿Cómo puedo encontrar un medicamento en la Lista de medicamentos?

Hay dos maneras de encontrar un medicamento:

- Puede buscar por orden alfabético, por el nombre del medicamento o
- Puede buscar por enfermedad.

Para buscar **por orden alfabético**, vaya a la Sección de Índice alfabético de medicamentos cubiertos.

Para buscar **por enfermedad**, busque la sección titulada “Medicamentos agrupados por tipos de enfermedades”. Los medicamentos de esta sección están agrupados en categorías, de acuerdo con el tipo de enfermedades para las que se usan como tratamiento. Por ejemplo, si usted tiene



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una enfermedad del corazón, debe buscar en la categoría Agentes cardiovasculares: Medicamentos para tratar condiciones relacionadas con el corazón como hipertensión arterial y alto colesterol. Ahí encontrará los medicamentos que traten enfermedades del corazón.

B8. ¿Qué pasará si el medicamento que quiero tomar no está en la Lista de medicamentos?

Si usted no encuentra su medicamento en la Lista de medicamentos, llame a Servicios al miembro al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. y pregunte por él. Si se entera de que Tufts Health Unify no cubrirá el medicamento, usted puede hacer lo siguiente:

- Pedir a Servicios al miembro una lista de medicamentos similares al que quiere tomar. Luego, muestre la lista a su médico u otro profesional autorizado. Este podrá recetarle un medicamento similar al de la Lista de medicamentos que usted quiere tomar. **O**
 - Pedir al plan de salud que haga una excepción para cubrir su medicamento. Para obtener más información sobre las excepciones, consulte las preguntas B10 - B12.
-

B9. ¿Qué pasará si soy un miembro nuevo de Tufts Health Unify y no puedo encontrar mi medicamento en la Lista de medicamentos o tengo problemas para obtener mi medicamento?

Podemos ayudarle. Podríamos cubrir su medicamento temporariamente con un suministro de 30 días de su medicamento durante los primeros 90 días que usted sea miembro de Tufts Health Unify. Esto le dará tiempo para hablar con su médico u otro profesional autorizado, Él podrá ayudarlo a decidir si hay algún otro medicamento similar en la Lista de medicamentos que usted puede tomar en su lugar o si tiene que pedir una excepción.

Si su receta es para menos días, permitiremos varios resurtidos para proporcionarle hasta un máximo de 30 días de medicamento.

Cubriremos un suministro de 30 días de su medicamento si:

- Usted está tomando algún medicamento que no está en nuestra Lista de medicamentos **O**
- Las reglas del plan de salud no le permiten obtener la cantidad recetada por su profesional autorizado **O**
- El medicamento requiere aprobación previa de Tufts Health Unify **O**
- Usted toma algún medicamento que forma parte de una restricción de terapia escalonada.

Si está tomando un medicamento que Tufts Health Unify no considera como medicamento de la Parte D, usted tendrá derecho a obtener un suministro único del medicamento para 72 horas.

Puede encontrar más información sobre cómo obtener un suministro temporal de un medicamento en el Capítulo 5 de su *Manual del miembro*.

Si usted está en un hogar para personas de la tercera edad u otro centro de cuidado a largo plazo, y necesita un medicamento que no está en la Lista de medicamentos o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarle. Si usted ha estado en el plan por más de 90 días, vive en una institución de cuidado a largo plazo y necesita su suministro de inmediato:

- Le cubriremos un suministro de 31 días del medicamento que necesite (a menos que tenga una receta para menos días), aunque sea o no sea un nuevo miembro de Tufts Health Unify.
- Esto es adicional al suministro temporal durante sus primeros 90 días que sea un miembro de Tufts Health Unify.

Como miembro actual de Tufts Health Unify, si resulta admitido o es dado de alta de una institución de atención a largo plazo y experimenta un cambio inesperado de medicamento, puede solicitar que aprobemos una receta transitoria por única vez del medicamento que no está cubierto para permitir que tenga tiempo para consultar a su médico sobre un plan de transición. Su médico también puede solicitar una excepción a la cobertura del medicamento no cubierto basado en la revisión de la necesidad médica luego del proceso estándar de excepción indicado anteriormente. La “primera receta” transitoria será una cantidad para hasta 31 días, pero podría extenderse para permitirle a usted y a su médico el tiempo para atender las complejidades de múltiples medicamentos o cuando lo justifiquen circunstancias especiales. Usted puede solicitar una receta transitoria llamando al departamento de servicios para miembros de Tufts Health Unify al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m.

B10. ¿Puedo pedir al plan que haga una excepción para cubrir mi medicamento?

Sí. Usted puede pedirle a Tufts Health Unify que haga una excepción para cubrir su medicamento si no está en la Lista de medicamentos.

Usted también puede pedirnos un cambio a las reglas de su medicamento.

- Por ejemplo, Tufts Health Unify podría limitar la cantidad que cubriremos de un medicamento. Si su medicamento tiene un límite, usted puede pedirnos que quitemos el límite y que cubramos más.
- Otros ejemplos: Usted puede pedirnos que quitemos las restricciones de terapia escalonada o los requisitos de autorización previa.



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B11. ¿Cómo puedo pedir una excepción?

Para pedir una excepción, llame a Servicios al miembro trabajará con usted y su proveedor para ayudarle a pedir una excepción. También puede consultar el Capítulo 9 del *Manual del miembro* para obtener más información sobre excepciones.

B12. ¿Cuánto tiempo lleva obtener una excepción?

Antes que nada, debemos recibir una declaración de su proveedor apoyando su pedido de excepción. Para presentar una solicitud, su proveedor o usted puede solicitar una excepción de cobertura por correo, fax, comunicándose con Servicios para Miembros o enviando una solicitud a través del sitio web de Tufts Health Unify. Puede enviar un correo a:

Tufts Health Plan
ATTN: Pharmacy Utilization Management Department
705 Mount Auburn Street
Watertown, MA 02472

Tras recibir una declaración de su profesional autorizado apoya su petición de una excepción, le comunicaremos nuestra decisión al respecto en un plazo de 72 horas.

Si usted o su profesional autorizado piensan que su salud podría deteriorarse si tiene que esperar 72 horas para obtener una decisión, entonces usted puede pedir una excepción acelerada (una decisión más rápida). Si su profesional autorizado apoya su petición, le daremos una decisión a más tardar 24 horas después de recibir la declaración de apoyo de su profesional autorizado.

B13. ¿Qué son los medicamentos genéricos?

Los medicamentos genéricos están hechos con los mismos ingredientes activos que los medicamentos de marca. Generalmente cuestan menos que los medicamentos de marca y no tienen marcas tan conocidas. Los medicamentos genéricos son aprobados por la Administración de Alimentos y Medicamentos (FDA).

Tufts Health Unify cubre tanto medicamentos de marca como medicamentos genéricos.

B14. ¿Qué son los medicamentos de venta sin receta médica (OTC)?

OTC quiere decir “medicamentos de venta sin receta médica”. Tufts Health Unify cubre algunos medicamentos de venta sin receta médica cuando son recetados por su proveedor.

Usted puede leer la Lista de medicamentos de Tufts Health Unify para averiguar qué medicamentos de venta sin receta médica están cubiertos.

B15. ¿Tufts Health Unify cubre algún producto de venta sin receta médica que no sea un medicamento?

Tufts Health Unify cubre algunos productos de venta sin receta médica que no son medicamentos cuando son recetados por su proveedor.

Ejemplos de productos de venta sin receta médica que no son medicamentos incluyen (e.g., band-aids y gauze).

Usted puede leer la Lista de medicamentos de Tufts Health Unify para averiguar qué productos de venta sin receta médica que no son medicamentos están cubiertos.

B16. ¿Tufts Health Unify cubre suministros de recetas a largo plazo?

- **Programas de pedidos por correo.** Ofrecemos un programa de pedidos por correo que le permite obtener suministros de sus medicamentos de receta de hasta 90 días, enviados directamente a su hogar. Un suministro de 90 días tiene el mismo copago que un suministro de un mes.
- **Programas de farmacias minoristas de 90 días.** Algunas farmacias minoristas también pueden ofrecer un suministro de hasta 90 días de medicamentos de receta cubiertos. Un suministro de 90 días tiene el mismo copago que un suministro de un mes.

B17. ¿Puedo hacer que envíen los medicamentos de receta a mi casa desde mi farmacia local?

Es posible que su farmacia local pueda enviar su medicamento de receta a su casa. Usted puede llamar a su farmacia para verificar si le ofrecen entrega a domicilio.

B18. ¿Cuánto es mi copago?

Los miembros de Tufts Health Unify no tienen copagos por medicamentos de receta y medicamentos de venta sin receta médica (OTC), siempre y cuando el miembro siga las reglas del plan.

B19. ¿Qué son los niveles de medicamentos?

Los niveles son grupos de medicamentos de nuestra Lista de medicamentos.

- Los medicamentos de Nivel 1 son medicamentos vacunos.
- Los medicamentos de nivel 2 son medicamentos genéricos.
- Los medicamentos de nivel 3 son medicamentos de marca.
- Los medicamentos de nivel 4 son medicamentos de venta libre cubierto por MassHealth.

C. Resumen de la *Lista de medicamentos cubiertos*

La siguiente lista de medicamentos cubiertos le da información sobre los medicamentos cubiertos por Tufts Health Unify. Si usted tiene dificultades para encontrar su medicamento en la lista,



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consulte el Índice de medicamentos cubiertos que comienza en la final. El índice alfabético enumera todos los medicamentos cubiertos por Tufts Health Unify.

La primera columna de la tabla contiene el nombre del medicamento. Los medicamentos de marca están escritos en mayúsculas (p. ej.: ENTRESTO) y los medicamentos genéricos están escritos en cursivas minúsculas (p. ej.: *lisinopril*).

La información de la columna titulada “Medidas necesarias, restricciones o límites de uso” le indica si Tufts Health Unify tiene alguna regla para cubrir su medicamento.

Nota: El símbolo * junto a un medicamento significa que el medicamento no es un “Medicamento de la Parte D”. La cantidad que usted paga cuando surta una receta de este medicamento no cuenta en el costo total de sus medicamentos (o sea, la cantidad que usted paga no le ayuda para cumplir con los requisitos para la cobertura catastrófica).

- Además, si recibe Ayuda adicional para pagar sus recetas, usted no recibirá ninguna Ayuda adicional para pagar estos medicamentos. Para obtener más información sobre Ayuda adicional, consulte la información del recuadro abajo.

Ayuda adicional es un programa de Medicare que ayuda a personas de ingresos y recursos limitados a reducir sus gastos en medicamentos de receta de la Parte D de Medicare, como primas, deducibles y copagos. Ayuda adicional también se llama “Subsidio por bajos ingresos” o “LIS”.

- Estos medicamentos tienen reglas diferentes para las apelaciones. Una apelación es una manera formal de pedirnos que revisemos alguna decisión que hayamos tomado sobre su cobertura y que la cambiemos si usted cree que cometimos un error. Por ejemplo, podríamos decidir que un medicamento que usted quiere ya no está cubierto por Medicare o MassHealth.
- Si usted o su médico no están de acuerdo con nuestra decisión, usted puede apelar.
- Si en algún momento tiene una pregunta, llame a Servicios al miembro al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. 8 p.m. Usted también puede enterarse de cómo apelar una decisión en el Capítulo 9 del *Manual del miembro*.

C1. Medicamentos agrupados por tipos de enfermedades

Los medicamentos de esta sección están agrupados en categorías, de acuerdo con el tipo de enfermedades para las que se usan como tratamiento. Por ejemplo, si usted tiene una enfermedad del corazón, debe buscar en la categoría Agentes cardiovasculares: Medicamentos para tratar condiciones relacionadas con el corazón como hipertensión arterial y alto colesterol. Ahí encontrará los medicamentos que traten enfermedades del corazón.

Estos son los significados de los códigos usados en la columna “Medidas necesarias, restricciones o límites de uso”:

QL = Límite de cantidad: Esto limita el suministro del medicamento que usted puede obtener.

PA (por sus siglas en inglés) = Autorización (aprobación) previa: Usted deberá tener la aprobación del plan antes de poder obtener este medicamento.

ST (por sus siglas en inglés) = Tratamiento progresivo: Usted deberá probar otro medicamento antes de poder obtener éste.

NEDS (por sus siglas en inglés) = Medicamento suministrado sin extensión: Para poder reducir los costos de los medicamentos, ciertos medicamentos de alto costo se limitarán a una cantidad de 30 días por receta.

SP (por sus siglas en inglés) = Disponible a través de un proveedor designado especial de farmacia. Usted tiene la opción de obtener este medicamento a través de un proveedor de farmacia de especialidades. Estas farmacias se especializan en suministrar una cantidad selecta de medicamentos directamente a nuestros miembros. Proveen entrega gratuita a su domicilio, apoyo educacional 24/7 por teléfono, apoyo de enfermeras y farmacéuticos y colaborarán estrechamente con su médico. Los medicamentos incluyen, pero no se limitan, a medicamentos usados en el tratamiento de la esclerosis múltiple, hepatitis C, artritis reumatoide y cánceres tratados con medicamentos administrados por vía oral.

CVS specialty: 1.800.237.2767 (TTY: 711)

D. Índice de medicamentos cubiertos



Si tiene alguna pregunta, por favor llame a Tufts Health Unify al **1-855-393-3154** (TTY: 711), siete días de la semana, de 8 a.m. a 8 p.m. La llamada es gratuita. **Para obtener más información**, visite TuftsHealthUnify.org.

