PrimeWest Senior Health Complete (HMO SNP) and Prime Health Complete (HMO SNP)

2026 *List of Covered Drugs* (*Drug List* or Formulary)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This *Drug List* was updated on 11/01/2026. For more recent information or other questions, contact us at **1-800-366-2906**, TTY **1-800-627-3529** or **711**. Hours of operation: October 1 – March 31, 7 days a week, 8 a.m. – 8 p.m.; April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. The call is free. Or, visit **www.primewest.org/pwshc** or **www.primewest.org/phc**.

If you have questions, please call PrimeWest Senior Health Complete/Prime Health Complete Member Services at **1-800-366-2906**, TTY **1-800-627-3529** or **711**. Hours of operation: October 1 – March 31, 7 days a week, 8 a.m. – 8 p.m.; April 1 – September 30, Monday – Friday, 8 a.m. – 8 p.m. The call is free. **For more information**, visit **www.primewest.org/pwshc** or **www.primewest.org/phc**.

H2416_PW_03-25_1010_C_FINAL_10/DHS_Accepted_08/19/2025
H2926_PW_03-25_3010_C_FINAL_10/DHS_Accepted_08/19/2025
Formulary_ID_00026364, Version_17

MedicareRx
Prescription Drug Coverage

1-866-431-0801 (toll free); TTY **1-800-627-3529** or **711**

ATTENTION: If you speak English, free language assistance services are available to you free of charge and without unnecessary delay. Additionally, appropriate auxiliary aids and services to provide information in accessible formats are available free of charge and in a timely manner. Please call the number above or speak to your provider. English

ትኩረት፥ አማርኛ የሚናገሩ ከሆነ፣ ነጻ የቋንቋ እርዳታ አገልግሎቶች፣ ያለ ምንም ክፍያ፣ እና ያለ ምንም መዘግየት ለእርስዎ ይገኛሉ። በተጨማሪም፣ መረጃን በተደራሽ ቅርፀቶች ለማቅረብ፣ ተገቢ ረዳት መርጃዎች እና አገልግሎቶች ከክፍያ ነጻ እና በጊዜ ይገኛሉ። እባክዎ ከላይ ባለው ቁጥር ይደውሉ ወይም አቅራቢዎን ያነጋግሩ። Amharic

تنبيه: إذا كنت تتحدث العربية، فستكون خدمات المساعدة اللغوية متاحة لك مجانًا وبدون تأخير غير ضروري. بالإضافة إلى ذلك، تتوفر المساعدات والخدمات المساعدة المناسبة لتوفير المعلومات بتنسيقات يسهُل الوصول إليها مجانًا وفي الوقت المناسب. يرجى الاتصال بالرقم أعلاه أو التحدث إلى مقدم الخدمة الخاص بك. Arabic

သတိပြုပါ- သင်သည် မြန်မာဘာသာ ဘာသာစကားဖြင့် ပြောဆိုပါက၊ အခမဲ့ ဘာသာပြန်ဆိုပေးသော ဝန်ဆောင်မှုများကို မလိုလားအပ်သည့် နှောင့်နှေးကြန့်ကြာမှုတို့မရှိဘဲ အခမဲ့ ရရှိနိုင်ပါမည်။ ထို့အပြင်၊ အသုံးပြုခွင့်ရရှိထားသောပုံစံများတွင် သတင်းအချက်အလက်များ ပေးဆောင်နိုင်ရန်အတွက် သင့်လျော်သော အရန်အကူအညီများနှင့် ဝန်ဆောင်မှုများကို အချိန်နှင့်တစ်ပြေးညီ အခမဲ့ရရှိနိုင်ပါသည်။ အထက်တွင် ဖော်ပြထားသောနံပါတ်ကို ဖုန်းခေါ်ဆိုပါ သို့မဟုတ် သင်၏ဝန်ဆောင်မှုပေးသူထံ စကားပြောဆိုပါ။ Burmese

注意：如果您講繁體中文，我們將免費為您提供語言協助服務，且不會造成不必要的延誤。此外，還免費及時提供適當的輔助工具和服務，以無障礙格式提供資訊。請撥打上述電話號碼或與您的提供者聯絡。Chinese

ATTENTION : Si vous parlez Français, des services d’assistance linguistique gratuits sont à votre disposition gratuitement et sans délai inutile. En outre, des aides et services auxiliaires appropriés permettant de fournir des informations dans des formats accessibles sont disponibles gratuitement et en temps opportun. Veuillez appeler le numéro ci-dessus ou parler à votre prestataire. French

CEEB TOOM: Yog tias koj hais lus Hmoob, muaj cov kev pab cuam lus pab dawb rau koj xwb thiab tsis muaj qhov qeeb li. Dhau no lawm, tseem muaj ntaub ntawv qhia txog cov cuab yeej pab hnov lus thiab cov kev pab cuam ua hom qauv ntawv uas mus siv tau dawb yam tsis sau nqi thiab raws sij hawm. Thov hu rau tus xov tooj saum toj no los sis tham nrog koj tus kws kho mob. Hmong