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Drug	Status	Requirements/Limits
Anti-Infectives And Infectious Disease: Drugs Used To Treat Infections		
Antifungals, Systemic And Oral Topical		
<i>clotrimazole mouth/throat troche</i>	\$0 (Tier-2)	
CRESEMBA ORAL CAPSULE	\$0 (Tier-3)	NEDS
<i>fluconazole oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>fluconazole oral tablet</i>	\$0 (Tier-2)	
<i>flucytosine oral capsule</i>	\$0 (Tier-2)	NEDS
<i>griseofulvin microsize oral suspension</i>	\$0 (Tier-2)	
<i>griseofulvin microsize oral tablet</i>	\$0 (Tier-2)	
<i>griseofulvin ultramicrosize oral tablet</i>	\$0 (Tier-2)	
<i>itraconazole oral capsule</i>	\$0 (Tier-2)	
<i>itraconazole oral solution</i>	\$0 (Tier-2)	
<i>ketoconazole oral tablet</i>	\$0 (Tier-2)	
<i>micafungin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	
NOXAFIL ORAL SUSPENSION	\$0 (Tier-3)	NEDS
<i>nystatin oral tablet</i>	\$0 (Tier-2)	
<i>posaconazole oral tablet delayed release</i>	\$0 (Tier-2)	NEDS
<i>terbinafine hcl oral tablet</i>	\$0 (Tier-2)	QL (42 EA per 42 days)
<i>voriconazole oral suspension reconstituted</i>	\$0 (Tier-2)	NEDS
<i>voriconazole oral tablet</i>	\$0 (Tier-2)	
Anthelmintic Agents		
PIN-X (PYRANTEL PAMOATE)	\$0 (Tier-4)	*
REESE'S PINWORM (PYRANTEL PAMOATE)	\$0 (Tier-4)	*
Anti-Infectives, Miscellaneous		
AEMCOLO ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	QL (12 EA per 3 days)
<i>albendazole oral tablet</i>	\$0 (Tier-2)	NEDS
ARIKAYCE INHALATION SUSPENSION	\$0 (Tier-3)	PA; NEDS
FIRVANQ ORAL SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>fosfomycin tromethamine oral packet</i>	\$0 (Tier-2)	
<i>ivermectin oral tablet</i>	\$0 (Tier-2)	
<i>linezolid oral suspension reconstituted</i>	\$0 (Tier-2)	NEDS
<i>linezolid oral tablet</i>	\$0 (Tier-2)	
<i>methenamine hippurate oral tablet</i>	\$0 (Tier-2)	
<i>metronidazole oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>metronidazole oral tablet</i>	\$0 (Tier-2)	
<i>neomycin sulfate oral tablet</i>	\$0 (Tier-2)	
<i>nitazoxanide oral tablet</i>	\$0 (Tier-2)	
<i>nitrofurantoin macrocrystal oral capsule</i>	\$0 (Tier-2)	
<i>nitrofurantoin monohyd macro oral capsule</i>	\$0 (Tier-2)	
<i>praziquantel oral tablet</i>	\$0 (Tier-2)	
SIVEXTRO ORAL TABLET	\$0 (Tier-3)	NEDS
STROMECTOL ORAL TABLET	\$0 (Tier-3)	
<i>trimethoprim oral tablet</i>	\$0 (Tier-2)	
<i>vancomycin hcl oral capsule</i>	\$0 (Tier-2)	
<i>vancomycin hcl oral solution reconstituted</i>	\$0 (Tier-2)	
XENLETA ORAL TABLET	\$0 (Tier-3)	NEDS
XIFAXAN ORAL TABLET 200 MG	\$0 (Tier-3)	NEDS
XIFAXAN ORAL TABLET 550 MG	\$0 (Tier-3)	PA; NEDS
Antimalarials And Antiprotozoals		
<i>atovaquone oral suspension</i>	\$0 (Tier-2)	NEDS
<i>atovaquone-proguanil hcl oral tablet</i>	\$0 (Tier-2)	
BENZNIDAZOLE ORAL TABLET	\$0 (Tier-3)	
<i>chloroquine phosphate oral tablet</i>	\$0 (Tier-2)	
COARTEM ORAL TABLET	\$0 (Tier-3)	QL (24 EA per 3 days)
<i>dapsone oral tablet</i>	\$0 (Tier-2)	
<i>hydroxychloroquine sulfate oral tablet</i>	\$0 (Tier-2)	
IMPAVIDO ORAL CAPSULE	\$0 (Tier-3)	NEDS
KRINTAFEL ORAL TABLET	\$0 (Tier-3)	
LAMPIT ORAL TABLET	\$0 (Tier-3)	
<i>mefloquine hcl oral tablet</i>	\$0 (Tier-2)	
<i>paromomycin sulfate oral capsule</i>	\$0 (Tier-2)	
PENTAM INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>pentamidine isethionate inhalation solution reconstituted</i>	\$0 (Tier-2)	B vs D
<i>pentamidine isethionate injection solution reconstituted</i>	\$0 (Tier-2)	
<i>primaquine phosphate oral tablet</i>	\$0 (Tier-2)	
<i>pyrimethamine oral tablet</i>	\$0 (Tier-2)	
<i>quinine sulfate oral capsule</i>	\$0 (Tier-2)	
<i>tinidazole oral tablet</i>	\$0 (Tier-2)	
Antivirals		
<i>abacavir sulfate oral solution</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>abacavir sulfate oral tablet</i>	\$0 (Tier-2)	
<i>abacavir sulfate-lamivudine oral tablet</i>	\$0 (Tier-2)	
<i>acyclovir oral capsule</i>	\$0 (Tier-2)	
<i>acyclovir oral suspension</i>	\$0 (Tier-2)	
<i>acyclovir oral tablet</i>	\$0 (Tier-2)	
<i>adefovir dipivoxil oral tablet</i>	\$0 (Tier-2)	NEDS
<i>amantadine hcl oral capsule</i>	\$0 (Tier-2)	
<i>amantadine hcl oral solution</i>	\$0 (Tier-2)	
<i>amantadine hcl oral tablet</i>	\$0 (Tier-2)	
APTIVUS ORAL CAPSULE	\$0 (Tier-3)	NEDS
<i>atazanavir sulfate oral capsule</i>	\$0 (Tier-2)	
BIKTARVY ORAL TABLET	\$0 (Tier-3)	NEDS
CIMDUO ORAL TABLET	\$0 (Tier-3)	NEDS
COMPLERA ORAL TABLET	\$0 (Tier-3)	NEDS
DELSTRIGO ORAL TABLET	\$0 (Tier-3)	
DESCOVY ORAL TABLET	\$0 (Tier-3)	NEDS
DOVATO ORAL TABLET	\$0 (Tier-3)	NEDS
EDURANT ORAL TABLET	\$0 (Tier-3)	NEDS
<i>efavirenz oral capsule</i>	\$0 (Tier-2)	
<i>efavirenz oral tablet</i>	\$0 (Tier-2)	
<i>efavirenz-emtricitab-tenofovir oral tablet</i>	\$0 (Tier-2)	NEDS
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	\$0 (Tier-2)	NEDS
<i>emtricitabine oral capsule</i>	\$0 (Tier-2)	
<i>emtricitabine-tenofovir df oral tablet</i>	\$0 (Tier-2)	NEDS
EMTRIVA ORAL SOLUTION	\$0 (Tier-3)	
<i>entecavir oral tablet</i>	\$0 (Tier-2)	
EPCLUSA ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
EPCLUSA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
EPIVIR ORAL SOLUTION	\$0 (Tier-3)	
<i>etravirine oral tablet 100 mg</i>	\$0 (Tier-2)	
<i>etravirine oral tablet 200 mg</i>	\$0 (Tier-2)	NEDS
EVOTAZ ORAL TABLET	\$0 (Tier-3)	NEDS
<i>famciclovir oral tablet</i>	\$0 (Tier-2)	
<i>fosamprenavir calcium oral tablet</i>	\$0 (Tier-2)	NEDS
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
GENVOYA ORAL TABLET	\$0 (Tier-3)	NEDS
HARVONI ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HARVONI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
INTELENCE ORAL TABLET 100 MG, 25 MG	\$0 (Tier-3)	
INTELENCE ORAL TABLET 200 MG	\$0 (Tier-3)	NEDS
INTRON A INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty
ISENTRESS HD ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
ISENTRESS ORAL PACKET	\$0 (Tier-3)	
ISENTRESS ORAL TABLET	\$0 (Tier-3)	QL (120 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	\$0 (Tier-3)	QL (180 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	\$0 (Tier-3)	QL (720 EA per 30 days)
JULUCA ORAL TABLET	\$0 (Tier-3)	NEDS
KALETRA ORAL TABLET 100-25 MG	\$0 (Tier-3)	
KALETRA ORAL TABLET 200-50 MG	\$0 (Tier-3)	NEDS
<i>lamivudine oral solution</i>	\$0 (Tier-2)	
<i>lamivudine oral tablet</i>	\$0 (Tier-2)	
<i>lamivudine-zidovudine oral tablet</i>	\$0 (Tier-2)	
LEXIVA ORAL SUSPENSION	\$0 (Tier-3)	
LIVTENCITY ORAL TABLET	\$0 (Tier-3)	PA; QL (112 EA per 28 days); NEDS
<i>lopinavir-ritonavir oral solution</i>	\$0 (Tier-2)	
<i>lopinavir-ritonavir oral tablet</i>	\$0 (Tier-2)	
<i>maraviroc oral tablet 150 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days); NEDS
<i>maraviroc oral tablet 300 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days); NEDS
MAVYRET ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
MAVYRET ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>nevirapine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nevirapine oral suspension</i>	\$0 (Tier-2)	
<i>nevirapine oral tablet</i>	\$0 (Tier-2)	
NORVIR ORAL PACKET	\$0 (Tier-3)	
NORVIR ORAL SOLUTION	\$0 (Tier-3)	
ODEFSEY ORAL TABLET	\$0 (Tier-3)	NEDS
<i>oseltamivir phosphate oral capsule</i>	\$0 (Tier-2)	
<i>oseltamivir phosphate oral suspension reconstituted</i>	\$0 (Tier-2)	
PEGASYS SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PIFELTRO ORAL TABLET	\$0 (Tier-3)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
PREVYMIS ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PREZCOBIX ORAL TABLET	\$0 (Tier-3)	NEDS
PREZISTA ORAL SUSPENSION	\$0 (Tier-3)	NEDS
PREZISTA ORAL TABLET 150 MG, 600 MG, 800 MG	\$0 (Tier-3)	NEDS
PREZISTA ORAL TABLET 75 MG	\$0 (Tier-3)	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (60 EA per 180 days)
REYATAZ ORAL PACKET	\$0 (Tier-3)	NEDS
<i>ribavirin oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty
<i>ribavirin oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty
<i>rimantadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>ritonavir oral tablet</i>	\$0 (Tier-2)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	NEDS
SELZENTRY ORAL SOLUTION	\$0 (Tier-3)	QL (1800 ML per 30 days)
SELZENTRY ORAL TABLET 150 MG	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 25 MG	\$0 (Tier-3)	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 300 MG	\$0 (Tier-3)	QL (120 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 75 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
STRIBILD ORAL TABLET	\$0 (Tier-3)	NEDS
SYMTUZA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>tenofovir disoproxil fumarate oral tablet</i>	\$0 (Tier-2)	
TIVICAY ORAL TABLET 10 MG	\$0 (Tier-3)	
TIVICAY ORAL TABLET 25 MG, 50 MG	\$0 (Tier-3)	NEDS
TIVICAY PD ORAL TABLET SOLUBLE	\$0 (Tier-3)	
TRIUMEQ ORAL TABLET	\$0 (Tier-3)	NEDS
TRIUMEQ PD ORAL TABLET SOLUBLE	\$0 (Tier-3)	NEDS
TRIZIVIR ORAL TABLET	\$0 (Tier-3)	NEDS
TYBOST ORAL TABLET	\$0 (Tier-3)	
<i>valacyclovir hcl oral tablet</i>	\$0 (Tier-2)	
<i>valganciclovir hcl oral solution reconstituted</i>	\$0 (Tier-2)	NEDS
<i>valganciclovir hcl oral tablet</i>	\$0 (Tier-2)	
VEMLIDY ORAL TABLET	\$0 (Tier-3)	NEDS
VIRACEPT ORAL TABLET 250 MG	\$0 (Tier-3)	
VIRACEPT ORAL TABLET 625 MG	\$0 (Tier-3)	NEDS
VIREAD ORAL POWDER	\$0 (Tier-3)	NEDS
VIREAD ORAL TABLET	\$0 (Tier-3)	NEDS
VOSEVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	QL (1 EA per 7 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	QL (1 EA per 7 days)
ZIAGEN ORAL TABLET	\$0 (Tier-3)	
<i>zidovudine oral capsule</i>	\$0 (Tier-2)	
<i>zidovudine oral syrup</i>	\$0 (Tier-2)	
<i>zidovudine oral tablet</i>	\$0 (Tier-2)	
Beta-Lactam Antibiotics		
<i>amoxicillin oral capsule</i>	\$0 (Tier-2)	
<i>amoxicillin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>amoxicillin oral tablet</i>	\$0 (Tier-2)	
<i>amoxicillin oral tablet chewable</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	\$0 (Tier-2)	
<i>ampicillin oral capsule</i>	\$0 (Tier-2)	
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
<i>cefaclor er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>cefaclor oral capsule</i>	\$0 (Tier-2)	
<i>cefaclor oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral capsule</i>	\$0 (Tier-2)	
<i>cefadroxil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral tablet</i>	\$0 (Tier-2)	
<i>cefdinir oral capsule</i>	\$0 (Tier-2)	
<i>cefdinir oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefixime oral capsule</i>	\$0 (Tier-2)	
<i>cefixime oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral tablet</i>	\$0 (Tier-2)	
<i>cefprozil oral suspension reconstituted</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>cefprozil oral tablet</i>	\$0 (Tier-2)	
<i>cefuroxime axetil oral tablet</i>	\$0 (Tier-2)	
<i>cephalexin oral capsule</i>	\$0 (Tier-2)	
<i>cephalexin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cephalexin oral tablet</i>	\$0 (Tier-2)	
<i>dicloxacillin sodium oral capsule</i>	\$0 (Tier-2)	
<i>penicillin v potassium oral solution reconstituted</i>	\$0 (Tier-2)	
<i>penicillin v potassium oral tablet</i>	\$0 (Tier-2)	
SUPRAX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
SUPRAX ORAL TABLET CHEWABLE	\$0 (Tier-3)	
Macrolides And Clindamycin		
<i>azithromycin oral packet</i>	\$0 (Tier-2)	
<i>azithromycin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>azithromycin oral tablet</i>	\$0 (Tier-2)	
<i>clarithromycin er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>clarithromycin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>clarithromycin oral tablet</i>	\$0 (Tier-2)	
<i>clindamycin hcl oral capsule</i>	\$0 (Tier-2)	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	\$0 (Tier-2)	
DIFICID ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
DIFICID ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>e.e.s. 400 oral tablet</i>	\$0 (Tier-2)	
<i>erythrocin stearate oral tablet</i>	\$0 (Tier-2)	
<i>erythromycin base oral capsule delayed release particles</i>	\$0 (Tier-2)	
<i>erythromycin base oral tablet</i>	\$0 (Tier-2)	
<i>erythromycin base oral tablet delayed release</i>	\$0 (Tier-2)	
<i>erythromycin ethylsuccinate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>erythromycin ethylsuccinate oral tablet</i>	\$0 (Tier-2)	
<i>erythromycin oral tablet delayed release</i>	\$0 (Tier-2)	
Mycobacterial Infections		
<i>ethambutol hcl oral tablet</i>	\$0 (Tier-2)	
<i>isoniazid oral syrup</i>	\$0 (Tier-2)	
<i>isoniazid oral tablet</i>	\$0 (Tier-2)	
PASER ORAL PACKET	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>pretomanid oral tablet</i>	\$0 (Tier-2)	
PRIFTIN ORAL TABLET	\$0 (Tier-3)	
<i>pyrazinamide oral tablet</i>	\$0 (Tier-2)	
<i>rifabutin oral capsule</i>	\$0 (Tier-2)	
<i>rifampin oral capsule</i>	\$0 (Tier-2)	
SIRTURO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TRECTOR ORAL TABLET	\$0 (Tier-3)	
Quinolones		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; NEDS
BAXDELA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>ciprofloxacin hcl oral tablet</i>	\$0 (Tier-2)	
<i>levofloxacin oral solution</i>	\$0 (Tier-2)	
<i>levofloxacin oral tablet</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl oral tablet</i>	\$0 (Tier-2)	
<i>ofloxacin oral tablet</i>	\$0 (Tier-2)	
Sulfonamides		
<i>sulfadiazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	\$0 (Tier-2)	
Tetracyclines		
<i>demeclocycline hcl oral tablet</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral capsule</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral tablet</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral tablet delayed release</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral capsule</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral tablet</i>	\$0 (Tier-2)	
<i>minocycline hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>minocycline hcl oral capsule</i>	\$0 (Tier-2)	
<i>minocycline hcl oral tablet</i>	\$0 (Tier-2)	
NUZYRA ORAL TABLET	\$0 (Tier-3)	NEDS
<i>tetracycline hcl oral capsule</i>	\$0 (Tier-2)	
VIBRAMYCIN ORAL SYRUP	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Blood Modifying Agents: Drugs That Help Prevent Clots And Increase Cell Counts		
Antiplatelet Therapy		
<i>anagrelide hcl oral capsule</i>	\$0 (Tier-2)	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
BRILINTA ORAL TABLET	\$0 (Tier-3)	
<i>cilostazol oral tablet</i>	\$0 (Tier-2)	
<i>clopidogrel bisulfate oral tablet</i>	\$0 (Tier-2)	
<i>dipyridamole oral tablet</i>	\$0 (Tier-2)	
<i>prasugrel hcl oral tablet</i>	\$0 (Tier-2)	
Blood Cell Stimulators		
DOPTELET ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
MULPLETA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty
PROCRIT INJECTION SOLUTION 40000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty; NEDS
PROMACTA ORAL PACKET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PROMACTA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty; NEDS
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
Blood Thinners		
<i>dabigatran etexilate mesylate oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
ELIQUIS ORAL TABLET	\$0 (Tier-3)	
<i>enoxaparin sodium injection solution prefilled syringe</i>	\$0 (Tier-2)	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	\$0 (Tier-2)	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	\$0 (Tier-2)	
FRAGMIN SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 7500 UNIT/0.3ML	\$0 (Tier-3)	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	\$0 (Tier-3)	
<i>jantoven oral tablet</i>	\$0 (Tier-2)	
PRADAXA ORAL CAPSULE	\$0 (Tier-3)	
<i>warfarin sodium oral tablet</i>	\$0 (Tier-2)	
XARELTO ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
XARELTO ORAL TABLET	\$0 (Tier-3)	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
Blood, Miscellaneous		
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
CABLIVI INJECTION KIT	\$0 (Tier-3)	NEDS
OXBRYTA ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; NEDS
OXBRYTA ORAL TABLET SOLUBLE	\$0 (Tier-3)	SP-CVS specialty; NEDS
<i>pentoxifylline er oral tablet extended release</i>	\$0 (Tier-2)	
PYRUKYND ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TAVALISSE ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
<i>tranexamic acid oral tablet</i>	\$0 (Tier-2)	
Cancer Drugs		
Injectable Agents		
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Oral Agents		
<i>abiraterone acetate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
AFINITOR DISPERZ ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
AFINITOR ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
ALECENSA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ALKERAN ORAL TABLET	\$0 (Tier-3)	Part B
ALUNBRIG ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ALUNBRIG ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>anastrozole oral tablet</i>	\$0 (Tier-2)	
AYVAKIT ORAL TABLET	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
BALVERSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>bexarotene oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
<i>bicalutamide oral tablet</i>	\$0 (Tier-2)	
BOSULIF ORAL TABLET 100 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
BOSULIF ORAL TABLET 400 MG, 500 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
BRAFTOVI ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
BRUKINSA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
CABOMETYX ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CALQUENCE ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
CALQUENCE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>capecitabine oral tablet</i>	\$0 (Tier-2)	Part B; SP-CVS specialty; NEDS
CAPRELSA ORAL TABLET 100 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
CAPRELSA ORAL TABLET 300 MG	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
COPIKTRA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
COTELLIC ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>cyclophosphamide oral capsule</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
<i>cyclophosphamide oral tablet</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
DAURISMO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
DROXIA ORAL CAPSULE	\$0 (Tier-3)	
EMCYT ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
ERIVEDGE ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ERLEADA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>erlotinib hcl oral tablet 100 mg</i>	\$0 (Tier-2)	SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>erlotinib hcl oral tablet 150 mg, 25 mg</i>	\$0 (Tier-2)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>etoposide oral capsule</i>	\$0 (Tier-2)	Part B; SP-CVS specialty
<i>everolimus oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>everolimus oral tablet soluble</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>exemestane oral tablet</i>	\$0 (Tier-2)	
EXKIVITY ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
FOTIVDA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
GAVRETO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
GILOTRIF ORAL TABLET	\$0 (Tier-3)	PA; NEDS
HYCANTIN ORAL CAPSULE	\$0 (Tier-3)	Part B; SP-CVS specialty
<i>hydroxyurea oral capsule</i>	\$0 (Tier-2)	
IBRANCE ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
IBRANCE ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ICLUSIG ORAL TABLET	\$0 (Tier-3)	PA; NEDS
IDHIFA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>imatinib mesylate oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
IMBRUVICA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
IMBRUVICA ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
IMBRUVICA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
INLYTA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INQOVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INREBIC ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
IRESSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
JAKAFI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KOSELUGO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>lapatinib ditosylate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
<i>lenalidomide oral capsule 10 mg, 15 mg, 25 mg, 5 mg</i>	\$0 (Tier-2)	PA; LA; SP-CVS specialty; NEDS
<i>lenalidomide oral capsule 2.5 mg, 20 mg</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>letrozole oral tablet</i>	\$0 (Tier-2)	
LEUKERAN ORAL TABLET	\$0 (Tier-3)	
LONSURF ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LORBRENA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LUMAKRAS ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LYNPARZA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
LYSODREN ORAL TABLET	\$0 (Tier-3)	
MATULANE ORAL CAPSULE	\$0 (Tier-3)	NEDS
<i>megestrol acetate oral tablet</i>	\$0 (Tier-2)	
MEKINIST ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
MEKTOVI ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>melphalan oral tablet</i>	\$0 (Tier-2)	Part B
<i>mercaptopurine oral tablet</i>	\$0 (Tier-2)	
MYLERAN ORAL TABLET	\$0 (Tier-3)	Part B
NERLYNX ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
NEXAVAR ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
<i>nilutamide oral tablet</i>	\$0 (Tier-2)	NEDS
NINLARO ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUBEQA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ODOMZO ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ONUREG ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ORGOVYX ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PEMAZYRE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
POMALYST ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
PURIXAN ORAL SUSPENSION	\$0 (Tier-3)	NEDS
QINLOCK ORAL TABLET	\$0 (Tier-3)	PA; NEDS
RETEVMO ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
REVLIMID ORAL CAPSULE	\$0 (Tier-3)	PA; LA; SP-CVS specialty; NEDS
ROZLYTREK ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
RUBRACA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
RYDAPT ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SCSEMBLIX ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SOLTAMOX ORAL SOLUTION	\$0 (Tier-3)	
<i>sorafenib tosylate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
SPRYCEL ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
STIVARGA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>sunitinib malate oral capsule</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
SUTENT ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TABLOID ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty
TABRECTA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAFINLAR ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAGRISSE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TALZENNA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>tamoxifen citrate oral tablet</i>	\$0 (Tier-2)	
TARGRETIN ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
TASIGNA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAZVERIK ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>temozolomide oral capsule</i>	\$0 (Tier-2)	Part B; SP-CVS specialty
TEPMETKO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
THALOMID ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; NEDS
TIBSOVO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>toremifene citrate oral tablet</i>	\$0 (Tier-2)	
<i>tretinoin oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TUKYSA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
TURALIO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
VENCLEXTA ORAL TABLET 10 MG, 50 MG	\$0 (Tier-3)	PA
VENCLEXTA ORAL TABLET 100 MG	\$0 (Tier-3)	PA; NEDS
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
VERZENIO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VIJOICE ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VIZIMPRO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VONJO ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
VOTRIENT ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
WELIREG ORAL TABLET	\$0 (Tier-3)	PA; NEDS
XALKORI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XOSPATA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
XTANDI ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XTANDI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
YONSA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZEJULA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
ZELBORAF ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZOLINZA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZYDELIG ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZYKADIA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
Protective Agents		
<i>leucovorin calcium oral tablet</i>	\$0 (Tier-2)	
MESNEX ORAL TABLET	\$0 (Tier-3)	NEDS
XURIDEN ORAL PACKET	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
Cardiovascular Agents: Drugs To Treat Heart Conditions Like High Blood Pressure And High Cholesterol		
Ace Inhibitors		
<i>benazepril hcl oral tablet</i>	\$0 (Tier-2)	
<i>captopril oral tablet</i>	\$0 (Tier-2)	
<i>enalapril maleate oral tablet</i>	\$0 (Tier-2)	
<i>fosinopril sodium oral tablet</i>	\$0 (Tier-2)	
<i>lisinopril oral tablet</i>	\$0 (Tier-2)	
<i>moexipril hcl oral tablet</i>	\$0 (Tier-2)	
<i>perindopril erbumine oral tablet</i>	\$0 (Tier-2)	
<i>quinapril hcl oral tablet</i>	\$0 (Tier-2)	
<i>ramipril oral capsule</i>	\$0 (Tier-2)	
<i>trandolapril oral tablet</i>	\$0 (Tier-2)	
Alpha1 Blockers		
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>doxazosin mesylate oral tablet</i>	\$0 (Tier-2)	
<i>prazosin hcl oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>terazosin hcl oral capsule</i>	\$0 (Tier-2)	
Angina		
<i>isosorbide dinitrate oral tablet</i>	\$0 (Tier-2)	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isosorbide mononitrate oral tablet</i>	\$0 (Tier-2)	
NITRO-BID TRANSDERMAL OINTMENT	\$0 (Tier-3)	
<i>nitroglycerin sublingual tablet sublingual</i>	\$0 (Tier-2)	
<i>nitroglycerin transdermal patch 24 hour</i>	\$0 (Tier-2)	
<i>nitroglycerin translingual solution</i>	\$0 (Tier-2)	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-3)	
<i>ranolazine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
Angiotensin II Receptor Blockers		
<i>candesartan cilexetil oral tablet</i>	\$0 (Tier-2)	
<i>irbesartan oral tablet</i>	\$0 (Tier-2)	
<i>losartan potassium oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan medoxomil oral tablet</i>	\$0 (Tier-2)	
<i>telmisartan oral tablet</i>	\$0 (Tier-2)	
<i>valsartan oral tablet</i>	\$0 (Tier-2)	
Anti-Arrhythmics And Cardiac Glycosides		
<i>amiodarone hcl oral tablet</i>	\$0 (Tier-2)	
<i>digitek oral tablet</i>	\$0 (Tier-2)	
<i>digoxin oral solution</i>	\$0 (Tier-2)	
<i>digoxin oral tablet</i>	\$0 (Tier-2)	
<i>disopyramide phosphate oral capsule</i>	\$0 (Tier-2)	
<i>dofetilide oral capsule</i>	\$0 (Tier-2)	
<i>flecainide acetate oral tablet</i>	\$0 (Tier-2)	
LANOXIN ORAL TABLET	\$0 (Tier-3)	
<i>mexiletine hcl oral capsule</i>	\$0 (Tier-2)	
MULTAQ ORAL TABLET	\$0 (Tier-3)	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>propafenone hcl oral tablet</i>	\$0 (Tier-2)	
<i>quinidine gluconate er oral tablet extended release</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>quinidine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>sorine oral tablet</i>	\$0 (Tier-2)	
<i>sotalol hcl (af) oral tablet</i>	\$0 (Tier-2)	
<i>sotalol hcl oral tablet</i>	\$0 (Tier-2)	
SOTYLIZE ORAL SOLUTION	\$0 (Tier-3)	
Antihypertensive Fixed-Dose Combination Products		
<i>amlodipine besy-benazepril hcl oral capsule</i>	\$0 (Tier-2)	
<i>amlodipine besylate-valsartan oral tablet</i>	\$0 (Tier-2)	
<i>amlodipine-atorvastatin oral tablet</i>	\$0 (Tier-2)	
<i>amlodipine-olmesartan oral tablet</i>	\$0 (Tier-2)	
<i>atenolol-chlorthalidone oral tablet</i>	\$0 (Tier-2)	
<i>benazepril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>candesartan cilexetil-hctz oral tablet</i>	\$0 (Tier-2)	
<i>enalapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>fosinopril sodium-hctz oral tablet</i>	\$0 (Tier-2)	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>losartan potassium-hctz oral tablet</i>	\$0 (Tier-2)	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan medoxomil-hctz oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan-amlodipine-hctz oral tablet</i>	\$0 (Tier-2)	
<i>quinapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>telmisartan-amlodipine oral tablet</i>	\$0 (Tier-2)	
<i>telmisartan-hctz oral tablet</i>	\$0 (Tier-2)	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>valsartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
Beta And Alpha Blockers		
<i>carvedilol oral tablet</i>	\$0 (Tier-2)	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>labetalol hcl oral tablet</i>	\$0 (Tier-2)	
Beta Blockers		
<i>acebutolol hcl oral capsule</i>	\$0 (Tier-2)	
<i>atenolol oral tablet</i>	\$0 (Tier-2)	
<i>betaxolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol fumarate oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
BYSTOLIC ORAL TABLET	\$0 (Tier-3)	
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>metoprolol tartrate oral tablet</i>	\$0 (Tier-2)	
<i>nadolol oral tablet</i>	\$0 (Tier-2)	
<i>nebivolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>pindolol oral tablet</i>	\$0 (Tier-2)	
<i>propranolol hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>propranolol hcl oral solution</i>	\$0 (Tier-2)	
<i>propranolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>timolol maleate oral tablet</i>	\$0 (Tier-2)	
Calcium Channel Blockers		
<i>amlodipine besylate oral tablet</i>	\$0 (Tier-2)	
<i>cartia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl oral tablet</i>	\$0 (Tier-2)	
<i>dilt-xr oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>felodipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isradipine oral capsule</i>	\$0 (Tier-2)	
<i>matzim la oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nicardipine hcl oral capsule</i>	\$0 (Tier-2)	
<i>nifedipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine oral capsule</i>	\$0 (Tier-2)	
<i>nimodipine oral capsule</i>	\$0 (Tier-2)	
<i>nisoldipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
NYMALIZE ORAL SOLUTION	\$0 (Tier-3)	NEDS
<i>taztia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tiadylt er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>verapamil hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>verapamil hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>verapamil hcl oral tablet</i>	\$0 (Tier-2)	
Cardiovascular Agents, Miscellaneous		
CAMZYOS ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
CORLANOR ORAL SOLUTION	\$0 (Tier-3)	
CORLANOR ORAL TABLET	\$0 (Tier-3)	
ENTRESTO ORAL TABLET	\$0 (Tier-3)	
VERQUVO ORAL TABLET	\$0 (Tier-3)	
Centrally Acting Agents		
<i>clonidine hcl oral tablet</i>	\$0 (Tier-2)	
<i>clonidine transdermal patch weekly</i>	\$0 (Tier-2)	
<i>droxidopa oral capsule</i>	\$0 (Tier-2)	PA; NEDS
<i>midodrine hcl oral tablet</i>	\$0 (Tier-2)	
Direct Renin Inhibitors		
<i>aliskiren fumarate oral tablet</i>	\$0 (Tier-2)	
Diuretics		
<i>amiloride hcl oral tablet</i>	\$0 (Tier-2)	
<i>amiloride-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>bumetanide oral tablet</i>	\$0 (Tier-2)	
CAROSPIR ORAL SUSPENSION	\$0 (Tier-3)	
<i>chlorthalidone oral tablet</i>	\$0 (Tier-2)	
<i>eplerenone oral tablet</i>	\$0 (Tier-2)	
<i>ethacrynic acid oral tablet</i>	\$0 (Tier-2)	
<i>furosemide oral solution</i>	\$0 (Tier-2)	
<i>furosemide oral tablet</i>	\$0 (Tier-2)	
<i>hydrochlorothiazide oral capsule</i>	\$0 (Tier-2)	
<i>hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>indapamide oral tablet</i>	\$0 (Tier-2)	
KERENDIA ORAL TABLET	\$0 (Tier-3)	PA
<i>metolazone oral tablet</i>	\$0 (Tier-2)	
<i>spironolactone oral tablet</i>	\$0 (Tier-2)	
<i>spironolactone-hctz oral tablet</i>	\$0 (Tier-2)	
<i>toremide oral tablet</i>	\$0 (Tier-2)	
<i>triamterene-hctz oral capsule</i>	\$0 (Tier-2)	
<i>triamterene-hctz oral tablet</i>	\$0 (Tier-2)	
Lipid Lowering Agents		
<i>atorvastatin calcium oral tablet</i>	\$0 (Tier-2)	
<i>cholestyramine light oral powder</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>cholestyramine oral packet</i>	\$0 (Tier-2)	
<i>colesevelam hcl oral packet</i>	\$0 (Tier-2)	
<i>colesevelam hcl oral tablet</i>	\$0 (Tier-2)	
<i>colestipol hcl oral packet</i>	\$0 (Tier-2)	
<i>colestipol hcl oral tablet</i>	\$0 (Tier-2)	
<i>ezetimibe oral tablet</i>	\$0 (Tier-2)	
<i>ezetimibe-simvastatin oral tablet</i>	\$0 (Tier-2)	
<i>fenofibrate micronized oral capsule</i>	\$0 (Tier-2)	
<i>fenofibrate oral capsule</i>	\$0 (Tier-2)	
<i>fenofibrate oral tablet</i>	\$0 (Tier-2)	
<i>fenofibric acid oral capsule delayed release</i>	\$0 (Tier-2)	
FLOLIPID ORAL SUSPENSION	\$0 (Tier-3)	
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>fluvastatin sodium oral capsule</i>	\$0 (Tier-2)	
<i>gemfibrozil oral tablet</i>	\$0 (Tier-2)	
<i>icosapent ethyl oral capsule</i>	\$0 (Tier-2)	
JUXTAPID ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>lovastatin oral tablet</i>	\$0 (Tier-2)	
NEXLETOL ORAL TABLET	\$0 (Tier-3)	PA
NEXLIZET ORAL TABLET	\$0 (Tier-3)	PA
<i>niacin (antihyperlipidemic) oral tablet</i>	\$0 (Tier-2)	
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	\$0 (Tier-2)	
<i>niacor oral tablet</i>	\$0 (Tier-2)	
<i>omega-3-acid ethyl esters oral capsule</i>	\$0 (Tier-2)	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA
<i>pravastatin sodium oral tablet</i>	\$0 (Tier-2)	
PREVALITE ORAL PACKET	\$0 (Tier-3)	
<i>rosuvastatin calcium oral tablet</i>	\$0 (Tier-2)	
<i>simvastatin oral tablet</i>	\$0 (Tier-2)	
VASCEPA 0.5 MG ORAL CAPSULE	\$0 (Tier-3)	
Potassium Replacement		
<i>klor-con 10 oral tablet extended release</i>	\$0 (Tier-2)	
<i>klor-con m10 oral tablet extended release</i>	\$0 (Tier-2)	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
<i>klor-con m20 oral tablet extended release</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>klor-con oral packet</i>	\$0 (Tier-2)	
<i>klor-con oral tablet extended release</i>	\$0 (Tier-2)	
K-TAB ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
<i>potassium chloride crys er oral tablet extended release</i>	\$0 (Tier-2)	
<i>potassium chloride er oral capsule extended release</i>	\$0 (Tier-2)	
<i>potassium chloride er oral tablet extended release</i>	\$0 (Tier-2)	
<i>potassium chloride oral packet</i>	\$0 (Tier-2)	
<i>potassium chloride oral solution</i>	\$0 (Tier-2)	
Vasodilators		
BIDIL ORAL TABLET	\$0 (Tier-3)	
<i>hydralazine hcl oral tablet</i>	\$0 (Tier-2)	
<i>isosorb dinitrate-hydralazine oral tablet</i>	\$0 (Tier-2)	
<i>minoxidil oral tablet</i>	\$0 (Tier-2)	
Diabetes Mellitus: Diabetic Testing Supplies And Drugs That Lower Blood Sugar		
Diabetic Supplies		
<i>alcohol pads</i>	\$0 (Tier-4)	*
<i>assure insulin safety syringe</i>	\$0 (Tier-2)	
<i>bd disp needle</i>	\$0 (Tier-2)	
<i>bd insulin syringe</i>	\$0 (Tier-2)	
<i>bd insulin syringe u-500</i>	\$0 (Tier-2)	
<i>comfort assist insulin syringe</i>	\$0 (Tier-2)	
<i>cvs gauze sterile pad</i>	\$0 (Tier-2)	
DEXCOM RECEIVER DEVICE	\$0 (Tier-4)	Part B; PA
DEXCOM SENSOR	\$0 (Tier-4)	Part B; PA
DEXCOM TRANSMITTER	\$0 (Tier-4)	Part B; PA
DIASTIX IN VITRO STRIP	\$0 (Tier-4)	*
<i>exel comfort point pen needle</i>	\$0 (Tier-2)	
FREESTYLE INSULINX TEST IN VITRO STRIP	\$0 (Tier-4)	*
FREESTYLE LIBRE READER DEVICE	\$0 (Tier-4)	Part B; PA
FREESTYLE LIBRE SENSOR SYSTEM	\$0 (Tier-4)	Part B; PA
FREESTYLE LITE DEVICE	\$0 (Tier-4)	*
FREESTYLE LITE TEST IN VITRO STRIP	\$0 (Tier-4)	*
<i>gauze pads pad</i>	\$0 (Tier-2)	
<i>global alcohol prep ease pad</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>insulin syringe</i>	\$0 (Tier-2)	
KETO-DIASTIX IN VITRO STRIP	\$0 (Tier-4)	*
KETOSTIX IN VITRO STRIP	\$0 (Tier-4)	*
<i>lancets</i>	\$0 (Tier-2)	Part B
MULTISTIX 10 SG IN VITRO STRIP	\$0 (Tier-4)	*
OMNIPOD 5 G6 INTRO (GEN 5) KIT	\$0 (Tier-3)	
OMNIPOD 5 G6 POD (GEN 5)	\$0 (Tier-3)	
OMNIPOD CLASSIC PDM (GEN 3) KIT	\$0 (Tier-3)	
OMNIPOD CLASSIC PODS (GEN 3)	\$0 (Tier-3)	
OMNIPOD DASH PDM (GEN 4) KIT	\$0 (Tier-3)	
OMNIPOD DASH PODS (GEN 4)	\$0 (Tier-3)	
<i>preferred plus insulin syringe</i>	\$0 (Tier-2)	
<i>reli-on insulin syringe</i>	\$0 (Tier-2)	
<i>techlite insulin syringe</i>	\$0 (Tier-2)	
<i>techlite pen needles</i>	\$0 (Tier-2)	
<i>trueplus insulin syringe</i>	\$0 (Tier-2)	
<i>trueplus pen needles</i>	\$0 (Tier-2)	
Glucose Elevating		
<i>diazoxide oral suspension</i>	\$0 (Tier-2)	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
GLUCAGON EMERGENCY INJECTION KIT	\$0 (Tier-3)	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	
GVOKE KIT SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	
Insulins		
HUMALOG INJECTION SOLUTION	\$0 (Tier-3)	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMULIN N SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN R INJECTION SOLUTION	\$0 (Tier-3)	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LEVEMIR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRESIBA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
Non-Insulin Injectables		
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	\$0 (Tier-3)	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
Oral Agents		
<i>acarbose oral tablet</i>	\$0 (Tier-2)	
CYCLOSET ORAL TABLET	\$0 (Tier-3)	
FARXIGA ORAL TABLET	\$0 (Tier-3)	
<i>glimepiride oral tablet</i>	\$0 (Tier-2)	
<i>glipizide er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>glipizide oral tablet</i>	\$0 (Tier-2)	
<i>glipizide-metformin hcl oral tablet</i>	\$0 (Tier-2)	
<i>glyburide micronized oral tablet</i>	\$0 (Tier-2)	
<i>glyburide oral tablet</i>	\$0 (Tier-2)	
<i>glyburide-metformin oral tablet</i>	\$0 (Tier-2)	
GLYXAMBI ORAL TABLET	\$0 (Tier-3)	
JANUMET ORAL TABLET	\$0 (Tier-3)	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
JANUVIA ORAL TABLET	\$0 (Tier-3)	
JARDIANCE ORAL TABLET	\$0 (Tier-3)	
JENTADUETO ORAL TABLET	\$0 (Tier-3)	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>metformin hcl er oral tablet extended release 24 hour (generic glucophage xl)</i>	\$0 (Tier-2)	
<i>metformin hcl oral solution</i>	\$0 (Tier-2)	
<i>metformin hcl oral tablet</i>	\$0 (Tier-2)	
<i>miglitol oral tablet</i>	\$0 (Tier-2)	
<i>nateglinide oral tablet</i>	\$0 (Tier-2)	
<i>pioglitazone hcl oral tablet</i>	\$0 (Tier-2)	
<i>pioglitazone hcl-glimepiride oral tablet</i>	\$0 (Tier-2)	
<i>pioglitazone hcl-metformin hcl oral tablet</i>	\$0 (Tier-2)	
<i>repaglinide oral tablet</i>	\$0 (Tier-2)	
RYBELSUS ORAL TABLET	\$0 (Tier-3)	
SYNJARDY ORAL TABLET	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
TRADJENTA ORAL TABLET	\$0 (Tier-3)	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
Ear, Nose And Throat		
Antihistamine/Decongestants		
<i>cetirizine syrup, tablet</i>	\$0 (Tier-4)	*
<i>cetirizine/pseudoephedrine</i>	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day
<i>chlorpheniramine</i>	\$0 (Tier-4)	*
<i>diphenhydramine</i>	\$0 (Tier-4)	*
<i>doxylamine</i>	\$0 (Tier-4)	*
<i>loratadine tablet, solution</i>	\$0 (Tier-4)	*
<i>loratadine/pseudoephedrine</i>	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day
<i>pseudoephedrine</i>	\$0 (Tier-4)	*; Pseudoephedrine less than 240 mg/day
Ear		
<i>acetic acid otic solution</i>	\$0 (Tier-2)	
<i>carbamide peroxide</i>	\$0 (Tier-4)	*
<i>ciprofloxacin hcl otic solution</i>	\$0 (Tier-2)	
<i>ciprofloxacin-dexamethasone otic suspension</i>	\$0 (Tier-2)	
<i>flac otic oil</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide otic oil</i>	\$0 (Tier-2)	
<i>hydrocortisone-acetic acid otic solution</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
<i>ofloxacin otic solution</i>	\$0 (Tier-2)	
Mouth And Throat		
<i>cevimeline hcl oral capsule</i>	\$0 (Tier-2)	
<i>cherry syrup</i>	\$0 (Tier-4)	*
<i>chlorhexidine gluconate mouth/throat solution</i>	\$0 (Tier-2)	
ORA-PLUS SUSPENDING VEHICLE	\$0 (Tier-4)	*
ORA-SWEET ORAL SYRUP	\$0 (Tier-4)	*
ORA-SWEET SF ORAL SYRUP	\$0 (Tier-4)	*
<i>periogard mouth/throat solution</i>	\$0 (Tier-2)	
<i>pilocarpine hcl oral tablet</i>	\$0 (Tier-2)	
<i>saliva substitute</i>	\$0 (Tier-4)	*

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>simple syrup</i>	\$0 (Tier-4)	*
<i>triamcinolone acetonide mouth/throat paste</i>	\$0 (Tier-2)	
Nose		
<i>azelastine hcl nasal solution</i>	\$0 (Tier-2)	QL (120 ML per 90 days)
<i>budesonide nasal spray</i>	\$0 (Tier-4)	*; QL (One (1) inhaler/month)
<i>cyproheptadine hcl oral syrup</i>	\$0 (Tier-2)	
<i>cyproheptadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>flunisolide nasal solution</i>	\$0 (Tier-2)	QL (150 ML per 90 days)
<i>fluticasone propionate nasal suspension</i>	\$0 (Tier-2)	QL (48 GM per 90 days)
<i>hydroxyzine hcl oral syrup</i>	\$0 (Tier-2)	PA
<i>hydroxyzine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>hydroxyzine pamoate oral capsule</i>	\$0 (Tier-2)	PA
<i>ipratropium bromide nasal solution 0.03 %</i>	\$0 (Tier-2)	QL (180 ML per 90 days)
<i>ipratropium bromide nasal solution 0.06 %</i>	\$0 (Tier-2)	QL (90 ML per 90 days)
<i>levocetirizine dihydrochloride oral solution</i>	\$0 (Tier-2)	
<i>levocetirizine dihydrochloride oral tablet</i>	\$0 (Tier-2)	
<i>mometasone furoate nasal suspension</i>	\$0 (Tier-2)	QL (102 GM per 90 days)
NASACORT ALLERGY 24HR (TRIAMCINOLONE)	\$0 (Tier-4)	*; QL (One (1) inhaler/month)
<i>olopatadine hcl nasal solution</i>	\$0 (Tier-2)	QL (91.5 GM per 90 days)
Eye: Drugs That Treat Eye Conditions Like Glaucoma, Infections, And Irritation		
Allergy		
ALOCRILOPHthalmic SOLUTION	\$0 (Tier-3)	
ALOMIDOPHthalmic SOLUTION	\$0 (Tier-3)	
<i>azelastine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>bepotastine besilate ophthalmic solution</i>	\$0 (Tier-2)	
<i>cromolyn sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>epinastine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>ketotifen</i>	\$0 (Tier-4)	*
<i>naphazoline</i>	\$0 (Tier-4)	*
NAPHCON-A (NAPHAZOLINE/ PHENIRAMINE)	\$0 (Tier-4)	*
<i>olopatadine hcl ophthalmic solution</i>	\$0 (Tier-2)	
OPCON-A (NAPHAZOLINE/ PHENIRAMINE)	\$0 (Tier-4)	*