တိၢ်ဒိုဉ်- ဖဲနမ့ၢ်ကတိၤကညီကျိာ်နၣ်,သဘျုကျိာ်တၢ်ဟ့ဉ်မၤစၢၤအတၢ်ဖံးတၢ်မၤတဖဉ်ကအိဉ်ဝဲဒဉ်လၢနဂီၢ်လၢတလိဉ်ဟ့ဉ်အပှၤဒီးတထုးတၢ်ဆၢကတီၢ်ဃံာ်ဃံာ်ဘဉ်နၣ်လီၤ. အမံာ်ညါ, တၢ်နဉ်ဟူအပီးအလီလၢအဖိးမံဒီးတၢ်မၤစၢၤအ တၢ်ဖံးတၢ်မၤတဖဉ်လၢကဟ့ဉ်တၢ်ဂ့ၢ်တၢ်ကျိၤလၢကွၢ်ဂီၤလၢတၢ်မၤနှၢ်သူအီၤညီနှဉ်ကအိဉ်ဝဲဒဉ်လၢအပှၤတအိဉ်ဒီးတၢ်ကဟ့ဉ်အီၤအဆၢကတီၢ်ဘဉ်ဘဉ်နၣ်လီၤ. ဝံသးစူၤကီးဘဉ်လီတဲစိနိၢ်ဂံၢ်လၢထးမ့တမ့ၢ်ကတိၤတၢ်ဒီးနပှၤဟ့ဉ်တၢ်မၤစၢၤတၢ်တကွၢ်. Karen

1-866-431-0801 (toll free); TTY **1-800-627-3529** or **711**

ជូរកត់ចំណាំ៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាជំនួយភាសាឥតគិតថ្លៃអាចរកបានសម្រាប់អ្នកដោយមិនគិតថ្លៃនិងដោយគ្មានការពន្យារពេលមិនចាំបាច់។ លើសពីនេះ ជំនួយ និងសេវាកម្មជំនួយសម្រាប់ជើម្បីផ្តល់ព័ត៌មានក្នុងទម្រង់ដែលអាចចូលប្រើបាន អាចរកបានដោយមិនគិតថ្លៃ និងទាន់ពេលវេលា។ សូមទូរសព្ទទៅលេខខាងលើ ឬនិយាយទៅកាន់អ្នកផ្តល់សេវារបស់អ្នក។ Khmer

주의: 한국어를 사용하시는 경우, 불필요한 지연 없이 무료로 언어 지원 서비스를 받으실 수 있습니다. 또한, 접근 가능한 형식으로 정보를 제공해 주는 적절한 보조 도구와 서비스를 무료로 적시에 이용하실 수 있습니다. 위의 번호로 전화하시거나 담당 의료 제공자에게 문의해 주십시오. Korean

ຂໍ້ຄວນ ເອົາໃຈໃສ່: ຖ້າ ທ່ານ ເວົ້າ ລາວ, ການບໍລິການການ ຊ່ວຍເຫຼືອ ດ້ານພາສາ ແມ່ນມີ ໃຫ້ ທ່ານ ໂດຍບໍ່ເສຍ ຄ່າ ແລະ ໂດຍບໍ່ມີການ ລ້ຊກ ຊ້າທີ່ບໍ່ຈຳ ເປັນ. ນອກຈາກນັ້ນ, ການ ຊ່ວຍ ເຫຼືອ ແລະ ການບໍລິການ ເສີມທີ່ເໝາະສົມໃນການສະໜອງ ຂໍ້ມູນ ໃນຮູບແບບທີ່ສາມາດເຂົ້າ ເຖິງໄດ້ ແມ່ນມີໃຫ້ໂດ ຍ ບໍ່ເສຍ ຄ່າ ແລະ ທັນເວລາ. ກະລຸນາໂທຫາ ເບີໂທ ຂ້າງ ເທິງ ຫຼື ຕິ ດ ຕໍ່ ກັບ ຜູ້ ໃ ຫ້ ບໍ ລິ ການ ຂ ອ ງ ທ່ ານ. Lao

HUBADHAA: Afaan Oromoo dubbattu yoo ta'e, tajaajilootni deeggarsa afaanii barfannaa hin barbaachisne malee bilisaan isiniif kennamu. Dabalataanis, odeeffannoo bifa argamuun danda'uun dhiyeessuf tajaajilliwwaniifi deeggarsiwwan dabalataa bilisaafi yeroosaa eeggate jira. Maaloo lakkkoofsa armaan olii irratti bilbilaa yookiin ogeessa fayyaa keessan haasofsiisaa. Oromo

ВНИМАНИЕ: Если вы говорите по-русски, вам доступны бесплатные услуги языковой помощи, которые оказываются безвозмездно и своевременно. Кроме того, бесплатно и своевременно предоставляются соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах. Позвоните по указанному выше номеру или обратитесь к своему поставщику услуг. Russian

FIIRO GAAR AH: Haddii aad ku hadasho Soomaali, adeegyada kaalmada luqadda bilaashka ah ayaa laguugu heli karaa adiga lacag la'aan oo aan lahayn daahid aan lama huraan ahayn. Intaa waxaa dheer, caawimooyinka iyo adeegyada ku habboon si loogu bixiyo macluumaadka qaabab la heli karo ayaa lagu heli karaa lacag la'aan iyo waqti ku habboon. Fadlan wac lambarka kore ama la hadal adeeg bixiyahaaga. Somali

ATENCIÓN: Si habla español, los servicios gratuitos de asistencia en otros idiomas están disponibles para usted de forma gratuita y sin demoras innecesarias. Además, se dispone de ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles de forma gratuita y oportuna. Llame al número mencionado anteriormente o hable con su proveedor. Spanish

LƯU Ý: Nếu quý vị nói Tiếng Việt, dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn cho quý vị, hoàn toàn miễn phí và không bị chậm trễ không cần thiết. Ngoài ra, các thiết bị và dịch vụ hỗ trợ phù hợp để cung cấp thông tin ở các định dạng dễ tiếp cận cũng được cung cấp miễn phí và kịp thời. Vui lòng gọi số ở trên hoặc nói chuyện với nhà cung cấp của quý vị. Vietnamese