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Anti-Infectives		
AZASITE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>bacitracin ophthalmic ointment</i>	\$0 (Tier-2)	
<i>bacitracin-polymyxin b ophthalmic ointment</i>	\$0 (Tier-2)	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	\$0 (Tier-2)	
BESIVANCE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-3)	
<i>ciprofloxacin hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>erythromycin ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gatifloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>gentak ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gentamicin sulfate ophthalmic solution</i>	\$0 (Tier-2)	
<i>levofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment</i>	\$0 (Tier-2)	
<i>ofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic ointment</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	\$0 (Tier-2)	
TOBRADEX OPHTHALMIC OINTMENT	\$0 (Tier-3)	
TOBRADEX ST OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>tobramycin ophthalmic solution</i>	\$0 (Tier-2)	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	\$0 (Tier-2)	
Anti-Inflammatories		
ALREX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	\$0 (Tier-2)	
BROMSITE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
<i>diclofenac sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>difluprednate ophthalmic emulsion</i>	\$0 (Tier-2)	
DUREZOL OPHTHALMIC EMULSION	\$0 (Tier-3)	
FLAREX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>fluorometholone ophthalmic suspension</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>flurbiprofen sodium ophthalmic solution</i>	\$0 (Tier-2)	
FML FORTE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
ILEVRO OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
INVELTYS OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>ketorolac tromethamine ophthalmic solution</i>	\$0 (Tier-2)	
<i>loteprednol etabonate ophthalmic gel</i>	\$0 (Tier-2)	
<i>loteprednol etabonate ophthalmic suspension</i>	\$0 (Tier-2)	
MAXIDEX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-dexameth ophthalmic suspension</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-gramicidin ophthalmic solution</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc ophthalmic suspension</i>	\$0 (Tier-2)	
PRED MILD OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
PRED-G S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-3)	
<i>prednisolone acetate ophthalmic suspension</i>	\$0 (Tier-2)	
<i>prednisolone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
PROLENSA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ZYLET OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
Antivirals		
<i>trifluridine ophthalmic solution</i>	\$0 (Tier-2)	
ZIRGAN OPHTHALMIC GEL	\$0 (Tier-3)	
Glaucoma		
<i>acetazolamide er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>acetazolamide oral tablet</i>	\$0 (Tier-2)	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1%	\$0 (Tier-3)	
<i>apraclonidine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>betaxolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
BETIMOL OPHTHALMIC SOLUTION	\$0 (Tier-3)	
BETOPTIC-S OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bimatoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>brimonidine tartrate ophthalmic solution</i>	\$0 (Tier-2)	
<i>brimonidine tartrate-timolol ophthalmic solution</i>	\$0 (Tier-2)	
<i>brinzolamide ophthalmic suspension</i>	\$0 (Tier-2)	
<i>carteolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
COMBIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>dorzolamide hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	\$0 (Tier-2)	
IOPIDINE OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>latanoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>levobunolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
LUMIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>methazolamide oral tablet</i>	\$0 (Tier-2)	
<i>pilocarpine hcl ophthalmic solution</i>	\$0 (Tier-2)	
RHOPRESSA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ROCKLATAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
SIMBRINZA OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>timolol maleate (once-daily) ophthalmic solution</i>	\$0 (Tier-2)	
<i>timolol maleate ophthalmic gel forming solution</i>	\$0 (Tier-2)	
<i>timolol maleate ophthalmic solution</i>	\$0 (Tier-2)	
<i>timolol maleate pf ophthalmic solution</i>	\$0 (Tier-2)	
<i>travoprost (bak free) ophthalmic solution</i>	\$0 (Tier-2)	
VYZULTA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
Ophthalmic Drugs, Miscellaneous		
<i>artificial tears (glycerin/ propylene glycol)</i>	\$0 (Tier-4)	*
<i>atropine sulfate ophthalmic solution</i>	\$0 (Tier-2)	
CYSTADROPS OPHTHALMIC SOLUTION	\$0 (Tier-3)	
CYSTARAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
NATACYN OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
OXERVATE OPHTHALMIC SOLUTION	\$0 (Tier-3)	PA; NEDS
RESTASIS MULTIDOSE OPHTHALMIC EMULSION	\$0 (Tier-3)	
RESTASIS OPHTHALMIC EMULSION	\$0 (Tier-3)	
Gastrointestinal Drugs: Drugs To Treat Stomach Conditions Like Acid, Nausea, And Bowel Diseases		
Emesis		
ANZEMET ORAL TABLET	\$0 (Tier-3)	B vs D
<i>aprepitant oral capsule 125 mg</i>	\$0 (Tier-2)	B vs D; NEDS
<i>aprepitant oral capsule 40 mg, 80 & 125 mg, 80 mg</i>	\$0 (Tier-2)	B vs D
<i>dronabinol oral capsule</i>	\$0 (Tier-2)	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
EMEND ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	B vs D
<i>granisetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>meclizine hcl oral tablet</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral solution</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral tablet</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ondansetron hcl oral solution</i>	\$0 (Tier-2)	B vs D
<i>ondansetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>ondansetron oral tablet dispersible</i>	\$0 (Tier-2)	B vs D
<i>prochlorperazine maleate oral tablet</i>	\$0 (Tier-2)	
<i>prochlorperazine rectal suppository</i>	\$0 (Tier-2)	
<i>promethazine hcl oral syrup</i>	\$0 (Tier-2)	PA
<i>promethazine hcl oral tablet</i>	\$0 (Tier-2)	PA
SANCUSO TRANSDERMAL PATCH	\$0 (Tier-3)	NEDS
<i>scopolamine transdermal patch 72 hour</i>	\$0 (Tier-2)	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	B vs D
Enzymes		
CARBAGLU ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; NEDS
<i>carglumic acid oral tablet soluble</i>	\$0 (Tier-2)	PA; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-3)	
CYSTAGON ORAL CAPSULE	\$0 (Tier-3)	
REVCovi INTRAMUSCULAR SOLUTION	\$0 (Tier-3)	NEDS
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-3)	
Gastrointestinal Drugs, Miscellaneous		
ALIGN (BIFIDOBACTERIUM INFANTIS)	\$0 (Tier-4)	*
<i>alose tron hcl oral tablet</i>	\$0 (Tier-2)	NEDS
<i>bisacodyl</i>	\$0 (Tier-4)	*
BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE	\$0 (Tier-3)	PA; NEDS
BYLVAY ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
CHOLBAM ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>constulose oral solution</i>	\$0 (Tier-2)	
<i>cromolyn sodium oral concentrate</i>	\$0 (Tier-2)	
CULTURELLE (LACTOBACILLUS RHAMNOSUS GG)	\$0 (Tier-4)	*
<i>dicyclomine hcl oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>dicyclomine hcl oral solution</i>	\$0 (Tier-2)	
<i>dicyclomine hcl oral tablet</i>	\$0 (Tier-2)	
<i>docosate sodium (all forms and strengths)</i>	\$0 (Tier-4)	*
<i>enulose oral solution</i>	\$0 (Tier-2)	
FLORASTOR (SACCHAROMYCES BOULARDII)	\$0 (Tier-4)	*
GATTEX SUBCUTANEOUS KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>gavilyte-g oral solution reconstituted</i>	\$0 (Tier-2)	
<i>generlac oral solution</i>	\$0 (Tier-2)	
<i>glycerin</i>	\$0 (Tier-4)	*
<i>glycopyrrolate oral solution</i>	\$0 (Tier-2)	
<i>glycopyrrolate oral tablet</i>	\$0 (Tier-2)	
KRISTALOSE ORAL PACKET	\$0 (Tier-3)	
<i>lactulose oral packet</i>	\$0 (Tier-2)	
<i>lactulose oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral tablet</i>	\$0 (Tier-2)	
LIVMARLI ORAL SOLUTION	\$0 (Tier-3)	PA; NEDS
<i>loperamide hcl oral capsule</i>	\$0 (Tier-2)	
<i>loperamide</i>	\$0 (Tier-4)	*
<i>dextrin</i>	\$0 (Tier-4)	*
<i>meclizine</i>	\$0 (Tier-4)	*
<i>megestrol acetate oral suspension</i>	\$0 (Tier-2)	
<i>methylcellulose</i>	\$0 (Tier-4)	*
<i>mineral oil</i>	\$0 (Tier-4)	*
MOVANTIK ORAL TABLET	\$0 (Tier-3)	
MYTESI ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	PA
<i>na sulfate-k sulfate-mg sulf oral solution</i>	\$0 (Tier-2)	
OCALIVA ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	\$0 (Tier-3)	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	\$0 (Tier-2)	
<i>peg-3350/electrolytes oral solution reconstituted</i>	\$0 (Tier-2)	
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted</i>	\$0 (Tier-2)	
<i>polyethylene glycol 3350</i>	\$0 (Tier-4)	*
<i>psyllium</i>	\$0 (Tier-4)	*
RELISTOR ORAL TABLET	\$0 (Tier-3)	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>sennosides</i>	\$0 (Tier-4)	*
<i>simethicone</i>	\$0 (Tier-4)	*
<i>sodium bicarbonate</i>	\$0 (Tier-4)	*
<i>sodium phosphate</i>	\$0 (Tier-4)	*
SUPREP BOWEL PREP KIT ORAL SOLUTION	\$0 (Tier-3)	
UCERIS RECTAL FOAM	\$0 (Tier-3)	
<i>ursodiol oral capsule</i>	\$0 (Tier-2)	
<i>ursodiol oral tablet</i>	\$0 (Tier-2)	
XERMELO ORAL TABLET	\$0 (Tier-3)	PA; NEDS
Gastrointestinal Drugs, Peptic Ulcer Treatment, Reflux (Gerd)		
<i>aluminum carbonate</i>	\$0 (Tier-4)	*
<i>aluminum hydroxide</i>	\$0 (Tier-4)	*
<i>amoxicill-clarithro-lansopraz oral</i>	\$0 (Tier-2)	
<i>bismuth subsalicylate</i>	\$0 (Tier-4)	*
<i>cimetidine</i>	\$0 (Tier-4)	*
<i>cimetidine hcl oral solution</i>	\$0 (Tier-2)	
<i>cimetidine oral tablet</i>	\$0 (Tier-2)	
DEXILANT ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	
<i>dexlansoprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>esomeprazole magnesium oral capsule delayed release</i>	\$0 (Tier-2)	
<i>esomeprazole magnesium oral packet</i>	\$0 (Tier-2)	
<i>famotidine oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>famotidine tablet</i>	\$0 (Tier-4)	*
<i>famotidine oral tablet 20 mg, 40 mg</i>	\$0 (Tier-2)	
<i>lansoprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>lansoprazole oral tablet delayed release dispersible</i>	\$0 (Tier-2)	
<i>magaldrate</i>	\$0 (Tier-4)	*
<i>methscopolamine bromide oral tablet</i>	\$0 (Tier-2)	
<i>misoprostol oral tablet</i>	\$0 (Tier-2)	
<i>nizatidine oral capsule</i>	\$0 (Tier-2)	
<i>omeprazole oral capsule delayed release</i>	\$0 (Tier-2)	
<i>omeprazole-sodium bicarbonate oral capsule</i>	\$0 (Tier-2)	
<i>omeprazole-sodium bicarbonate oral packet</i>	\$0 (Tier-2)	NEDS
<i>pantoprazole sodium oral packet</i>	\$0 (Tier-2)	
<i>pantoprazole sodium oral tablet delayed release</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
PYLERA ORAL CAPSULE	\$0 (Tier-3)	
<i>rabeprazole sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>ranitidine tablet</i>	\$0 (Tier-4)	*
<i>sucralfate oral suspension</i>	\$0 (Tier-2)	
<i>sucralfate oral tablet</i>	\$0 (Tier-2)	
Inflammatory Bowel Disease		
<i>balsalazide disodium oral capsule</i>	\$0 (Tier-2)	
<i>budesonide er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	NEDS
<i>budesonide 3 mg oral capsule delayed release</i>	\$0 (Tier-2)	
<i>hydrocortisone rectal enema</i>	\$0 (Tier-2)	
LINZESS ORAL CAPSULE	\$0 (Tier-3)	
<i>lubiprostone oral capsule</i>	\$0 (Tier-2)	
<i>mesalamine er oral capsule extended release</i>	\$0 (Tier-2)	
<i>mesalamine er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>mesalamine oral capsule delayed release</i>	\$0 (Tier-2)	
<i>mesalamine oral tablet delayed release</i>	\$0 (Tier-2)	
<i>mesalamine rectal enema</i>	\$0 (Tier-2)	
<i>mesalamine rectal suppository</i>	\$0 (Tier-2)	
ROWASA RECTAL KIT	\$0 (Tier-3)	
<i>sulfasalazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfasalazine oral tablet delayed release</i>	\$0 (Tier-2)	
Home Infusion Therapy: Drugs Usually Given By Iv In The Home Setting		
Acute Care Drugs		
ABELCET INTRAVENOUS SUSPENSION	\$0 (Tier-3)	PA
<i>acyclovir sodium intravenous solution</i>	\$0 (Tier-2)	PA
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
<i>amikacin sulfate injection solution</i>	\$0 (Tier-2)	HI
<i>amphotericin b intravenous solution reconstituted</i>	\$0 (Tier-2)	PA
<i>ampicillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ampicillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ampicillin-sulbactam sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ampicillin-sulbactam sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>azithromycin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>aztreonam injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>bumetanide injection solution</i>	\$0 (Tier-2)	
<i>caspofungin acetate intravenous solution reconstituted 50 mg</i>	\$0 (Tier-2)	NEDS
<i>caspofungin acetate intravenous solution reconstituted 70 mg</i>	\$0 (Tier-2)	
<i>cefazolin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>cefepime hcl injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>cefotetan disodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>cefoxitin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ceftazidime injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ceftazidime intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ceftriaxone sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ceftriaxone sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>cefuroxime sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>cefuroxime sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ciprofloxacin in d5w intravenous solution</i>	\$0 (Tier-2)	HI
<i>clindamycin phosphate in d5w intravenous solution</i>	\$0 (Tier-2)	HI
<i>clindamycin phosphate injection solution</i>	\$0 (Tier-2)	HI
<i>colistimethate sodium (cba) injection solution reconstituted</i>	\$0 (Tier-2)	HI
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>daptomycin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>ertapenem sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>fluconazole in sodium chloride intravenous solution</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>furosemide injection solution</i>	\$0 (Tier-2)	
<i>gentamicin in saline intravenous solution</i>	\$0 (Tier-2)	HI
<i>gentamicin sulfate injection solution</i>	\$0 (Tier-2)	HI
<i>heparin sodium (porcine) injection solution</i>	\$0 (Tier-2)	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
INVANZ INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>levofloxacin in d5w intravenous solution</i>	\$0 (Tier-2)	HI
<i>levofloxacin intravenous solution</i>	\$0 (Tier-2)	HI
<i>linezolid intravenous solution</i>	\$0 (Tier-2)	HI
<i>meropenem intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>methotrexate sodium (pf) injection solution</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
<i>methotrexate sodium injection solution</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
<i>metronidazole intravenous solution</i>	\$0 (Tier-2)	HI
<i>moxifloxacin hcl in nacl intravenous solution</i>	\$0 (Tier-2)	HI
<i>nafcillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>nafcillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium in dextrose intravenous solution</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>penicillin g pot in dextrose intravenous solution</i>	\$0 (Tier-2)	HI
<i>penicillin g potassium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>penicillin g procaine intramuscular suspension</i>	\$0 (Tier-2)	
<i>penicillin g sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>piperacillin sod-tazobactam so intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>polymyxin b sulfate injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>rifampin intravenous solution reconstituted</i>	\$0 (Tier-2)	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>streptomycin sulfate intramuscular solution reconstituted</i>	\$0 (Tier-2)	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>tigecycline intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>tobramycin sulfate injection solution</i>	\$0 (Tier-2)	HI

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>vancomycin hcl intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>voriconazole intravenous solution reconstituted</i>	\$0 (Tier-2)	PA
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI; NEDS
ZOSYN INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI
Electrolytes		
<i>dextrose intravenous solution</i>	\$0 (Tier-2)	
<i>dextrose-nacl intravenous solution</i>	\$0 (Tier-2)	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	\$0 (Tier-3)	
<i>kcl in dextrose-nacl intravenous solution</i>	\$0 (Tier-2)	
<i>kcl-lactated ringers-d5w intravenous solution</i>	\$0 (Tier-2)	
<i>magnesium sulfate injection solution</i>	\$0 (Tier-2)	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	\$0 (Tier-3)	
PLASMA-LYTE A INTRAVENOUS SOLUTION	\$0 (Tier-3)	
<i>potassium chloride in dextrose intravenous solution</i>	\$0 (Tier-2)	
<i>potassium chloride in nacl intravenous solution</i>	\$0 (Tier-2)	
<i>potassium chloride intravenous solution</i>	\$0 (Tier-2)	
<i>sodium chloride intravenous solution</i>	\$0 (Tier-2)	
Iv Nutrition		
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINISOL SF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
INTRALIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
NUTRILIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
PLENAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PREMASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PROSOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
<i>tpn electrolytes intravenous concentrate</i>	\$0 (Tier-2)	B vs D
TRAVASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
TROPHAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D

Hormones: Drugs That Treat Conditions Like Low Testosterone And Thyroid Problems

Adrenal Corticosteroids

ACTHAR INJECTION GEL	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CORTROPHIN INJECTION GEL	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>dexamethasone oral elixir</i>	\$0 (Tier-2)	
<i>dexamethasone oral tablet</i>	\$0 (Tier-2)	
<i>dexamethasone oral tablet therapy pack</i>	\$0 (Tier-2)	
<i>fludrocortisone acetate oral tablet</i>	\$0 (Tier-2)	
<i>hydrocortisone oral tablet</i>	\$0 (Tier-2)	
MEDROL ORAL TABLET	\$0 (Tier-3)	Transplant
<i>methylprednisolone oral tablet</i>	\$0 (Tier-2)	Transplant
<i>methylprednisolone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant
MILLIPRED ORAL TABLET	\$0 (Tier-3)	Transplant
ORAPRED ODT ORAL TABLET DISPERSIBLE	\$0 (Tier-3)	Transplant
<i>prednisolone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral tablet dispersible</i>	\$0 (Tier-2)	Transplant
PREDNISON INTENSOL ORAL CONCENTRATE	\$0 (Tier-3)	Transplant
<i>prednisone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisone oral tablet</i>	\$0 (Tier-2)	Transplant
<i>prednisone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant

Androgens

AVEED INTRAMUSCULAR SOLUTION	\$0 (Tier-3)	
<i>danazol oral capsule</i>	\$0 (Tier-2)	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	\$0 (Tier-3)	
METHITEST ORAL TABLET	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>methyltestosterone oral capsule</i>	\$0 (Tier-2)	NEDS
<i>oxandrolone oral tablet</i>	\$0 (Tier-2)	
<i>testosterone cypionate intramuscular solution</i>	\$0 (Tier-2)	
<i>testosterone enanthate intramuscular solution</i>	\$0 (Tier-2)	
<i>testosterone transdermal gel</i>	\$0 (Tier-2)	
<i>testosterone transdermal solution</i>	\$0 (Tier-2)	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	
Gonadotropin Releasing Agonists		
ELIGARD SUBCUTANEOUS KIT	\$0 (Tier-3)	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>leuprolide acetate injection kit</i>	\$0 (Tier-2)	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-3)	NEDS
SYNAREL NASAL SOLUTION	\$0 (Tier-3)	NEDS
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	NEDS
Thyroid Replacement And Antithyroid Agents		
ARMOUR THYROID ORAL TABLET	\$0 (Tier-3)	
<i>euthyrox oral tablet</i>	\$0 (Tier-2)	
<i>levo-t oral tablet</i>	\$0 (Tier-2)	
<i>levothyroxine sodium oral capsule</i>	\$0 (Tier-2)	
<i>levothyroxine sodium oral tablet</i>	\$0 (Tier-2)	
<i>levoxyl oral tablet</i>	\$0 (Tier-2)	
<i>liothyronine sodium oral tablet</i>	\$0 (Tier-2)	
<i>methimazole oral tablet</i>	\$0 (Tier-2)	
<i>propylthiouracil oral tablet</i>	\$0 (Tier-2)	
SYNTHROID ORAL TABLET	\$0 (Tier-3)	
THYQUIDITY ORAL SOLUTION	\$0 (Tier-3)	
TIROSINT ORAL CAPSULE	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
TIROSINT-SOL ORAL SOLUTION	\$0 (Tier-3)	
<i>unithroid oral tablet</i>	\$0 (Tier-2)	
Immunologic Agents: Drugs That Boost The Immune System Or Prevent Rejection After Organ Transplant		
Immune Stimulants		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-1)	
ACTIMMUNE SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	NEDS
ADACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-1)	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
BIVIGAM INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
BOOSTRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
DAPTACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	\$0 (Tier-1)	
ENGERIX-B INJECTION SUSPENSION	\$0 (Tier-1)	B vs D
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	B vs D
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GAMMAGARD INJECTION SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GAMMAKED INJECTION SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GAMMAPLEX INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GAMUNEX-C INJECTION SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
GARDASIL 9 INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
HAVRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
HIBERIX INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-1)	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
INFANRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
IPOL INJECTION INJECTABLE	\$0 (Tier-1)	
IXIARO INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
MENACTRA INTRAMUSCULAR SOLUTION	\$0 (Tier-1)	
MENQUADFI INTRAMUSCULAR SOLUTION	\$0 (Tier-1)	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-1)	
M-M-R II INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-1)	
OCTAGAM INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty
PANZYGA INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
PNEUMOVAX 23 INJECTION INJECTABLE	\$0 (Tier-3)	Part B
PREHEVBRIO INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	B vs D
PREVNAR 13 INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	Part B
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
PRIVIGEN INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D; HI; SP-CVS specialty; NEDS
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
RECOMBIVAX HB INJECTION SUSPENSION	\$0 (Tier-1)	B vs D
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	B vs D
ROTARIX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
ROTATEQ ORAL SOLUTION	\$0 (Tier-1)	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
STAMARIL INJECTION SUSPENSION RECONSTITUTED	\$0 (Tier-1)	
<i>tdvax intramuscular suspension</i>	\$0 (Tier-1)	
TENIVAC INTRAMUSCULAR INJECTABLE	\$0 (Tier-1)	
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-1)	
TYPHIM VI INTRAMUSCULAR SOLUTION	\$0 (Tier-1)	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0 (Tier-1)	
VAQTA INTRAMUSCULAR SUSPENSION	\$0 (Tier-1)	
VARIVAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-1)	
YF-VAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-1)	
Immunosuppressives		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	B vs D
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CELLCEPT ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	B vs D; NEDS
<i>cyclosporine modified oral capsule</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine modified oral solution</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine oral capsule</i>	\$0 (Tier-2)	B vs D
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ENVARBUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	B vs D; SP-CVS specialty
<i>everolimus oral tablet</i>	\$0 (Tier-2)	B vs D; QL (60 EA per 30 days); NEDS
<i>gengraf oral capsule</i>	\$0 (Tier-2)	B vs D
<i>gengraf oral solution</i>	\$0 (Tier-2)	B vs D
LUPKYNIS ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>mycophenolate mofetil oral capsule</i>	\$0 (Tier-2)	B vs D

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>mycophenolate mofetil oral suspension reconstituted</i>	\$0 (Tier-2)	B vs D; NEDS
<i>mycophenolate mofetil oral tablet</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate sodium oral tablet delayed release</i>	\$0 (Tier-2)	B vs D
PROGRAF ORAL PACKET 0.2 MG	\$0 (Tier-3)	B vs D
PROGRAF ORAL PACKET 1 MG	\$0 (Tier-3)	B vs D; NEDS
REZUROCK ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>sirolimus oral solution</i>	\$0 (Tier-2)	B vs D
<i>sirolimus oral tablet</i>	\$0 (Tier-2)	B vs D
<i>tacrolimus oral capsule</i>	\$0 (Tier-2)	B vs D
TAVNEOS ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZORTRESS ORAL TABLET	\$0 (Tier-3)	B vs D; QL (60 EA per 30 days); NEDS
Miscellaneous Drugs: Drugs Used To Treat A Variety Of Unique Conditions		
Acromegaly		
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	PA; NEDS
<i>octreotide acetate injection solution</i>	\$0 (Tier-2)	SP-CVS specialty
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
Amyloidosis-Associated Cardiomyopathy		
VYNDAMAX ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
VYNDAQEL ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
Amyloidosis-Associated Polyneuropathy		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (6 ML per 30 days); NEDS
Amyotrophic Lateral Sclerosis		
EXSERVAN ORAL FILM	\$0 (Tier-3)	NEDS
RADICAVA ORS STARTER KIT ORAL SUSPENSION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>riluzole oral tablet</i>	\$0 (Tier-2)	
TIGLUTIK ORAL SUSPENSION	\$0 (Tier-3)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Anaphylaxis Emergency		
<i>epinephrine injection solution</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
<i>epinephrine injection solution auto-injector</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
Cryopyrin-Associated Periodic Syndromes		
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (20.1 ML per 28 days); NEDS
Cushing's Syndrome		
ISTURISA ORAL TABLET 1 MG	\$0 (Tier-3)	PA; QL (240 EA per 30 days); NEDS
ISTURISA ORAL TABLET 10 MG	\$0 (Tier-3)	PA; QL (180 EA per 30 days); NEDS
ISTURISA ORAL TABLET 5 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
KORLYM ORAL TABLET	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
RECORLEV ORAL TABLET	\$0 (Tier-3)	PA; QL (240 EA per 30 days); NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; QL (60 ML per 30 days); NEDS
Cystic Fibrosis		
BRONCHITOL INHALATION CAPSULE	\$0 (Tier-3)	QL (560 EA per 28 days); NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
KALYDECO ORAL PACKET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
KALYDECO ORAL TABLET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL PACKET	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL TABLET	\$0 (Tier-3)	PA; QL (112 EA per 28 days); NEDS
PULMOZYME INHALATION SOLUTION	\$0 (Tier-3)	B vs D; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; NEDS
TOBI PODHALER INHALATION CAPSULE	\$0 (Tier-3)	NEDS
<i>tobramycin inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; QL (84 EA per 28 days); NEDS
Cystinuria		
<i>betaine oral powder</i>	\$0 (Tier-2)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
CYSTADANE ORAL POWDER	\$0 (Tier-3)	NEDS
THIOLA EC ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	NEDS
<i>tiopronin oral tablet</i>	\$0 (Tier-2)	NEDS
Detoxification Agents		
CHEMET ORAL CAPSULE	\$0 (Tier-3)	
<i>deferasirox granules oral packet</i>	\$0 (Tier-2)	NEDS
<i>deferasirox oral tablet</i>	\$0 (Tier-2)	NEDS
<i>deferasirox oral tablet soluble</i>	\$0 (Tier-2)	NEDS
<i>deferiprone oral tablet</i>	\$0 (Tier-2)	NEDS
FERRIPROX ORAL SOLUTION	\$0 (Tier-3)	NEDS
FERRIPROX ORAL TABLET	\$0 (Tier-3)	NEDS
Digital Therapeutics		
RESET FOR IOS OR ANDROID APP	\$0 (Tier-4)	*
RESET-O FOR IOS OR ANDROID APP	\$0 (Tier-4)	*
Duchenne Muscular Dystrophy		
EMFLAZA ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
EMFLAZA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
Fabry Disease		
GALAFOLD ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
Gaucher's Disease		
CERDELGA ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>miglustat oral capsule</i>	\$0 (Tier-2)	PA; NEDS
Growth Hormone Deficiency		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty
GENOTROPIN SUBCUTANEOUS CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty
HUMATROPE INJECTION CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 5 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
SAIZEN INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
Hereditary Angioedema		
BERINERT INTRAVENOUS KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>icatibant acetate subcutaneous solution</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
ORLADEYO ORAL CAPSULE	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
SAJAZIR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
Hereditary Tyrosinemia Type 1		
<i>nitisinone oral capsule</i>	\$0 (Tier-2)	PA; NEDS
NITYR ORAL TABLET	\$0 (Tier-3)	PA; NEDS
ORFADIN ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
ORFADIN ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
Huntington's Chorea		
AUSTEDO ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>tetrabenazine oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
Hyperparathyroidism		
<i>calcitriol oral capsule</i>	\$0 (Tier-2)	
<i>calcitriol oral solution</i>	\$0 (Tier-2)	
<i>cinacalcet hcl oral tablet 30 mg</i>	\$0 (Tier-2)	
<i>cinacalcet hcl oral tablet 60 mg, 90 mg</i>	\$0 (Tier-2)	NEDS
<i>doxercalciferol oral capsule</i>	\$0 (Tier-2)	
<i>paricalcitol oral capsule</i>	\$0 (Tier-2)	
RAYALDEE ORAL CAPSULE EXTENDED RELEASE	\$0 (Tier-3)	
Hypoparathyroidism		
NATPARA SUBCUTANEOUS CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (2 EA per 28 days); NEDS
Lambert-Eaton Myasthenic Syndrome		
FIRDAPSE ORAL TABLET	\$0 (Tier-3)	PA; NEDS
Long-Chain Fatty Acid Oxidation Disorders		
DOJOLVI ORAL LIQUID	\$0 (Tier-3)	NEDS
Multiple Sclerosis		
AUBAGIO ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; NEDS
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	\$0 (Tier-3)	SP-CVS specialty; NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	\$0 (Tier-3)	SP-CVS specialty; NEDS
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	SP-CVS specialty; NEDS
BETASERON SUBCUTANEOUS KIT	\$0 (Tier-3)	SP-CVS specialty; NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
<i>dimethyl fumarate oral capsule delayed release</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
<i>dimethyl fumarate starter pack oral</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
EXTAVIA SUBCUTANEOUS KIT	\$0 (Tier-3)	SP-CVS specialty; NEDS
<i> fingolimod hcl oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty; NEDS
GILENYA ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty; NEDS
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAYZENT ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty; NEDS
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	SP-CVS specialty; NEDS
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	SP-CVS specialty; NEDS
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	SP-CVS specialty; NEDS
VUMERITY ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	SP-CVS specialty; NEDS
Myasthenia Gravis		
<i>pyridostigmine bromide er oral tablet extended release</i>	\$0 (Tier-2)	
<i>pyridostigmine bromide oral solution</i>	\$0 (Tier-2)	
<i>pyridostigmine bromide oral tablet</i>	\$0 (Tier-2)	
Opioid Antagonists		
<i>buprenorphine hcl sublingual tablet sublingual 2 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)
<i>buprenorphine hcl sublingual tablet sublingual 8 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 8-2 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual film 4-1 mg</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg</i>	\$0 (Tier-2)	QL (360 EA per 30 days)
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
LUCEMYRA ORAL TABLET	\$0 (Tier-3)	QL (224 EA per 14 days); NEDS
<i>naloxone hcl injection solution</i>	\$0 (Tier-2)	
<i>naloxone hcl injection solution cartridge</i>	\$0 (Tier-2)	
<i>naloxone hcl injection solution prefilled syringe</i>	\$0 (Tier-2)	
<i>naloxone hcl nasal liquid</i>	\$0 (Tier-2)	QL (4 EA per 30 days)
NARCAN NASAL LIQUID	\$0 (Tier-3)	QL (4 EA per 30 days)
Phenylketonuria		
<i>javygtor oral packet</i>	\$0 (Tier-2)	PA; SP-CVS specialty
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>sapropterin dihydrochloride oral packet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
<i>sapropterin dihydrochloride oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
Pheochromocytoma		
DIBENZYLIN ORAL CAPSULE	\$0 (Tier-3)	
<i>metirosine oral capsule</i>	\$0 (Tier-2)	NEDS
<i>phenoxybenzamine hcl oral capsule</i>	\$0 (Tier-2)	
Phosphate Binders		
AURYXIA ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>calcium acetate (phos binder) oral capsule</i>	\$0 (Tier-2)	
<i>sevelamer carbonate oral packet</i>	\$0 (Tier-2)	
<i>sevelamer carbonate oral tablet</i>	\$0 (Tier-2)	
<i>sevelamer hcl oral tablet</i>	\$0 (Tier-2)	
Potassium Binder		
LOKELMA ORAL PACKET	\$0 (Tier-3)	
<i>sodium polystyrene sulfonate oral powder</i>	\$0 (Tier-2)	
<i>sps oral suspension</i>	\$0 (Tier-2)	
VELTASSA ORAL PACKET	\$0 (Tier-3)	
Primary Periodic Paralysis		
KEVEYIS ORAL TABLET	\$0 (Tier-3)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Smoking Cessation		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>nicotine gum, lozenge, patch</i>	\$0 (Tier-4)	*
NICOTROL INHALATION INHALER	\$0 (Tier-3)	
NICOTROL NS NASAL SOLUTION	\$0 (Tier-3)	
<i>varenicline tartrate oral tablet</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>varenicline tartrate oral tablet therapy pack</i>	\$0 (Tier-2)	QL (53 EA per 28 days)
Spinal Muscular Atrophy		
EVRYSDI ORAL SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; NEDS
Sucrase Deficiency		
SUCRAID ORAL SOLUTION	\$0 (Tier-3)	NEDS
Symptomatic Benign Prostatic Hyperplasia		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>dutasteride oral capsule</i>	\$0 (Tier-2)	
<i>dutasteride-tamsulosin hcl oral capsule</i>	\$0 (Tier-2)	
<i>finasteride oral tablet</i>	\$0 (Tier-2)	
<i>silodosin oral capsule</i>	\$0 (Tier-2)	
<i>tadalafil oral tablet</i>	\$0 (Tier-2)	PA; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	\$0 (Tier-2)	
Tardive Dyskinesia		
INGREZZA ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; NEDS
Topical, Miscellaneous		
PANRETIN EXTERNAL GEL	\$0 (Tier-3)	NEDS
Urea Cycle Disorders		
RAVICTI ORAL LIQUID	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>sodium phenylbutyrate oral powder</i>	\$0 (Tier-2)	NEDS
<i>sodium phenylbutyrate oral tablet</i>	\$0 (Tier-2)	NEDS
Urologic Disorders		
<i>bethanechol chloride oral tablet</i>	\$0 (Tier-2)	
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>desmopressin acetate oral tablet</i>	\$0 (Tier-2)	
<i>desmopressin acetate spray nasal solution</i>	\$0 (Tier-2)	
ELMIRON ORAL CAPSULE	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>fesoterodine fumarate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>flavoxate hcl oral tablet</i>	\$0 (Tier-2)	
JYNARQUE ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>oxybutynin chloride oral syrup</i>	\$0 (Tier-2)	
<i>oxybutynin chloride oral tablet</i>	\$0 (Tier-2)	
OXYTROL FOR WOMEN (OXYBUTYNIN)	\$0 (Tier-4)	*
<i>potassium citrate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>solifenacin succinate oral tablet</i>	\$0 (Tier-2)	
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tolterodine tartrate oral tablet</i>	\$0 (Tier-2)	
<i>tolvaptan oral tablet</i>	\$0 (Tier-2)	NEDS
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>tropium chloride er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tropium chloride oral tablet</i>	\$0 (Tier-2)	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
Wilson's Disease		
<i>penicillamine oral capsule</i>	\$0 (Tier-2)	NEDS
<i>penicillamine oral tablet</i>	\$0 (Tier-2)	
<i>trientine hcl oral capsule</i>	\$0 (Tier-2)	NEDS
Neurological Drugs: Drugs To Treat Brain Problems Like Alzheimers Disease, Seizures, And Headaches		
Alzheimer's Disease		
<i>donepezil hcl oral tablet</i>	\$0 (Tier-2)	
<i>donepezil hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ergoloid mesylates oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide oral solution</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide oral tablet</i>	\$0 (Tier-2)	
<i>memantine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>memantine hcl oral solution</i>	\$0 (Tier-2)	
<i>memantine hcl oral tablet</i>	\$0 (Tier-2)	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	\$0 (Tier-3)	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>rivastigmine tartrate oral capsule</i>	\$0 (Tier-2)	
<i>rivastigmine transdermal patch 24 hour</i>	\$0 (Tier-2)	
Migraine Therapy		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; QL (1 ML per 30 days)
<i>almotriptan malate oral tablet</i>	\$0 (Tier-2)	
<i>dihydroergotamine mesylate nasal solution</i>	\$0 (Tier-2)	NEDS
<i>eletriptan hydrobromide oral tablet</i>	\$0 (Tier-2)	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
<i>frovatriptan succinate oral tablet</i>	\$0 (Tier-2)	
MIGERGOT RECTAL SUPPOSITORY	\$0 (Tier-3)	NEDS
<i>naratriptan hcl oral tablet</i>	\$0 (Tier-2)	
NAYZILAM NASAL SOLUTION	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
<i>rizatriptan benzoate oral tablet</i>	\$0 (Tier-2)	
<i>rizatriptan benzoate oral tablet dispersible</i>	\$0 (Tier-2)	
<i>sumatriptan nasal solution</i>	\$0 (Tier-2)	
<i>sumatriptan succinate oral tablet</i>	\$0 (Tier-2)	
<i>sumatriptan succinate refill subcutaneous solution cartridge</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution auto-injector</i>	\$0 (Tier-2)	
<i>sumatriptan-naproxen sodium oral tablet</i>	\$0 (Tier-2)	
UBRELVY ORAL TABLET	\$0 (Tier-3)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>zolmitriptan nasal solution</i>	\$0 (Tier-2)	
<i>zolmitriptan oral tablet</i>	\$0 (Tier-2)	
<i>zolmitriptan oral tablet dispersible</i>	\$0 (Tier-2)	
Parkinson's Disease		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	NEDS
<i>apomorphine hcl subcutaneous solution cartridge</i>	\$0 (Tier-2)	NEDS
<i>benztropine mesylate oral tablet</i>	\$0 (Tier-2)	PA
<i>bromocriptine mesylate oral capsule</i>	\$0 (Tier-2)	
<i>bromocriptine mesylate oral tablet</i>	\$0 (Tier-2)	
<i>cabergoline oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa er oral tablet extended release</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa oral tablet dispersible</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa-entacapone oral tablet</i>	\$0 (Tier-2)	
DUOPA ENTERAL SUSPENSION	\$0 (Tier-3)	
<i>entacapone oral tablet</i>	\$0 (Tier-2)	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	PA
INBRIJA INHALATION CAPSULE	\$0 (Tier-3)	NEDS
KYNMOBI SUBLINGUAL FILM	\$0 (Tier-3)	NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	QL (30 EA per 30 days)
NOURIANZ ORAL TABLET	\$0 (Tier-3)	QL (30 EA per 30 days); NEDS
ONGENTYS ORAL CAPSULE	\$0 (Tier-3)	
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>pramipexole dihydrochloride oral tablet</i>	\$0 (Tier-2)	
<i>rasagiline mesylate oral tablet</i>	\$0 (Tier-2)	
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>ropinirole hcl oral tablet</i>	\$0 (Tier-2)	
RYTARY ORAL CAPSULE EXTENDED RELEASE	\$0 (Tier-3)	
<i>selegiline hcl oral capsule</i>	\$0 (Tier-2)	
<i>selegiline hcl oral tablet</i>	\$0 (Tier-2)	
<i>tolcapone oral tablet</i>	\$0 (Tier-2)	NEDS
<i>trihexyphenidyl hcl oral solution</i>	\$0 (Tier-2)	PA
<i>trihexyphenidyl hcl oral tablet</i>	\$0 (Tier-2)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Pseudobulbar Affect		
NUEDEXTA ORAL CAPSULE	\$0 (Tier-3)	PA
Seizures		
APTIOM ORAL TABLET	\$0 (Tier-3)	
BANZEL ORAL TABLET	\$0 (Tier-3)	
BRIVIACT ORAL SOLUTION	\$0 (Tier-3)	NEDS
BRIVIACT ORAL TABLET	\$0 (Tier-3)	NEDS
<i>carbamazepine er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>carbamazepine er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>carbamazepine oral suspension</i>	\$0 (Tier-2)	
<i>carbamazepine oral tablet</i>	\$0 (Tier-2)	
<i>carbamazepine oral tablet chewable</i>	\$0 (Tier-2)	
CELONTIN ORAL CAPSULE	\$0 (Tier-3)	
<i>clobazam oral suspension</i>	\$0 (Tier-2)	
<i>clobazam oral tablet</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>clonazepam oral tablet</i>	\$0 (Tier-2)	
<i>clonazepam oral tablet dispersible</i>	\$0 (Tier-2)	
DIACOMIT ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
DIACOMIT ORAL PACKET	\$0 (Tier-3)	PA; NEDS
DIASTAT ACUDIAL RECTAL GEL	\$0 (Tier-3)	
DIASTAT PEDIATRIC RECTAL GEL	\$0 (Tier-3)	
<i>diazepam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>diazepam oral solution</i>	\$0 (Tier-2)	
<i>diazepam oral tablet</i>	\$0 (Tier-2)	
<i>diazepam rectal gel</i>	\$0 (Tier-2)	
DILANTIN INFATABS ORAL TABLET CHEWABLE	\$0 (Tier-3)	
DILANTIN ORAL CAPSULE	\$0 (Tier-3)	
DILANTIN ORAL SUSPENSION	\$0 (Tier-3)	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	\$0 (Tier-2)	
<i>divalproex sodium oral tablet delayed release</i>	\$0 (Tier-2)	
EPIDIOLEX ORAL SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty
<i>epitol oral tablet</i>	\$0 (Tier-2)	
EPRONTIA ORAL SOLUTION	\$0 (Tier-3)	
<i>ethosuximide oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>ethosuximide oral solution</i>	\$0 (Tier-2)	
<i>felbamate oral suspension</i>	\$0 (Tier-2)	
<i>felbamate oral tablet</i>	\$0 (Tier-2)	
FINTEPLA ORAL SOLUTION	\$0 (Tier-3)	PA; NEDS
FYCOMPA ORAL SUSPENSION	\$0 (Tier-3)	
FYCOMPA ORAL TABLET	\$0 (Tier-3)	
<i>gabapentin oral capsule</i>	\$0 (Tier-2)	
<i>gabapentin oral solution</i>	\$0 (Tier-2)	
<i>gabapentin oral tablet</i>	\$0 (Tier-2)	
HORIZANT ORAL TABLET EXTENDED RELEASE	\$0 (Tier-3)	
<i>lacosamide oral solution</i>	\$0 (Tier-2)	
<i>lacosamide oral tablet</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>lamotrigine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>lamotrigine oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet chewable</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-blue oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-green oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-orange oral kit</i>	\$0 (Tier-2)	
<i>levetiracetam er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>levetiracetam oral solution</i>	\$0 (Tier-2)	
<i>levetiracetam oral tablet</i>	\$0 (Tier-2)	
<i>oxcarbazepine oral suspension</i>	\$0 (Tier-2)	
<i>oxcarbazepine oral tablet</i>	\$0 (Tier-2)	
<i>phenobarbital oral elixir</i>	\$0 (Tier-2)	PA
<i>phenobarbital oral tablet</i>	\$0 (Tier-2)	PA
<i>phenytoin oral suspension</i>	\$0 (Tier-2)	
<i>phenytoin oral tablet chewable</i>	\$0 (Tier-2)	
<i>phenytoin sodium extended oral capsule</i>	\$0 (Tier-2)	
<i>pregabalin er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>pregabalin oral capsule</i>	\$0 (Tier-2)	
<i>pregabalin oral solution</i>	\$0 (Tier-2)	
<i>primidone oral tablet</i>	\$0 (Tier-2)	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>roweepra oral tablet</i>	\$0 (Tier-2)	
<i>rufinamide oral suspension</i>	\$0 (Tier-2)	
<i>rufinamide oral tablet</i>	\$0 (Tier-2)	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	\$0 (Tier-3)	
SYMPAZAN ORAL FILM	\$0 (Tier-3)	
<i>tiagabine hcl oral tablet</i>	\$0 (Tier-2)	
<i>topiramate er oral capsule er 24 hour sprinkle</i>	\$0 (Tier-2)	
<i>topiramate oral capsule sprinkle</i>	\$0 (Tier-2)	
<i>topiramate oral tablet</i>	\$0 (Tier-2)	
<i>valproic acid oral capsule</i>	\$0 (Tier-2)	
<i>valproic acid oral solution</i>	\$0 (Tier-2)	
VALTOCO 10 MG DOSE NASAL LIQUID	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
VALTOCO 5 MG DOSE NASAL LIQUID	\$0 (Tier-3)	PA; QL (10 EA per 30 days)
<i>vigabatrin oral packet</i>	\$0 (Tier-2)	NEDS
<i>vigabatrin oral tablet</i>	\$0 (Tier-2)	NEDS
<i>vigadrone oral packet</i>	\$0 (Tier-2)	NEDS
VIMPAT ORAL SOLUTION	\$0 (Tier-3)	
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG	\$0 (Tier-3)	QL (60 EA per 30 days); NEDS
VIMPAT ORAL TABLET 50 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-3)	NEDS
XCOPRI ORAL TABLET	\$0 (Tier-3)	NEDS
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	\$0 (Tier-3)	
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG	\$0 (Tier-3)	NEDS
<i>zonisamide oral capsule</i>	\$0 (Tier-2)	
Spasticity		
<i>baclofen oral tablet</i>	\$0 (Tier-2)	
<i>cyclobenzaprine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>dantrolene sodium oral capsule</i>	\$0 (Tier-2)	
<i>tizanidine hcl oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>tizanidine hcl oral tablet</i>	\$0 (Tier-2)	
Pain And Inflammatory Disease: Drugs To Relieve Pain, Gout Symptoms And Swelling With Arthritis		
Arthritis		
AZASAN ORAL TABLET	\$0 (Tier-3)	B vs D
<i>azathioprine oral tablet</i>	\$0 (Tier-2)	B vs D
<i>capsaicin</i>	\$0 (Tier-4)	*
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	\$0 (Tier-3)	PA; SP-CVS specialty; QL (4 EA per 28 days); NEDS
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-3)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>leflunomide oral tablet</i>	\$0 (Tier-2)	
<i>methotrexate oral tablet</i>	\$0 (Tier-2)	B vs D
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
RIDAURA ORAL CAPSULE	\$0 (Tier-3)	NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-3)	PA; SP-CVS specialty; QL (1 EA per 28 days); NEDS
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (2.4 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TREXALL ORAL TABLET	\$0 (Tier-3)	B vs D
XATMEP ORAL SOLUTION	\$0 (Tier-3)	B vs D
XELJANZ ORAL SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; QL (300 ML per 30 days); NEDS
XELJANZ ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
Gout		
<i>allopurinol oral tablet</i>	\$0 (Tier-2)	
<i>colchicine oral capsule</i>	\$0 (Tier-2)	
<i>colchicine oral tablet</i>	\$0 (Tier-2)	
<i>colchicine-probenecid oral tablet</i>	\$0 (Tier-2)	
<i>febuxostat oral tablet</i>	\$0 (Tier-2)	STPA
<i>probenecid oral tablet</i>	\$0 (Tier-2)	
Pain, Nsaid Analgesics		
<i>acetaminophen crystals</i>	\$0 (Tier-4)	
<i>acetaminophen (all forms and strengths)</i>	\$0 (Tier-4)	*; Acetaminophen less than 4 grams/day
<i>aspirin</i>	\$0 (Tier-4)	*
<i>aspirin with buffers</i>	\$0 (Tier-4)	*