Civil Rights Notice

Discrimination is against the law. PrimeWest Health does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

Civil Rights Coordinator
PrimeWest Health
3905 Dakota St Alexandria, MN 56308
Toll Free: 1-866-431-0801; TTY: 1-800-627-3529 or 711; Fax: 1-320-762-8750
Email: compliance@primewest.org

Auxiliary Aids and Services: PrimeWest Health provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

Language Assistance Services: PrimeWest Health provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact PrimeWest Health at memberservices@primewest.org, or call Member Services at 1-866-431-0801 or TTY 1-800-627-3529 or 711. The call is free.**

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by PrimeWest Health. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the **OCR** directly to file a complaint:

Office for Civil Rights, U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240 Chicago, IL 60601
Customer Response Center: 800-368-1019, TTY: 800-537-7697
Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)
In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201, St. Paul, MN 55104
651-539-1100 (voice), 800-657-3704 (toll-free), 711 or 800-627-3529 (MN Relay), 651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)
You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator
Minnesota Department of Human Services
Equal Opportunity and Access Division
P.O. Box 64997
St. Paul, MN 55164-0997
651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to see your primary care provider prior to the referral.

Introduction

This document is called the ***List of Covered Drugs*** (also known as the *Drug List*). It tells you which prescription drugs and over-the-counter (OTC) drugs and non-drug products and items are covered by PrimeWest Senior Health Complete/Prime Health Complete. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by PrimeWest Senior Health Complete/Prime Health Complete. Key terms and their definitions appear in the last chapter of the ***Member Handbook***.

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A. Disclaimers

This is a list of drugs that members can get in PrimeWest Senior Health Complete/Prime Health Complete.

- PrimeWest Senior Health Complete (HMO SNP) and Prime Health Complete (HMO SNP) are health plans that contract with both Medicare and the Minnesota Medical Assistance program to provide benefits of both programs to enrollees. Enrollment in PrimeWest Senior Health Complete (HMO SNP) and Prime Health Complete (HMO SNP) depend on contract renewal.
- You can always check PrimeWest Senior Health Complete/Prime Health Complete's up-to-date ***List of Covered Drugs*** online at **www.primewest.org/pwshc** or **www.primewest.org/phc** or by calling Member Services at the numbers listed at the bottom of this page. This call is free.
- You can get this document for free in other formats, such as large print, braille, or audio. Call Member Services at the numbers listed at the bottom of this page. This call is free.
- To make or change a standing request to get this document, now and in the future, in a language other than English or in an alternate format, call Member Services at the number at the bottom of this page.

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this ***List of Covered Drugs*** *(Drug List)*. You can read all of the FAQ to learn more, or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C** are the drugs covered by PrimeWest Senior Health Complete/Prime Health Complete. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

- PrimeWest Senior Health Complete/Prime Health Complete will cover all medically necessary drugs on the *Drug List* if:
    - Your doctor or other prescriber says you need them to get better or stay healthy,

continued on next page

- PrimeWest Senior Health Complete/Prime Health Complete agrees that the drug is medically necessary for you, **and**
- You fill the prescription at a PrimeWest Senior Health Complete/Prime Health Complete network pharmacy.

- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at **www.primewest.org/pwshc** or **www.primewest.org/phc** or call Member Services at the numbers listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and PrimeWest Senior Health Complete/Prime Health Complete must follow Medicare and Medical Assistance rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from PrimeWest Senior Health Complete/Prime Health Complete before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- A new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- We learn that a drug isn't safe, **or**
- A drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

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- You can always check PrimeWest Senior Health Complete/Prime Health Complete's up-to-date *Drug List* online at **www.primewest.org/pwshc** or **www.primewest.org/phc**. Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will appear on the same or lower cost-sharing tier with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
  - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
  - We can make these changes only if the drug we're adding:
    - Is a new generic version of a brand name drug, or
    - Is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
  - Some of these drug types may be new to you. For more information, refer to Section B14.
  - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10 – B12 for more information on exceptions.
- **Remove unsafe drugs and other drugs that are taken off the market.** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice. Contact your health care provider and ask if there is another drug that will work for you.

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We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, **or**
- We remove an original biological product when adding a biosimilar, **or**
- We change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- Tell you at least 30 days before we make the change to the *Drug List,* **or**
- Let you know and give you a 31-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there's a similar drug on the *Drug List* you can take instead, **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10 – B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases, you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from PrimeWest Senior Health Complete/Prime Health Complete before you fill your prescription. Prior authorization is different from a referral. PrimeWest Senior Health Complete/Prime Health Complete may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes PrimeWest Senior Health Complete/Prime Health Complete limits the amount of a drug you can get.
- **Step therapy:** Sometimes PrimeWest Senior Health Complete/Prime Health Complete requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll

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cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C1**. You can also get more information by visiting our website at **www.primewest.org/pwshc** or **www.primewest.org/phc**. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10 – B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the section titled "List of Drugs by Drug Type" has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if PrimeWest Senior Health Complete/Prime Health Complete changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are 2 ways to find a drug:

- You can search alphabetically, **or**
- You can search by drug type.

To search **alphabetically**, look for your drug in the *Index of Covered Drugs* section. You can find it in **Section D**. The *Index of Covered Drugs* is an alphabetical list of all of the drugs included in the *Drug List*. Brand name drugs and generic drugs as well as over-the-counter (OTC) drugs are listed in the index.

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To search by drug type, find **Section C1** labeled "List of Drugs by Drug Type". The drugs in this section are grouped into categories by type. For example, if you're taking a medicine for migraines, you should look in the "Antimigraine Agents" category. That is where you will find drugs that treat migraines.