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>celecoxib oral capsule</i>	\$0 (Tier-2)	
<i>diclofenac potassium 50mg oral tablet</i>	\$0 (Tier-2)	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>diclofenac sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>diclofenac-misoprostol oral tablet delayed release</i>	\$0 (Tier-2)	
<i>diflunisal oral tablet</i>	\$0 (Tier-2)	
<i>etodolac er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>etodolac oral capsule</i>	\$0 (Tier-2)	
<i>etodolac oral tablet</i>	\$0 (Tier-2)	
<i>fenoprofen calcium oral capsule</i>	\$0 (Tier-2)	
<i>fenoprofen calcium oral tablet</i>	\$0 (Tier-2)	
<i>flurbiprofen oral tablet</i>	\$0 (Tier-2)	
<i>ibuprofen</i>	\$0 (Tier-4)	*
<i>ibuprofen oral suspension</i>	\$0 (Tier-2)	
<i>ibuprofen oral tablet</i>	\$0 (Tier-2)	
INDOCIN ORAL SUSPENSION	\$0 (Tier-3)	
<i>indomethacin er oral capsule extended release</i>	\$0 (Tier-2)	
<i>indomethacin oral capsule</i>	\$0 (Tier-2)	
<i>ketoprofen er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>ketoprofen oral capsule</i>	\$0 (Tier-2)	
<i>meclofenamate sodium oral capsule</i>	\$0 (Tier-2)	
<i>mefenamic acid oral capsule</i>	\$0 (Tier-2)	
<i>meloxicam oral capsule</i>	\$0 (Tier-2)	
<i>meloxicam oral tablet</i>	\$0 (Tier-2)	
<i>nabumetone oral tablet</i>	\$0 (Tier-2)	
<i>naproxen oral suspension</i>	\$0 (Tier-2)	
<i>naproxen oral tablet</i>	\$0 (Tier-2)	
<i>naproxen oral tablet delayed release</i>	\$0 (Tier-2)	
<i>naproxen sodium er oral tablet extended release 24 hour 375 mg</i>	\$0 (Tier-2)	
<i>naproxen sodium er oral tablet extended release 24 hour 500 mg</i>	\$0 (Tier-2)	NEDS
<i>naproxen capsule, tablet</i>	\$0 (Tier-4)	*
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	\$0 (Tier-2)	
<i>oxaprozin oral tablet</i>	\$0 (Tier-2)	
<i>piroxicam oral capsule</i>	\$0 (Tier-2)	
<i>sulindac oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
Pain, Opioid And Other Analgesics		
<i>acetaminophen-codeine #3 oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>acetaminophen-codeine oral solution</i>	\$0 (Tier-2)	QL (3600 ML per 30 days)
<i>acetaminophen-codeine oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
ACTIQ BUCCAL LOZENGE ON A HANDLE	\$0 (Tier-3)	PA; QL (120 EA per 30 days); NEDS
BELBUCA BUCCAL FILM	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>buprenorphine transdermal patch weekly</i>	\$0 (Tier-2)	QL (4 EA per 28 days)
<i>butorphanol tartrate nasal solution</i>	\$0 (Tier-2)	QL (7.5 ML per 30 days)
<i>codeine sulfate oral tablet</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>endocet oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 400 mcg, 600 mcg, 800 mcg</i>	\$0 (Tier-2)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl citrate buccal lozenge on a handle 200 mcg</i>	\$0 (Tier-2)	PA; QL (120 EA per 30 days)
<i>fentanyl citrate buccal tablet</i>	\$0 (Tier-2)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl 12 mcg/hr, 25 mcg/hr, 50mg/hr, 75 mg/hr, 100 mg/hr transdermal patch</i>	\$0 (Tier-2)	QL (10 EA per 30 days)
<i>hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>hydrocodone-acetaminophen oral solution</i>	\$0 (Tier-2)	QL (3600 ML per 30 days)
<i>hydrocodone-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>hydrocodone-ibuprofen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>hydromorphone hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>hydromorphone hcl oral liquid</i>	\$0 (Tier-2)	QL (1350 ML per 30 days)
<i>hydromorphone hcl oral tablet 2 mg, 4 mg</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>hydromorphone hcl oral tablet 8 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>levorphanol tartrate oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days); NEDS
<i>methadone hcl oral solution 10 mg/5ml</i>	\$0 (Tier-2)	QL (600 ML per 30 days)
<i>methadone hcl oral solution 5 mg/5ml</i>	\$0 (Tier-2)	QL (1200 ML per 30 days)
<i>methadone hcl oral tablet</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>morphine sulfate (concentrate) oral solution</i>	\$0 (Tier-2)	QL (180 ML per 30 days)
<i>morphine sulfate er beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>morphine sulfate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>morphine sulfate er oral tablet extended release</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>morphine sulfate oral solution</i>	\$0 (Tier-2)	QL (900 ML per 30 days)
<i>morphine sulfate oral tablet</i>	\$0 (Tier-2)	QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrent</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>oxycodone hcl oral capsule</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>oxycodone hcl oral concentrate</i>	\$0 (Tier-2)	QL (120 ML per 30 days)
<i>oxycodone hcl oral solution</i>	\$0 (Tier-2)	QL (2400 ML per 30 days)
<i>oxycodone hcl oral tablet 10 mg, 15 mg</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>oxycodone hcl oral tablet 20 mg, 30 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>oxycodone hcl oral tablet 5 mg</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>oxycodone-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>oxymorphone hcl oral tablet</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl oral tablet 100 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>tramadol hcl oral tablet 50 mg</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
Psychiatric: Drugs That Treat Mental Health Conditions Like Add/Adhd, Depression, And Insomnia		
Alcohol Deterrents		
<i>acamprosate calcium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>disulfiram oral tablet</i>	\$0 (Tier-2)	
<i>naltrexone hcl oral tablet</i>	\$0 (Tier-2)	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty; NEDS
Anxiety		
<i>alprazolam er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>alprazolam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>alprazolam oral tablet</i>	\$0 (Tier-2)	
<i>alprazolam oral tablet dispersible</i>	\$0 (Tier-2)	
<i>bupirone hcl oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>chlordiazepoxide-amitriptyline oral tablet</i>	\$0 (Tier-2)	
<i>clorazepate dipotassium oral tablet</i>	\$0 (Tier-2)	
<i>lorazepam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>lorazepam oral tablet</i>	\$0 (Tier-2)	
<i>oxazepam oral capsule</i>	\$0 (Tier-2)	
Attention Deficit Disorder		
<i>amphetamine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>amphetamine-dextroamphetamine er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>amphetamine-dextroamphetamine oral tablet</i>	\$0 (Tier-2)	
<i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>atomoxetine hcl oral capsule 100 mg, 80 mg</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>clonidine hcl er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
DESOXYN ORAL TABLET	\$0 (Tier-3)	PA
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>dexmethylphenidate hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>dexmethylphenidate hcl oral tablet</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate oral solution</i>	\$0 (Tier-2)	
<i>dextroamphetamine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>guanfacine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (90 EA per 90 days)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>methamphetamine hcl oral tablet</i>	\$0 (Tier-2)	PA
METHYLIN ORAL SOLUTION	\$0 (Tier-3)	
<i>methylphenidate hcl er (cd) oral capsule extended release</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er (osm) oral tablet extended release</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>methylphenidate hcl oral solution</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>methylphenidate hcl oral tablet</i>	\$0 (Tier-2)	
<i>methylphenidate hcl oral tablet chewable</i>	\$0 (Tier-2)	
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	
<i>relexxii oral tablet extended release</i>	\$0 (Tier-2)	
VYVANSE ORAL CAPSULE	\$0 (Tier-3)	PA
VYVANSE ORAL TABLET CHEWABLE	\$0 (Tier-3)	PA
Bipolar Disorder		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-3)	
<i>lithium carbonate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>lithium carbonate oral capsule</i>	\$0 (Tier-2)	
<i>lithium carbonate oral tablet</i>	\$0 (Tier-2)	
<i>olanzapine-fluoxetine hcl oral capsule</i>	\$0 (Tier-2)	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	
<i>risperidone oral solution</i>	\$0 (Tier-2)	
<i>risperidone oral tablet</i>	\$0 (Tier-2)	
<i>risperidone oral tablet dispersible</i>	\$0 (Tier-2)	
Depression		
<i>amitriptyline hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>amoxapine oral tablet</i>	\$0 (Tier-2)	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG	\$0 (Tier-3)	STPA
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 522 MG	\$0 (Tier-3)	STPA; NEDS
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl oral tablet</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral capsule</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral solution</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral tablet</i>	\$0 (Tier-2)	
<i>clomipramine hcl oral capsule</i>	\$0 (Tier-2)	PA
<i>desipramine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desvenlafaxine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>desvenlafaxine succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>doxepin hcl oral capsule</i>	\$0 (Tier-2)	
<i>doxepin hcl oral concentrate</i>	\$0 (Tier-2)	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	\$0 (Tier-3)	QL (90 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg, 40 mg</i>	\$0 (Tier-2)	QL (90 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	STPA; NEDS
<i>escitalopram oxalate oral solution</i>	\$0 (Tier-2)	
<i>escitalopram oxalate oral tablet</i>	\$0 (Tier-2)	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	STPA
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	\$0 (Tier-3)	STPA
<i>fluoxetine hcl (pmd) oral tablet</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral capsule</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral capsule delayed release</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral solution</i>	\$0 (Tier-2)	
<i>fluoxetine hcl oral tablet</i>	\$0 (Tier-2)	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>fluvoxamine maleate oral tablet</i>	\$0 (Tier-2)	
<i>imipramine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>imipramine pamoate oral capsule</i>	\$0 (Tier-2)	PA
MARPLAN ORAL TABLET	\$0 (Tier-3)	
<i>mirtazapine oral tablet</i>	\$0 (Tier-2)	
<i>mirtazapine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>nefazodone hcl oral tablet</i>	\$0 (Tier-2)	
<i>nortriptyline hcl oral capsule</i>	\$0 (Tier-2)	
<i>nortriptyline hcl oral solution</i>	\$0 (Tier-2)	
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>paroxetine hcl oral suspension</i>	\$0 (Tier-2)	
<i>paroxetine hcl oral tablet</i>	\$0 (Tier-2)	
<i>paroxetine mesylate oral capsule</i>	\$0 (Tier-2)	
PAXIL ORAL SUSPENSION	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
PEXEVA ORAL TABLET	\$0 (Tier-3)	STPA
<i>phenelzine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>protriptyline hcl oral tablet</i>	\$0 (Tier-2)	
<i>sertraline hcl oral concentrate</i>	\$0 (Tier-2)	
<i>sertraline hcl oral tablet</i>	\$0 (Tier-2)	
<i>tranylcypromine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>trazodone hcl oral tablet</i>	\$0 (Tier-2)	
<i>trimipramine maleate oral capsule</i>	\$0 (Tier-2)	PA
TRINTELLIX ORAL TABLET	\$0 (Tier-3)	
<i>venlafaxine besylate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>venlafaxine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>venlafaxine hcl oral tablet</i>	\$0 (Tier-2)	
VIIBRYD ORAL TABLET	\$0 (Tier-3)	
VIIBRYD STARTER PACK ORAL KIT	\$0 (Tier-3)	
<i>vilazodone hcl oral tablet</i>	\$0 (Tier-2)	
Insomnia		
BELSOMRA ORAL TABLET	\$0 (Tier-3)	
DAYVIGO ORAL TABLET	\$0 (Tier-3)	
<i>doxepin hcl oral tablet</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>estazolam oral tablet</i>	\$0 (Tier-2)	
<i>eszopiclone oral tablet</i>	\$0 (Tier-2)	
<i>flurazepam hcl oral capsule</i>	\$0 (Tier-2)	
HETLIOZ LQ ORAL SUSPENSION	\$0 (Tier-3)	PA; NEDS
HETLIOZ ORAL CAPSULE	\$0 (Tier-3)	PA; NEDS
<i>ramelteon oral tablet</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>temazepam oral capsule</i>	\$0 (Tier-2)	
<i>triazolam oral tablet</i>	\$0 (Tier-2)	
<i>zaleplon oral capsule</i>	\$0 (Tier-2)	
<i>zolpidem tartrate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>zolpidem tartrate oral tablet</i>	\$0 (Tier-2)	
<i>zolpidem tartrate sublingual tablet sublingual</i>	\$0 (Tier-2)	
Narcolepsy		
<i>armodafinil oral tablet</i>	\$0 (Tier-2)	PA
<i>modafinil oral tablet</i>	\$0 (Tier-2)	PA
SUNOSI ORAL TABLET	\$0 (Tier-3)	PA