B8. What if the drug I want to take isn't on the *Drug List*?

If you don't find your drug on the *Drug List*, call Member Services at the numbers listed at the bottom of this page and ask about it. If you learn that PrimeWest Senior Health Complete/Prime Health Complete won't cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that's like the one you want to take. **Or**
- Ask PrimeWest Senior Health Complete/Prime Health Complete to make an exception to cover your drug. Refer to questions B10 – B12 for more information about exceptions.

B9. What if I'm a new PrimeWest Senior Health Complete/Prime Health Complete member and can't find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 31-day supply of your drug during the first 90 days you're a member of PrimeWest Senior Health Complete/Prime Health Complete. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we'll allow multiple refills to provide up to a maximum of 31 days of medication.

We'll cover a 31-day supply of your drug if:

- You're taking a drug that isn't on our *Drug List*, **or**
- Our plan rules don't let you get the amount ordered by your prescriber, **or**
- The drug requires prior authorization by PrimeWest Senior Health Complete/Prime Health Complete, **or**
- You're taking a drug that's part of a step therapy restriction.

If you're taking a drug that PrimeWest Senior Health Complete/Prime Health Complete doesn't consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug.

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If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you can't easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you're a new PrimeWest Senior Health Complete/Prime Health Complete member.
- This is in addition to the temporary supply during the first 90 days you're a member of PrimeWest Senior Health Complete/Prime Health Complete.

If you are a current member of our plan, you might have an unexpected change from one care setting to another. During this level-of-care change, you may be prescribed drugs that are not on the *Drug List*. These drugs may or may not be covered based on your health condition. You will need to use the exception and Appeals process if you want a drug that is not on the *Drug List*.

However, there is a way to stop a brief gap in care when you are discharged from a care facility to your home. You may have a full supply of a drug to continue taking once the temporary supply given to you at discharge is gone. You may get this supply before you are discharged from a Medicare Part A stay.

When you are admitted to or leave a long-term care facility, you will not have access to existing prescriptions. A full refill will be given to you when you are admitted to or leave the facility. Normally, "early refill" checks are used to avoid overuse of a prescription. However, in this case, your refill request will not be denied due to "early refill" checks. You will be allowed to access a full refill upon admission or discharge.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask PrimeWest Senior Health Complete/Prime Health Complete to make an exception to cover a drug that isn't on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, PrimeWest Senior Health Complete/Prime Health Complete may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Member Services. A Member Services representative will work with you and your prescriber to help you ask for an exception. You can also read **Chapter 9, Section G3,** of the ***Member Handbook*** to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours. The supporting statement should be submitted by mail, phone, or fax to:

Mail: MedImpact HealthCare Systems

Attention: Prior Authorization

10181 Scripps Gateway Ct

San Diego, CA 92131

Phone: **1-877-391-9294**

Fax: Attn: MedImpact HealthCare Systems, **1-858-790-7100**

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription—depending on State laws.

PrimeWest Senior Health Complete/Prime Health Complete covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some

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biosimilars are interchangeable biosimilars and, depending on State laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the ***Member Handbook***.

B15. What are OTC drugs?

OTC stands for "over-the-counter." PrimeWest Senior Health Complete/Prime Health Complete covers some OTC drugs when they're written as prescriptions by your provider.

You can read the PrimeWest Senior Health Complete/Prime Health Complete *Drug List* to find out what OTC drugs are covered.

B16. Does PrimeWest Senior Health Complete/Prime Health Complete cover non-drug OTC products?

PrimeWest Senior Health Complete/Prime Health Complete covers some non-drug OTC products when they're written as prescriptions by your provider.

Examples of non-drug OTC products include gauze, tape, and some bandages.

You can read the PrimeWest Senior Health Complete/Prime Health Complete *Drug List* to find out what non-drug OTC products are covered.

B17. Does PrimeWest Senior Health Complete/Prime Health Complete cover long-term supplies of prescriptions?

- **Mail-Order Programs**. We offer a mail-order program that allows you to get up to a 90-day supply of your drugs sent directly to your home. A 90-day supply has the same copay as a one-month supply.
- **90-Day Retail Pharmacy Programs**. Some retail pharmacies may also offer up to a 90-day supply of covered drugs. A 90-day supply has the same copay as a one-month supply.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B19. What's my copay?

PrimeWest Senior Health Complete/Prime Health Complete members have copays for prescription drugs as long as the member follows the plan's rules. Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our *Drug List*.

- Tier 1 Generic drugs have the lowest copay. The copay is from $0 to $5.10, depending on your income and level of Medical Assistance eligibility.
- Tier 1 Brand name drugs have a higher copay. The copay is from $0 to $12.65, depending on your income and level of Medical Assistance eligibility.
- OTCs have a $0 copay.

If you have questions, call Member Services at the numbers listed at the bottom of this page.

C. Overview of the *List of Covered Drugs*

The ***List of Covered Drugs*** gives you information about the drugs covered by PrimeWest Senior Health Complete/Prime Health Complete. If you have trouble finding your drug in the list, turn to the *Index of Covered Drugs* that begins in section **Section D**. The index alphabetically lists all drugs covered by PrimeWest Senior Health Complete/Prime Health Complete.

Here are the meanings of the codes used in the "Necessary actions, restrictions, or limits on use" column:

Abbreviation	Description
PA	Prior Authorization Restriction
PA BvD	Prior Authorization Restriction for Part B vs Part D Determination
PA-HRM	Prior Authorization Restriction for High-Risk Medications
PA NSO	Prior Authorization Restriction for New Starts Only
QL	Quantity Limit Restriction
ST	Step Therapy Restriction
HI	Home Infusion Drug
LA	Limited Access Drug – This drug may be available only at certain pharmacies due to restrictions by the FDA.
NDS	Non-Extended Day Supply – Long-term supplies of this drug are not available.
NM	Non-Mail Order Drug – This drug is not available through mail order.
AGE	Prior Authorization Age Edit
*	Non-Part D drug

Note: The * next to a drug means the drug isn't a "Part D drug." These drugs have different rules for Appeals.

- An Appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn't covered or is no longer covered by Medicare or Medical Assistance.
- If you or your prescriber disagrees with our decision, you can Appeal. If you ever have a question, call Member Services at the numbers listed at the bottom of this page.
- You can also read **Chapter 9** of the ***Member Handbook*** to learn how to Appeal a decision.

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C1. List of Drugs by Drug Type

The drugs in this section are grouped into categories by type. For example, if you are taking a medicine for migraines, you should look in the "Antimigraine Agents" category. That is where you will find drugs that treat migraines.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example >*montelukast*), brand name drugs are capitalized (for example, ZYLET EYE DROPS), and OTC drugs and non-drug products are listed in lower case (for example naproxen). The information in the "Necessary actions, restrictions, or limits on use" column tells you if PrimeWest Senior Health Complete/Prime Health Complete has any rules for covering your drug.