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
WAKIX ORAL TABLET	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
XYREM ORAL SOLUTION	\$0 (Tier-3)	LA; NEDS
XYWAV ORAL SOLUTION	\$0 (Tier-3)	NEDS
Psychoses		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	NEDS
ABILIFY MYCITE ORAL TABLET	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
<i>aripiprazole oral solution</i>	\$0 (Tier-2)	
<i>aripiprazole oral tablet</i>	\$0 (Tier-2)	
<i>aripiprazole oral tablet dispersible</i>	\$0 (Tier-2)	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
<i>asenapine maleate sublingual tablet sublingual</i>	\$0 (Tier-2)	STPA
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG	\$0 (Tier-3)	PA; NEDS
CAPLYTA ORAL CAPSULE 42 MG	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
<i>chlorpromazine hcl oral concentrate</i>	\$0 (Tier-2)	
<i>chlorpromazine hcl oral tablet</i>	\$0 (Tier-2)	
<i>clozapine oral tablet</i>	\$0 (Tier-2)	
<i>clozapine oral tablet dispersible</i>	\$0 (Tier-2)	
FANAPT ORAL TABLET	\$0 (Tier-3)	STPA
FANAPT TITRATION PACK ORAL TABLET	\$0 (Tier-3)	STPA
<i>fluphenazine decanoate injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral concentrate</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral elixir</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral tablet</i>	\$0 (Tier-2)	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>haloperidol decanoate intramuscular solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate injection solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate oral concentrate</i>	\$0 (Tier-2)	
<i>haloperidol oral tablet</i>	\$0 (Tier-2)	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	\$0 (Tier-3)	NEDS
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	\$0 (Tier-3)	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	\$0 (Tier-3)	QL (30 EA per 30 days)
LATUDA ORAL TABLET 80 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>loxapine succinate oral capsule</i>	\$0 (Tier-2)	
LYBALVI ORAL TABLET	\$0 (Tier-3)	PA; NEDS
<i>molindone hcl oral tablet</i>	\$0 (Tier-2)	
NUPLAZID ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
NUPLAZID ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>olanzapine intramuscular solution reconstituted</i>	\$0 (Tier-2)	
<i>olanzapine oral tablet</i>	\$0 (Tier-2)	
<i>olanzapine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>paliperidone er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>perphenazine oral tablet</i>	\$0 (Tier-2)	
<i>perphenazine-amitriptyline oral tablet</i>	\$0 (Tier-2)	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	\$0 (Tier-3)	NEDS
<i>pimozide oral tablet</i>	\$0 (Tier-2)	
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	\$0 (Tier-2)	
<i>quetiapine fumarate oral tablet 25 mg, 50 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
REXULTI ORAL TABLET	\$0 (Tier-3)	NEDS
SECUADO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-3)	NEDS
<i>thioridazine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>thiothixene oral capsule</i>	\$0 (Tier-2)	
<i>trifluoperazine hcl oral tablet</i>	\$0 (Tier-2)	
VERSACLOZ ORAL SUSPENSION	\$0 (Tier-3)	NEDS
VRAYLAR ORAL CAPSULE	\$0 (Tier-3)	NEDS
VRAYLAR ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>ziprasidone hcl oral capsule</i>	\$0 (Tier-2)	
<i>ziprasidone mesylate intramuscular solution reconstituted</i>	\$0 (Tier-2)	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-3)	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
Respiratory Drugs: Drugs That Treat Lung Problems Like Asthma And Copd		
Asthma		
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/lact</i>	\$0 (Tier-2)	QL (51 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/lact (nda020503)</i>	\$0 (Tier-2)	QL (40.2 GM per 90 days)
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/lact (nda020983)</i>	\$0 (Tier-2)	QL (108 GM per 90 days)
<i>albuterol sulfate inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>albuterol sulfate oral syrup</i>	\$0 (Tier-2)	
<i>albuterol sulfate oral tablet</i>	\$0 (Tier-2)	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>arformoterol tartrate inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
ATROVENT HFA INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (77.4 GM per 90 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
BREZTRI AEROSPHERE INHALATION AEROSOL	\$0 (Tier-3)	QL (32.1 GM per 90 days)
BROVANA INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D
<i>budesonide inhalation suspension</i>	\$0 (Tier-2)	B vs D
<i>budesonide-formoterol fumarate inhalation aerosol</i>	\$0 (Tier-2)	QL (30.6 GM per 90 days)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (24 GM per 90 days)
<i>cromolyn sodium inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</i>	\$0 (Tier-2)	QL (180 EA per 90 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	\$0 (Tier-2)	QL (3 EA per 90 days)
<i>formoterol fumarate inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>ipratropium bromide inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>ipratropium-albuterol inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol hcl inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol tartrate inhalation aerosol</i>	\$0 (Tier-2)	QL (90 GM per 90 days)
<i>montelukast sodium oral packet</i>	\$0 (Tier-2)	
<i>montelukast sodium oral tablet</i>	\$0 (Tier-2)	
<i>montelukast sodium oral tablet chewable</i>	\$0 (Tier-2)	
PERFORMIST INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (6 EA per 90 days)
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED	\$0 (Tier-3)	QL (63.6 GM per 90 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>sodium chloride for inhalation</i>	\$0 (Tier-4)	*
SPIRIVA HANDHALER INHALATION CAPSULE	\$0 (Tier-3)	QL (90 EA per 90 days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (12 GM per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (180 GM per 90 days)
<i>terbutaline sulfate oral tablet</i>	\$0 (Tier-2)	
<i>theophylline er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>theophylline er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>theophylline oral solution</i>	\$0 (Tier-2)	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>wixela inhub inhalation aerosol powder breath activated</i>	\$0 (Tier-2)	QL (180 EA per 90 days)

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
YUPELRI INHALATION SOLUTION	\$0 (Tier-3)	B vs D; NEDS
<i>zafirlukast oral tablet</i>	\$0 (Tier-2)	
<i>zileuton er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	NEDS
Idiopathic Pulmonary Fibrosis		
ESBRIET ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 267 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 801 MG	\$0 (Tier-3)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
OFEV ORAL CAPSULE	\$0 (Tier-3)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>pirfenidone oral tablet 267 mg</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
<i>pirfenidone oral tablet 801 mg</i>	\$0 (Tier-2)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
Pulmonary Hypertension		
ADEMPAS ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>alyq oral tablet</i>	\$0 (Tier-2)	PA; NEDS
<i>ambrisentan oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
<i>bosentan oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
OPSUMIT ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG	\$0 (Tier-3)	PA; SP-CVS specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral suspension reconstituted</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
<i>sildenafil citrate oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty
<i>tadalafil (pah) oral tablet</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
TRACLEER ORAL TABLET SOLUBLE	\$0 (Tier-3)	PA; LA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET THERAPY PACK	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VENTAVIS INHALATION SOLUTION	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
Respiratory Drugs, Miscellaneous		
<i>acetylcysteine inhalation solution</i>	\$0 (Tier-2)	B vs D
BEVESPI AEROSPHERE INHALATION AEROSOL	\$0 (Tier-3)	QL (10.7 GM per 30 days)
DALIRESP ORAL TABLET	\$0 (Tier-3)	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-3)	PA
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	NEDS
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

Skin: Drugs That Treat Skin Conditions Like Acne, Infections, And Itchy Skin

Acne Rosacea

<i>azelaic acid external gel</i>	\$0 (Tier-2)	
<i>metronidazole external cream</i>	\$0 (Tier-2)	
<i>metronidazole external gel</i>	\$0 (Tier-2)	
<i>metronidazole external lotion</i>	\$0 (Tier-2)	

Acne Vulgaris

<i>acutane oral capsule</i>	\$0 (Tier-2)	
<i>adapalene external cream</i>	\$0 (Tier-2)	PA
<i>adapalene external gel</i>	\$0 (Tier-2)	PA
<i>adapalene-benzoyl peroxide external gel</i>	\$0 (Tier-2)	PA
<i>amnesteam oral capsule</i>	\$0 (Tier-2)	
ATRALIN EXTERNAL GEL	\$0 (Tier-3)	PA
<i>avita external cream</i>	\$0 (Tier-2)	PA
<i>avita external gel</i>	\$0 (Tier-2)	PA
AZELEX EXTERNAL CREAM	\$0 (Tier-3)	
<i>benzoyl peroxide</i>	\$0 (Tier-4)	*; < 22 years
<i>benzoyl peroxide-erythromycin external gel</i>	\$0 (Tier-2)	
<i>claravis oral capsule</i>	\$0 (Tier-2)	
<i>clindamycin phos-benzoyl perox external gel</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external foam</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external gel</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external lotion</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external solution</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external swab</i>	\$0 (Tier-2)	
<i>ery external pad</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>erythromycin external gel</i>	\$0 (Tier-2)	
<i>erythromycin external solution</i>	\$0 (Tier-2)	
EVOCLIN EXTERNAL FOAM	\$0 (Tier-3)	
FABIOR EXTERNAL FOAM	\$0 (Tier-3)	PA
<i>isotretinoin oral capsule</i>	\$0 (Tier-2)	
RETIN-A EXTERNAL CREAM	\$0 (Tier-3)	PA
RETIN-A EXTERNAL GEL	\$0 (Tier-3)	PA
RETIN-A MICRO EXTERNAL GEL	\$0 (Tier-3)	PA
RETIN-A MICRO PUMP EXTERNAL GEL	\$0 (Tier-3)	PA
<i>tazarotene external foam</i>	\$0 (Tier-2)	PA
<i>tretinoin external cream</i>	\$0 (Tier-2)	PA
<i>tretinoin external gel</i>	\$0 (Tier-2)	PA
<i>tretinoin microsphere external gel</i>	\$0 (Tier-2)	PA
WINLEVI EXTERNAL CREAM	\$0 (Tier-3)	PA
Bacterial Infections, Topical		
<i>gentamicin sulfate external cream</i>	\$0 (Tier-2)	
<i>gentamicin sulfate external ointment</i>	\$0 (Tier-2)	
<i>mupirocin calcium external cream</i>	\$0 (Tier-2)	QL (180 GM per 30 days)
<i>mupirocin external ointment</i>	\$0 (Tier-2)	QL (44 GM per 30 days)
<i>silver sulfadiazine external cream</i>	\$0 (Tier-2)	
<i>ssd external cream</i>	\$0 (Tier-2)	
Corticosteroids, Topical		
ALA SCALP EXTERNAL LOTION	\$0 (Tier-3)	
<i>ala-cort external cream</i>	\$0 (Tier-2)	
<i>alclometasone dipropionate external cream</i>	\$0 (Tier-2)	
<i>alclometasone dipropionate external ointment</i>	\$0 (Tier-2)	
<i>amcinonide external cream</i>	\$0 (Tier-2)	
<i>amcinonide external lotion</i>	\$0 (Tier-2)	
<i>amcinonide external ointment</i>	\$0 (Tier-2)	
APEXICON E EXTERNAL CREAM	\$0 (Tier-3)	
<i>betamethasone dipropionate aug external cream</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external gel</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external lotion</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate aug external ointment</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external cream</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external lotion</i>	\$0 (Tier-2)	
<i>betamethasone dipropionate external ointment</i>	\$0 (Tier-2)	
<i>betamethasone valerate external cream</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>betamethasone valerate external foam</i>	\$0 (Tier-2)	
<i>betamethasone valerate external lotion</i>	\$0 (Tier-2)	
<i>betamethasone valerate external ointment</i>	\$0 (Tier-2)	
CAPEX EXTERNAL SHAMPOO	\$0 (Tier-3)	
<i>clobetasol propionate e external cream</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate emulsion external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>clobetasol propionate external cream</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>clobetasol propionate external gel</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external liquid</i>	\$0 (Tier-2)	QL (250 ML per 30 days)
<i>clobetasol propionate external lotion</i>	\$0 (Tier-2)	QL (236 ML per 30 days)
<i>clobetasol propionate external ointment</i>	\$0 (Tier-2)	QL (240 GM per 30 days)
<i>clobetasol propionate external shampoo</i>	\$0 (Tier-2)	QL (236 ML per 30 days)
<i>clobetasol propionate external solution</i>	\$0 (Tier-2)	QL (200 ML per 30 days)
<i>clocortolone pivalate external cream</i>	\$0 (Tier-2)	
<i>clodan external shampoo</i>	\$0 (Tier-2)	
CORDRAN EXTERNAL TAPE	\$0 (Tier-3)	
<i>desonide external cream</i>	\$0 (Tier-2)	
<i>desonide external gel</i>	\$0 (Tier-2)	
<i>desonide external lotion</i>	\$0 (Tier-2)	
<i>desonide external ointment</i>	\$0 (Tier-2)	
<i>desoximetasone external cream</i>	\$0 (Tier-2)	
<i>desoximetasone external gel</i>	\$0 (Tier-2)	
<i>desoximetasone external liquid</i>	\$0 (Tier-2)	
<i>desoximetasone external ointment</i>	\$0 (Tier-2)	
<i>desrx external gel</i>	\$0 (Tier-2)	
<i>diflorasone diacetate external cream</i>	\$0 (Tier-2)	
<i>diflorasone diacetate external ointment</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external cream</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external ointment</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide external solution</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide scalp external oil</i>	\$0 (Tier-2)	
<i>fluocinonide emulsified base external cream</i>	\$0 (Tier-2)	
<i>fluocinonide external cream 0.05 %</i>	\$0 (Tier-2)	
<i>fluocinonide external cream 0.1 %</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>fluocinonide external gel</i>	\$0 (Tier-2)	
<i>fluocinonide external ointment</i>	\$0 (Tier-2)	
<i>fluocinonide external solution</i>	\$0 (Tier-2)	
<i>flurandrenolide external cream</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>flurandrenolide external lotion</i>	\$0 (Tier-2)	
<i>fluticasone propionate external cream</i>	\$0 (Tier-2)	
<i>fluticasone propionate external lotion</i>	\$0 (Tier-2)	
<i>fluticasone propionate external ointment</i>	\$0 (Tier-2)	
<i>halcinonide external cream</i>	\$0 (Tier-2)	
<i>halobetasol propionate external cream</i>	\$0 (Tier-2)	
<i>halobetasol propionate external ointment</i>	\$0 (Tier-2)	
HALOG EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>hydrocortisone butyrate external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external lotion</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external ointment</i>	\$0 (Tier-2)	
<i>hydrocortisone butyrate external solution</i>	\$0 (Tier-2)	
<i>hydrocortisone external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone external lotion</i>	\$0 (Tier-2)	
<i>hydrocortisone external ointment</i>	\$0 (Tier-2)	
<i>hydrocortisone cream, lotion, ointment</i>	\$0 (Tier-4)	*
<i>hydrocortisone valerate external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone valerate external ointment</i>	\$0 (Tier-2)	
KENALOG EXTERNAL AEROSOL SOLUTION	\$0 (Tier-3)	
<i>mometasone furoate external cream</i>	\$0 (Tier-2)	
<i>mometasone furoate external ointment</i>	\$0 (Tier-2)	
<i>mometasone furoate external solution</i>	\$0 (Tier-2)	
PANDEL EXTERNAL CREAM	\$0 (Tier-3)	
<i>prednicarbate external ointment</i>	\$0 (Tier-2)	
<i>tovet external foam</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external cream</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external lotion</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external ointment</i>	\$0 (Tier-2)	
TRIANEX EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>triderm external cream</i>	\$0 (Tier-2)	
<i>tritocin external ointment</i>	\$0 (Tier-2)	
Fungal Infections, Topical		
<i>ciclopirox external gel</i>	\$0 (Tier-2)	
<i>ciclopirox external shampoo</i>	\$0 (Tier-2)	
<i>ciclopirox external solution</i>	\$0 (Tier-2)	
<i>ciclopirox olamine external cream</i>	\$0 (Tier-2)	
<i>ciclopirox olamine external suspension</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>clotrimazole external cream</i>	\$0 (Tier-2)	
<i>clotrimazole external solution</i>	\$0 (Tier-2)	
<i>clotrimazole-betamethasone external cream</i>	\$0 (Tier-2)	
<i>clotrimazole-betamethasone external lotion</i>	\$0 (Tier-2)	
<i>econazole nitrate external cream</i>	\$0 (Tier-2)	
<i>ketoconazole external cream</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>ketoconazole external foam</i>	\$0 (Tier-2)	
<i>ketoconazole external shampoo</i>	\$0 (Tier-2)	
<i>ketodan external foam</i>	\$0 (Tier-2)	
<i>luliconazole external cream</i>	\$0 (Tier-2)	
MENTAX EXTERNAL CREAM	\$0 (Tier-3)	
<i>naftifine hcl external cream</i>	\$0 (Tier-2)	
<i>nyamyc external powder</i>	\$0 (Tier-2)	
<i>nystatin external cream</i>	\$0 (Tier-2)	
<i>nystatin external ointment</i>	\$0 (Tier-2)	
<i>nystatin external powder</i>	\$0 (Tier-2)	
<i>nystatin mouth/throat suspension</i>	\$0 (Tier-2)	
<i>nystatin-triamcinolone external cream</i>	\$0 (Tier-2)	
<i>nystatin-triamcinolone external ointment</i>	\$0 (Tier-2)	
<i>nystop external powder</i>	\$0 (Tier-2)	
<i>oxiconazole nitrate external cream</i>	\$0 (Tier-2)	QL (90 GM per 30 days)
Psoriasis And Seborrhea		
<i>acitretin oral capsule</i>	\$0 (Tier-2)	
<i>calcipotriene external cream</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	\$0 (Tier-2)	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	\$0 (Tier-2)	QL (120 ML per 30 days)
<i>calcipotriene-betameth diprop external ointment</i>	\$0 (Tier-2)	
<i>calcipotriene-betameth diprop external suspension</i>	\$0 (Tier-2)	NEDS
<i>calcitriol external ointment</i>	\$0 (Tier-2)	
<i>methoxsalen rapid oral capsule</i>	\$0 (Tier-2)	NEDS
<i>tazarotene external cream</i>	\$0 (Tier-2)	PA
<i>tazarotene external gel</i>	\$0 (Tier-2)	PA
TAZORAC EXTERNAL CREAM	\$0 (Tier-3)	PA
TAZORAC EXTERNAL GEL	\$0 (Tier-3)	PA
Scabies And Pediculosis		
CROTAN EXTERNAL LOTION	\$0 (Tier-3)	
<i>ivermectin external cream</i>	\$0 (Tier-2)	
<i>malathion external lotion</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>permethrin external cream</i>	\$0 (Tier-2)	
<i>permethrin</i>	\$0 (Tier-4)	*
<i>piperonyl butoxidel/pyrethrins</i>	\$0 (Tier-4)	*
Topical Antimicrobials		
<i>bacitracin</i>	\$0 (Tier-4)	*
<i>chlorhexidine gluconate</i>	\$0 (Tier-4)	*
<i>clotrimazole</i>	\$0 (Tier-4)	*
<i>double antibiotic ointment</i>	\$0 (Tier-4)	*
<i>hydrogen peroxide</i>	\$0 (Tier-4)	*
<i>iodine</i>	\$0 (Tier-4)	*
<i>isopropyl alcohol</i>	\$0 (Tier-4)	*
<i>miconazole</i>	\$0 (Tier-4)	*
<i>neomycin</i>	\$0 (Tier-4)	*
<i>povidone</i>	\$0 (Tier-4)	*
<i>tolnaftate</i>	\$0 (Tier-4)	*
<i>triple antibiotic ointment</i>	\$0 (Tier-4)	*
Topical, Miscellaneous		
<i>ammonium lactate external cream</i>	\$0 (Tier-2)	
<i>ammonium lactate external lotion</i>	\$0 (Tier-2)	
ANUSOL-HC EXTERNAL CREAM	\$0 (Tier-3)	
<i>bexarotene external gel</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
<i>calamine lotion</i>	\$0 (Tier-4)	*
<i>colloidal oatmeal</i>	\$0 (Tier-4)	*
<i>diclofenac epolamine external patch</i>	\$0 (Tier-2)	PA; QL (60 EA per 30 days)
<i>diclofenac sodium external gel 1 %</i>	\$0 (Tier-2)	QL (960 GM per 30 days)
<i>diclofenac sodium external gel 3 %</i>	\$0 (Tier-2)	QL (200 GM per 30 days)
<i>diclofenac sodium external solution</i>	\$0 (Tier-2)	QL (300 ML per 30 days)
<i>doxepin hcl external cream</i>	\$0 (Tier-2)	QL (90 GM per 30 days); NEDS
EUCRISA EXTERNAL OINTMENT	\$0 (Tier-3)	PA
<i>fluorouracil external cream</i>	\$0 (Tier-2)	
<i>fluorouracil external solution</i>	\$0 (Tier-2)	
<i>hydrocortisone ace-pramoxine external cream</i>	\$0 (Tier-2)	
<i>hydrophilic ointment</i>	\$0 (Tier-4)	*
HYFTOR EXTERNAL GEL	\$0 (Tier-3)	PA; NEDS
KLISYRI EXTERNAL OINTMENT	\$0 (Tier-3)	PA; NEDS
<i>lanolin</i>	\$0 (Tier-4)	*
<i>lidocaine external ointment</i>	\$0 (Tier-2)	QL (100 GM per 30 days)
<i>lidocaine external patch</i>	\$0 (Tier-2)	PA; QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>lidocaine hcl external solution</i>	\$0 (Tier-2)	QL (100 ML per 30 days)
<i>lidocaine viscous hcl mouth/throat solution</i>	\$0 (Tier-2)	
<i>lidocaine-prilocaine external cream</i>	\$0 (Tier-2)	QL (60 GM per 30 days)
<i>mafenide acetate external packet</i>	\$0 (Tier-2)	
<i>petrolatum</i>	\$0 (Tier-4)	*
<i>pimecrolimus external cream</i>	\$0 (Tier-2)	
<i>procto-med hc external cream</i>	\$0 (Tier-2)	
<i>procto-pak external cream</i>	\$0 (Tier-2)	
<i>proctosol hc external cream</i>	\$0 (Tier-2)	
<i>proctozone-hc external cream</i>	\$0 (Tier-2)	
PRUDOXIN EXTERNAL CREAM	\$0 (Tier-3)	QL (90 GM per 30 days)
RECTIV RECTAL OINTMENT	\$0 (Tier-3)	QL (30 GM per 30 days)
REGRANEX EXTERNAL GEL	\$0 (Tier-3)	
SANTYL EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>selenium sulfide external lotion</i>	\$0 (Tier-2)	
<i>selenium sulfide</i>	\$0 (Tier-4)	*
<i>sodium chloride irrigation solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium (acne) external lotion</i>	\$0 (Tier-2)	
SULFAMYLON EXTERNAL CREAM	\$0 (Tier-3)	
<i>tacrolimus external ointment</i>	\$0 (Tier-2)	
TARGETIN EXTERNAL GEL	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
VALCHLOR EXTERNAL GEL	\$0 (Tier-3)	NEDS
<i>vitamin a and d ointment</i>	\$0 (Tier-4)	*
<i>witch hazel</i>	\$0 (Tier-4)	*
<i>zinc oxide</i>	\$0 (Tier-4)	*
Viral Infections, Topical		
<i>acyclovir external cream</i>	\$0 (Tier-2)	
CONDYLOX EXTERNAL GEL	\$0 (Tier-3)	
DENAVIR EXTERNAL CREAM	\$0 (Tier-3)	NEDS
<i>imiquimod external cream</i>	\$0 (Tier-2)	
<i>podofilox external solution</i>	\$0 (Tier-2)	
Supplements: Vitamins And Minerals You Need To Stay Healthy		
Vitamins/ Nutrients/Supplements		
<i>calcium replacement</i>	\$0 (Tier-4)	*
<i>cod liver oil</i>	\$0 (Tier-4)	*
<i>coenzyme q10</i>	\$0 (Tier-4)	*
<i>electrolyte solution, pediatric</i>	\$0 (Tier-4)	*