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Analgesics		
Analgesics, Miscellaneous		
acetaminophen oral capsule 325 mg	$0 (OTC)	
acetaminophen oral tablet 325 mg, 500 mg	$0 (OTC)	
acetaminophen oral tablet,disintegrating 160 mg, 80 mg	$0 (OTC)	
acetaminophen pm oral tablet 25-500 mg	$0 (OTC)	
acetaminophen rectal suppository 650 mg	$0 (OTC)	
acetaminophen-codeine 300-30 mg/12.5 ml cup inner 300 mg-30 mg /12.5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (4500 per 30 days)
acetaminophen-codeine oral solution 120-12 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (4500 per 30 days)
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (360 per 30 days)
acetaminophen-codeine oral tablet 300-60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
aminofen oral tablet 325 mg	$0 (OTC)	
arthritis pain relief (acetam) oral tablet extended release 650 mg	$0 (OTC)	
athenol oral tablet 325 mg	$0 (OTC)	
betatemp oral suspension 160 mg/5 ml	$0 (OTC)	
buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (4 per 28 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; NDS; QL (180 per 30 days); AGE (Max 64 Years)
butalbital-acetaminophen-caff oral capsule 50-300-40 mg, 50-325-40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; QL (180 per 30 days); AGE (Max 64 Years)
butalbital-acetaminophen-caff oral tablet 50-325-40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; QL (180 per 30 days); AGE (Max 64 Years)
child fever reducer-pain relvr oral suspension 160 mg/5 ml	$0 (OTC)	
children's acetaminophen oral liquid 160 mg/5 ml	$0 (OTC)	
children's acetaminophen oral suspension 160 mg/5 ml	$0 (OTC)	
children's fever reducing rectal suppository 120 mg	$0 (OTC)	
children's mapap oral tablet,chewable 160 mg, 80 mg	$0 (OTC)	
children's pain relief oral tablet,chewable 160 mg	$0 (OTC)	
children's tylenol oral tablet,chewable 160 mg	$0 (OTC)	
endocet oral tablet 10-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
endocet oral tablet 2.5-325 mg, 5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (360 per 30 days)
endocet oral tablet 7.5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (240 per 30 days)
fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 400 mcg, 600 mcg, 800 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (120 per 30 days)
fentanyl citrate buccal lozenge on a handle 200 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NDS; QL (120 per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (10 per 30 days)
feverall rectal suppository 120 mg, 325 mg, 650 mg	$0 (OTC)	
feverall rectal suppository 80 mg	$0 (OTC)	
headache relief pm oral tablet 38-500 mg	$0 (OTC)	
hydrocodone-acetaminophen oral solution 10-300 mg/15 ml, 10-325 mg/15 ml, 7.5-325 mg/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (2700 per 30 days)
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
hydrocodone-acetaminophen oral tablet 5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (240 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
hydromorphone oral tablet 2 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
infant fever reducer-pain relf oral suspension 160 mg/5 ml	$0 (OTC)	
jr. strength pain reliever oral tablet,disintegrating 160 mg	$0 (OTC)	
mapap (acetaminophen) oral capsule 500 mg	$0 (OTC)	
mapap (acetaminophen) oral liquid 500 mg/15 ml	$0 (OTC)	
methadone oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (120 per 30 days)
methadone oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
midol max st menstrual oral tablet 500-60-15 mg	$0 (OTC)	
morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NDS; QL (180 per 30 days)
morphine oral solution 10 mg/5 ml (2 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (700 per 30 days)
morphine oral solution 20 mg/5 ml (4 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (300 per 30 days)
MORPHINE ORAL TABLET 15 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NDS; QL (180 per 30 days)
MORPHINE ORAL TABLET 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NDS; QL (120 per 30 days)
morphine oral tablet extended release 100 mg, 200 mg, 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (60 per 30 days)
morphine oral tablet extended release 15 mg, 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (90 per 30 days)
non-aspirin oral suspension 160 mg/5 ml	$0 (OTC)	
non-aspirin oral tablet,chewable 80 mg	$0 (OTC)	
nortemp oral drops 80 mg/0.8 ml	$0 (OTC)	
oxycodone oral capsule 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
oxycodone oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
oxycodone oral tablet 15 mg, 20 mg, 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (120 per 30 days)
oxycodone-acetaminophen oral tablet 10-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (180 per 30 days)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (360 per 30 days)
oxycodone-acetaminophen oral tablet 7.5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (240 per 30 days)
pain relief adult oral liquid 500 mg/15 ml	$0 (OTC)	
percogesic extra strength oral tablet 12.5-500 mg	$0 (OTC)	
pharbetol oral tablet 325 mg, 500 mg	$0 (OTC)	
severe allergy oral tablet 12.5-500 mg	$0 (OTC)	
tension headache oral tablet 500-65 mg	$0 (OTC)	
tension headache pain reliever oral tablet 500-65 mg	$0 (OTC)	
tramadol oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (240 per 30 days)
tramadol-acetaminophen oral tablet 37.5-325 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (300 per 30 days)
Nonsteroidal Anti-Inflammatory Agents		
addaprin oral tablet 200 mg	$0 (OTC)	
anacin oral tablet 400-32 mg	$0 (OTC)	
analgesic creme topical cream 10 %	$0 (OTC)	
arthricream rub topical cream 10 %	$0 (OTC)	
arthritis relief with aloe topical aerosol,spray 10 %	$0 (OTC)	
arthritis topical cream 10 %	$0 (OTC)	
aspirin oral tablet 325 mg, 81 mg	$0 (OTC)	
aspirin oral tablet,chewable 81 mg	$0 (OTC)	
aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg	$0 (OTC)	
aspirin rectal suppository 300 mg	$0 (OTC)	
back and body pain reliever oral tablet 500-32.5 mg	$0 (OTC)	
bayer advanced oral tablet 500 mg	$0 (OTC)	
bayer aspirin oral tablet 325 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
bayer aspirin oral tablet,delayed release (dr/ec) 325 mg	$0 (OTC)	
bayer low dose aspirin oral tablet,delayed release (dr/ec) 81 mg	$0 (OTC)	
bufferin oral tablet 325 mg	$0 (OTC)	
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
children's ibuprofen oral suspension 100 mg/5 ml	$0 (OTC)	
children's profen ib oral suspension 100 mg/5 ml	$0 (OTC)	
diclofenac epolamine transdermal patch 12 hour 1.3 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (60 per 30 days)
diclofenac potassium oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
diclofenac sodium oral tablet extended release 24 hr 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diclofenac sodium oral tablet,delayed release (dr/ec) 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
diclofenac sodium oral tablet,delayed release (dr/ec) 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
diclofenac sodium topical drops 1.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 30 days)
diclofenac sodium topical solution in metered-dose pump 20 mg/gram /actuation(2 %)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (224 per 28 days)
diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 50-200 mg-mcg, 75-200 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
ecotrin oral tablet,delayed release (dr/ec) 325 mg	$0 (OTC)	
efferves pain relief antacid oral tablet, effervescent 325 mg, 325-1,916-1,000 mg	$0 (OTC)	
etodolac oral capsule 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
etodolac oral tablet 400 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
extra strength bayer oral tablet 500 mg	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
flurbiprofen oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ibu oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
ibu oral tablet 600 mg, 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ibuprofen jr strength oral tablet,chewable 100 mg	$0 (OTC)	
ibuprofen oral suspension 100 mg/5 ml	$0 (OTC)	
ibuprofen oral tablet 200 mg	$0 (OTC)	
ibuprofen oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
ibuprofen oral tablet 600 mg, 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
indomethacin oral capsule 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
infant's advil oral drops,suspension 50 mg/1.25 ml	$0 (OTC)	
infant's ibuprofen oral drops,suspension 50 mg/1.25 ml	$0 (OTC)	
ketorolac oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; QL (20 per 30 days); AGE (Max 64 Years)
meloxicam oral tablet 15 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
migraine relief oral tablet 250-250-65 mg	$0 (OTC)	
mobisyl topical cream 10 %	$0 (OTC)	
myoflex topical cream 10 %	$0 (OTC)	
nabumetone oral tablet 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
naproxen oral tablet 250 mg, 375 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
naproxen oral tablet,delayed release (dr/ec) 375 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
naproxen sodium oral tablet 220 mg	$0 (OTC)	
sportscreme topical cream 10 %	$0 (OTC)	
st joseph aspirin oral tablet,chewable 81 mg	$0 (OTC)	
st. joseph aspirin oral tablet,delayed release (dr/ec) 81 mg	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
sulindac oral tablet 150 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vanquish oral tablet 227-194-33 mg	$0 (OTC)	
wal-profen oral tablet 200 mg	$0 (OTC)	
warrior arthritis relief topical cream 10 %	$0 (OTC)	
Anesthetics		
Local Anesthetics		