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>ferrous fumarate</i>	\$0 (Tier-4)	*
<i>ferrous gluconate</i>	\$0 (Tier-4)	*
<i>ferrous sulfate</i>	\$0 (Tier-4)	*
<i>folic acid</i>	\$0 (Tier-4)	*
<i>glucose products</i>	\$0 (Tier-4)	*, < 19 years
<i>magnesium salts</i>	\$0 (Tier-4)	*
<i>melatonin tablet, solution</i>	\$0 (Tier-4)	*
<i>melatonin/pyridoxine tablet</i>	\$0 (Tier-4)	*
<i>multivitamins</i>	\$0 (Tier-4)	*
<i>niacinamide</i>	\$0 (Tier-4)	*
<i>nicotinic acid</i>	\$0 (Tier-4)	*
<i>pediatric multivitamins</i>	\$0 (Tier-4)	*
PHOS-FLUR (SODIUM FLUORIDE ORAL RINSE)	\$0 (Tier-4)	*
<i>potassium phosphate</i>	\$0 (Tier-4)	*
<i>prenatal vitamins</i>	\$0 (Tier-4)	*
<i>sodium chloride tablet</i>	\$0 (Tier-4)	*
<i>sodium fluoride chewable tablet, oral solution</i>	\$0 (Tier-4)	*
<i>vitamin a (retinol)</i>	\$0 (Tier-4)	*
<i>vitamin b complex</i>	\$0 (Tier-4)	*
<i>vitamin b-1 (thiamine)</i>	\$0 (Tier-4)	*
<i>vitamin b-2 (riboflavin)</i>	\$0 (Tier-4)	*
<i>vitamin b-3 (niacin)</i>	\$0 (Tier-4)	*
<i>vitamin b-6 (pyridoxine)</i>	\$0 (Tier-4)	*
<i>vitamin b-12 (cyanocobalamin)</i>	\$0 (Tier-4)	*
<i>vitamin c (ascorbic acid)</i>	\$0 (Tier-4)	*
<i>vitamin d</i>	\$0 (Tier-4)	*
<i>vitamin e, oral</i>	\$0 (Tier-4)	*
<i>vitamins, multiple</i>	\$0 (Tier-4)	*
<i>vitamins, multiple/minerals</i>	\$0 (Tier-4)	*
<i>vitamins, pediatric</i>	\$0 (Tier-4)	*
<i>vitamins, prenatal</i>	\$0 (Tier-4)	*

Women's Health: Drugs Used For Birth Control, Menopause, Osteoporosis, Or Infections

Contraceptives

<i>amethia oral tablet</i>	\$0 (Tier-2)	
ANNOVERA VAGINAL RING	\$0 (Tier-3)	QL (1 EA per 365 days)
<i>apri oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>aranelle oral tablet</i>	\$0 (Tier-2)	
<i>ashlyna oral tablet</i>	\$0 (Tier-2)	
<i>aviane oral tablet</i>	\$0 (Tier-2)	
<i>balziva oral tablet</i>	\$0 (Tier-2)	
<i>briellyn oral tablet</i>	\$0 (Tier-2)	
<i>camila oral tablet</i>	\$0 (Tier-2)	
<i>deblitane oral tablet</i>	\$0 (Tier-2)	
<i>desogestrel-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>drospirenone-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>eluryng vaginal ring</i>	\$0 (Tier-2)	
<i>emoquette oral tablet</i>	\$0 (Tier-2)	
<i>errin oral tablet</i>	\$0 (Tier-2)	
<i>estradiol-norethindrone acet oral tablet</i>	\$0 (Tier-2)	
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	\$0 (Tier-2)	
<i>falmina oral tablet</i>	\$0 (Tier-2)	
<i>iclevia oral tablet</i>	\$0 (Tier-2)	
<i>introvale oral tablet</i>	\$0 (Tier-2)	
<i>junel 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 24 oral tablet</i>	\$0 (Tier-2)	
<i>kariva oral tablet</i>	\$0 (Tier-2)	
<i>kelnor 1/35 oral tablet</i>	\$0 (Tier-2)	
<i>larin 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>larin 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>larin fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>larin fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>lessina oral tablet</i>	\$0 (Tier-2)	
<i>levonest oral tablet</i>	\$0 (Tier-2)	
<i>levonorgest-eth estrad 91-day oral tablet</i>	\$0 (Tier-2)	
<i>levonorgestrel 1.5 mg tablet</i>	\$0 (Tier-4)	*
<i>levonorgestrel-ethinyl estrad oral tablet</i>	\$0 (Tier-2)	
<i>levora 0.15/30 (28) oral tablet</i>	\$0 (Tier-2)	
LO LOESTRIN FE ORAL TABLET	\$0 (Tier-3)	
<i>marlissa oral tablet</i>	\$0 (Tier-2)	
<i>microgestin 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>microgestin 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>microgestin fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>microgestin fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>necon 0.5/35 (28) oral tablet</i>	\$0 (Tier-2)	
NEXTSTELLIS ORAL TABLET	\$0 (Tier-3)	
<i>nikki oral tablet</i>	\$0 (Tier-2)	
<i>nonoxynol-9*</i>	\$0 (Tier-4)	*; Branded OTC nonoxynol-9 products are covered by MassHealth without prior authorization.
<i>norethin-eth estradiol-fe oral tablet chewable</i>	\$0 (Tier-2)	
<i>nortrel 0.5/35 (28) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 1/35 (21) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 1/35 (28) oral tablet</i>	\$0 (Tier-2)	
<i>nortrel 7/7/7 oral tablet</i>	\$0 (Tier-2)	
<i>portia-28 oral tablet</i>	\$0 (Tier-2)	
<i>sharobel oral tablet</i>	\$0 (Tier-2)	
<i>tarina fe 1/20 eq oral tablet</i>	\$0 (Tier-2)	
<i>tri-sprintec oral tablet</i>	\$0 (Tier-2)	
<i>trivora (28) oral tablet</i>	\$0 (Tier-2)	
<i>velivet oral tablet</i>	\$0 (Tier-2)	
<i>vyfemla oral tablet</i>	\$0 (Tier-2)	
<i>zovia 1/35 (28) oral tablet</i>	\$0 (Tier-2)	
Menopausal Symptoms/Osteoporosis		
<i>alendronate sodium oral solution</i>	\$0 (Tier-2)	
<i>alendronate sodium oral tablet</i>	\$0 (Tier-2)	
ANGELIQ ORAL TABLET	\$0 (Tier-3)	
<i>calcitonin (salmon) nasal solution</i>	\$0 (Tier-2)	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	\$0 (Tier-3)	
CRINONE VAGINAL GEL	\$0 (Tier-3)	PA
DELESTROGEN INTRAMUSCULAR OIL	\$0 (Tier-3)	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	\$0 (Tier-3)	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
DIVIGEL TRANSDERMAL GEL	\$0 (Tier-3)	
<i>dotti transdermal patch twice weekly</i>	\$0 (Tier-2)	
DUAVEE ORAL TABLET	\$0 (Tier-3)	
ELESTRIN TRANSDERMAL GEL	\$0 (Tier-3)	
<i>estradiol oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
<i>estradiol transdermal patch twice weekly</i>	\$0 (Tier-2)	
<i>estradiol transdermal patch weekly</i>	\$0 (Tier-2)	
<i>estradiol vaginal cream</i>	\$0 (Tier-2)	
<i>estradiol vaginal tablet</i>	\$0 (Tier-2)	
<i>estradiol valerate intramuscular oil</i>	\$0 (Tier-2)	
ESTRING VAGINAL RING	\$0 (Tier-3)	
EVAMIST TRANSDERMAL SOLUTION	\$0 (Tier-3)	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; NEDS
FEMRING VAGINAL RING	\$0 (Tier-3)	
FORTEO SUBCUTANEOUS SOLUTION PEN- INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS
<i>fyavolv oral tablet</i>	\$0 (Tier-2)	
<i>ibandronate sodium oral tablet</i>	\$0 (Tier-2)	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	\$0 (Tier-3)	
IMVEXXY STARTER PACK VAGINAL INSERT	\$0 (Tier-3)	
<i>jinteli oral tablet</i>	\$0 (Tier-2)	
<i>medroxyprogesterone acetate intramuscular suspension</i>	\$0 (Tier-2)	
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	\$0 (Tier-2)	
<i>medroxyprogesterone acetate oral tablet</i>	\$0 (Tier-2)	
MENEST ORAL TABLET	\$0 (Tier-3)	
MENOSTAR TRANSDERMAL PATCH WEEKLY	\$0 (Tier-3)	
<i>norethindrone acetate oral tablet</i>	\$0 (Tier-2)	
<i>norethindrone-eth estradiol oral tablet</i>	\$0 (Tier-2)	
PREMARIN ORAL TABLET	\$0 (Tier-3)	
PREMARIN VAGINAL CREAM	\$0 (Tier-3)	
PREMPHASE ORAL TABLET	\$0 (Tier-3)	
PREMPRO ORAL TABLET	\$0 (Tier-3)	
<i>progesterone oral capsule</i>	\$0 (Tier-2)	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA
<i>raloxifene hcl oral tablet</i>	\$0 (Tier-2)	
<i>risedronate sodium oral tablet</i>	\$0 (Tier-2)	
<i>risedronate sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>teriparatide (recombinant) subcutaneous solution pen-injector</i>	\$0 (Tier-2)	PA; SP-CVS specialty; NEDS
TYMLOS SUBCUTANEOUS SOLUTION PEN- INJECTOR	\$0 (Tier-3)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

Drug	Status	Requirements/Limits
XGEVA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	PA; NEDS
<i>yuvaferm vaginal tablet</i>	\$0 (Tier-2)	
Prenatal Vitamins		
<i>prenatal oral tablet</i>	\$0 (Tier-2)	
Vaginal Infections		
CLEOCIN VAGINAL SUPPOSITORY	\$0 (Tier-3)	
<i>clindamycin phosphate vaginal cream</i>	\$0 (Tier-2)	
GYNAZOLE-1 VAGINAL CREAM	\$0 (Tier-3)	
<i>metronidazole vaginal gel</i>	\$0 (Tier-2)	
<i>miconazole 3 vaginal suppository</i>	\$0 (Tier-2)	
SOLOSEC ORAL PACKET	\$0 (Tier-3)	
<i>terconazole vaginal cream</i>	\$0 (Tier-2)	
<i>terconazole vaginal suppository</i>	\$0 (Tier-2)	
<i>vandazole vaginal gel</i>	\$0 (Tier-2)	
Women's Health, Miscellaneous		
INTRAROSA VAGINAL INSERT	\$0 (Tier-3)	
MYFEMBREE ORAL TABLET	\$0 (Tier-3)	PA; QL (28 EA per 28 days); NEDS
ORIAHNN ORAL CAPSULE THERAPY PACK	\$0 (Tier-3)	PA; QL (56 EA per 28 days); NEDS
ORILISSA ORAL TABLET 150 MG	\$0 (Tier-3)	PA; QL (30 EA per 30 days); NEDS
ORILISSA ORAL TABLET 200 MG	\$0 (Tier-3)	PA; QL (60 EA per 30 days); NEDS
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You can find information on what the symbols and abbreviations on this table mean by going to page xiii.

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Tufts Health Plan:

- Proporciona asistencia y servicios gratuitos a las personas con discapacidades para que se comuniquen de manera eficaz con nosotros, como los siguientes: información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos)
- Proporciona servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como los siguientes: intérpretes capacitados e información escrita en otros idiomas

Si necesita recibir estos servicios, comuníquese con Servicios para Miembros de Tufts Health Plan a **855.393.3154**.

Si considera que Tufts Health Plan no le proporcionó estos servicios o lo discriminó de otra manera por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar un reclamo a la siguiente persona:

Tufts Health Plan

Attention: Civil Rights Coordinator, Legal Dept.

1 Wellness Way

Canton, MA 02021-1166

Phone: 888.880.8699 ext. 48000, [TTY number— 866-930-9252]

Fax: 617.972.9048

Email: OCRCoordinator@point32health.org

Puede presentar el reclamo en persona o por correo postal, fax o correo electrónico. Si necesita ayuda para hacerlo, el coordinador de derechos civiles con Tufts Health Plan está a su disposición para brindársela.

También puede presentar un reclamo de derechos civiles ante la Office for Civil Rights (Oficina de Derechos Civiles) del Department of Health and Human Services (Departamento de Salud y Servicios Humanos) de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal, disponible en <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, o bien, por correo postal a la siguiente dirección o por teléfono a los números que figuran a continuación:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

Phone: 800.368.1019, 800.537.7697 (TDD)

Puede obtener los formularios de reclamo en el sitio web <http://www.hhs.gov/ocr/office/file/index.html>.

TuftsHealthUnify.org | **855.393.3154**

Podemos brindarle información en otros formatos, tales como Braille y letras grandes y también en diferentes idiomas si lo solicita.

Si tiene alguna pregunta, por favor, llame a Tufts Health Unify al **855-393-3154** (TTY: 711), siete días a la semana, de 8 a.m. a 8 p.m. La llamada es gratuita.

Para más información, visite TuftsHealthUnify.org.

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