dermacinrx lidocan 5% patch outer	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (90 per 30 days)
glydo mucous membrane jelly in applicator 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
lidocaine hcl mucous membrane jelly in applicator 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
lidocaine hcl mucous membrane solution 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
lidocaine topical adhesive patch,medicated 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (90 per 30 days)
lidocaine topical ointment 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (240 per 30 days)
lidocaine-prilocaine topical cream 2.5-2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (30 per 30 days)
lidocan iii topical adhesive patch,medicated 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (90 per 30 days)
tridacaine iii topical adhesive patch,medicated 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (90 per 30 days)
ZTLIDO TOPICAL ADHESIVE PATCH,MEDICATED 1.8 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (90 per 30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
Anti-Addiction/Substance Abuse Treatment Agents		
acamprosate oral tablet,delayed release (dr/ec) 333 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
buprenorphine hcl sublingual tablet 2 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
disulfiram oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
KLOXXADO NASAL SPRAY,NON-AEROSOL 8 MG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 30 days)
naloxone injection solution 0.4 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
naloxone injection syringe 0.4 mg/ml, 0.4 mg/ml (prefilled syringe), 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
naloxone nasal spray,non-aerosol 4 mg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 30 days)
naltrexone oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
NICOTROL NS NASAL SPRAY,NON-AEROSOL 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (240 per 180 days)
varenicline tartrate oral tablet 0.5 mg, 1 mg, 1 mg (56 pack)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (336 per 365 days)
varenicline tartrate oral tablets,dose pack 0.5 mg (11)-1 mg (42)	$0/$1.60/$5.10 (Tier 1-Generic)	
Antianxiety Agents		
Benzodiazepines		
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (120 per 30 days)
alprazolam oral tablet 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (150 per 30 days)
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (120 per 30 days)
clonazepam oral tablet 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
clonazepam oral tablet 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
clonazepam oral tablet,disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
clonazepam oral tablet,disintegrating 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 30 days)
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
diazepam injection solution 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (10 per 28 days)
diazepam injection syringe 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
diazepam intensol oral concentrate 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1200 per 30 days)
diazepam oral solution 5 mg/5 ml (1 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1200 per 30 days)
diazepam oral tablet 10 mg, 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
lorazepam 2 mg/ml oral concent	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (150 per 30 days)
lorazepam 4 mg/ml vial inner	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2 per 30 days)
lorazepam injection solution 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2 per 30 days)
lorazepam injection solution 4 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	QL (2 per 30 days)
lorazepam injection syringe 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2 per 30 days)
lorazepam intensol oral concentrate 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (150 per 30 days)
lorazepam oral tablet 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (90 per 30 days)
lorazepam oral tablet 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (150 per 30 days)
temazepam oral capsule 15 mg, 22.5 mg, 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (30 per 30 days)
temazepam oral capsule 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NDS; QL (120 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Antibacterials		
Aminoglycosides		
amikacin injection solution 500 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (235.2 per 28 days)
gentamicin injection solution 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
streptomycin intramuscular recon soln 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (224 per 28 days)
tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
Antibacterials, Miscellaneous		
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clindamycin phosphate injection solution 150 (mg/ml) (4 ml), 150 (mg/ml) (6 ml), 150 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
colistin (colistimethate na) injection recon soln 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
daptomycin intravenous recon soln 350 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
fosfomycin tromethamine oral packet 3 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
linezolid in dextrose 5% intravenous piggyback 600 mg/300 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
linezolid oral suspension for reconstitution 100 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
linezolid oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
methenamine hippurate oral tablet 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
metronidazole oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
nitrofurantoin monohyd/m-cryst oral capsule 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
trimethoprim oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vancomycin intravenous recon soln 1,000 mg, 1.25 gram, 10 gram, 5 gram, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vancomycin oral capsule 125 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (56 per 14 days)
vancomycin oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (112 per 14 days)
XIFAXAN ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (9 per 30 days)
XIFAXAN ORAL TABLET 550 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (90 per 30 days)
Cephalosporins		
cefaclor oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefadroxil oral capsule 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
cefazolin injection recon soln 1 gram, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefazolin intravenous recon soln 10 gram	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
cefdinir oral capsule 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
cefepime injection recon soln 1 gram, 2 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
cefixime oral capsule 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefixime oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefoxitin intravenous recon soln 1 gram, 10 gram, 2 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
cefpodoxime oral tablet 100 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefprozil oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ceftaroline fosamil intravenous recon soln 400 mg, 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
ceftazidime injection recon soln 1 gram, 2 gram, 6 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefuroxime axetil oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefuroxime sodium injection recon soln 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cefuroxime sodium intravenous recon soln 1.5 gram, 7.5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
cephalexin oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
tazicef injection recon soln 1 gram, 2 gram, 6 gram	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Macrolides		
azithromycin intravenous recon soln 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
clarithromycin oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
erythromycin oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fidaxomicin oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (20 per 10 days)
Miscellaneous B-Lactam Antibiotics		
aztreonam injection recon soln 1 gram, 2 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS
ertapenem injection recon soln 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
imipenem-cilastatin intravenous recon soln 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
meropenem intravenous recon soln 1 gram, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
meropenem intravenous recon soln 2 gram	$0/$4.90/$12.65 (Tier 1-Brand)	
Penicillins		
amoxicillin oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
amoxicillin oral tablet 500 mg, 875 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxicillin oral tablet,chewable 125 mg, 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxicillin-pot clavulanate oral tablet,chewable 200-28.5 mg, 400-57 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ampicillin oral capsule 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ampicillin sodium injection recon soln 1 gram, 10 gram, 125 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	
dicloxacillin oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
EXTENCILLINE INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 1.2 MILLION UNIT, 2.4 MILLION UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	
LENTOCILIN S (WITH LIDOCAINE) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 1.2 MILLION UNIT-1.5 %	$0/$4.90/$12.65 (Tier 1-Brand)	
nafcillin injection recon soln 1 gram, 10 gram, 2 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
penicillin g potassium injection recon soln 20 million unit	$0/$1.60/$5.10 (Tier 1-Generic)	
penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
penicillin v potassium oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
Quinolones		
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml, 400 mg/200 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
levofloxacin in d5w intravenous piggyback 250 mg/50 ml, 500 mg/100 ml, 750 mg/150 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
levofloxacin oral solution 250 mg/10 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
moxifloxacin 400 mg/250 ml bag suv, p/f, inner	$0/$1.60/$5.10 (Tier 1-Generic)	
moxifloxacin oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
moxifloxacin-sod.chloride(iso) intravenous piggyback 400 mg/250 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
Sulfonamides		
sulfadiazine oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Tetracyclines		
demeclocycline oral tablet 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxy-100 intravenous recon soln 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxycycline hyclate intravenous recon soln 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxycycline hyclate oral capsule 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
doxycycline hyclate oral tablet 100 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxycycline monohydrate oral capsule 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
doxycycline monohydrate oral tablet 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
minocycline oral capsule 100 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tetracycline oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tigecycline intravenous recon soln 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Anticancer Agents		
Anticancer Agents		
abiraterone oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (120 per 30 days)
abiraterone, submicronized oral tablet 125 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
abirtega oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; QL (120 per 30 days)
adrucil intravenous solution 2.5 gram/50 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
ALECENSA ORAL CAPSULE 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
ALUNBRIG ORAL TABLET 180 MG, 90 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
ALUNBRIG ORAL TABLET 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
anastrozole oral tablet 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ANKTIVA INTRAVESICAL SOLUTION 400 MCG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (1.6 per 28 days)
AUGTYRO ORAL CAPSULE 160 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
AUGTYRO ORAL CAPSULE 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
AVMAPKI ORAL CAPSULE 0.8 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (24 per 28 days)
AVMAPKI-FAKZYNJA ORAL COMBO PACK 0.8-200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (66 per 28 days)
AXTLE INTRAVENOUS RECON SOLN 100 MG, 500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
azacitidine injection recon soln 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
BALVERSA ORAL TABLET 3 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (84 per 28 days)
BALVERSA ORAL TABLET 4 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (56 per 28 days)
BALVERSA ORAL TABLET 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 28 days)
bendamustine intravenous recon soln 100 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS
BENDAMUSTINE INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
BENDEKA INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
BEQALZI ORAL TABLET 1 MG, 20 MG, 5 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
BEQALZI STARTER PACK ORAL TABLETS,DOSE PACK 1-5-20-80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
BESREMI PEN SUBCUTANEOUS PEN INJECTOR 500 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (1 per 28 days)
bexarotene oral capsule 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
bexarotene topical gel 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS
bicalutamide oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
BIZENGRI INTRAVENOUS SOLUTION 375 MG/18.75 ML (20 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (75 per 28 days)
bleomycin injection recon soln 15 unit, 30 unit	$0/$1.60/$5.10 (Tier 1-Generic)	
bortezomib injection recon soln 1 mg, 2.5 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
bortezomib injection recon soln 3.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS
BORUZU INJECTION SOLUTION 2.5 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
BOSULIF ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
BOSULIF ORAL CAPSULE 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
BOSULIF ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
BOSULIF ORAL TABLET 500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
bosutinib oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
bosutinib oral tablet 400 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (30 per 30 days)
BRAFTOVI ORAL CAPSULE 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
BRUKINSA ORAL CAPSULE 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
BRUKINSA ORAL TABLET 160 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
CABOMETYX ORAL TABLET 20 MG, 60 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
CABOMETYX ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
CAMCEVI (6 MONTH) SUBCUTANEOUS SYRINGE 42 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
CAPRELSA ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
CAPRELSA ORAL TABLET 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 60 MG/DAY (20 MG X 3/DAY)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (112 per 28 days)
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (56 per 28 days)
COTELLIC ORAL TABLET 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS; QL (63 per 28 days)
cyclophosphamide intravenous recon soln 1 gram, 2 gram, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
cyclophosphamide intravenous solution 100 mg/mL, 200 mg/mL, 500 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
cyclophosphamide oral capsule 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; ST
cyclophosphamide oral tablet 25 mg, 50 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; ST
DANYELZA INTRAVENOUS SOLUTION 4 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 28 days)
DANZITEN ORAL TABLET 71 MG, 95 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (112 per 28 days)
dasatinib oral tablet 100 mg, 140 mg, 50 mg, 70 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (30 per 30 days)
dasatinib oral tablet 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (90 per 30 days)
DATROWAY INTRAVENOUS RECON SOLN 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
DAURISMO ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
DAURISMO ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
decitabine intravenous recon soln 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
doxorubicin, peg-liposomal intravenous suspension 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
ELAHERE INTRAVENOUS SOLUTION 5 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
ELREXFIO 44 MG/1.1 ML VIAL INNER, SUV, P/F 40 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ELREXFIO SUBCUTANEOUS SOLUTION 40 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (9.5 per 28 days)
EMCYT ORAL CAPSULE 140 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
EMRELIS INTRAVENOUS RECON SOLN 100 MG, 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ENSACOVE ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
ENSACOVE ORAL CAPSULE 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (270 per 30 days)
EPKINLY SUBCUTANEOUS SOLUTION 4 MG/0.8 ML, 48 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ERBITUX INTRAVENOUS SOLUTION 100 MG/50 ML, 200 MG/100 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ERIVEDGE ORAL CAPSULE 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 28 days)
ERLEADA ORAL TABLET 240 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ERLEADA ORAL TABLET 60 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
erlotinib oral tablet 100 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (60 per 30 days)
erlotinib oral tablet 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (90 per 30 days)
ETOPOPHOS INTRAVENOUS RECON SOLN 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
etoposide intravenous solution 20 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
EULEXIN ORAL CAPSULE 125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
everolimus (antineoplastic) oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (56 per 28 days)
everolimus (antineoplastic) oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (28 per 28 days)
everolimus (antineoplastic) oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (30 per 30 days)
everolimus (antineoplastic) oral tablet 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (60 per 30 days)
everolimus (antineoplastic) oral tablet for suspension 2 mg, 3 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (112 per 28 days)
exemestane oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
FAKZYNJA ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (42 per 28 days)
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
floxuridine injection recon soln 0.5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
fluorouracil intravenous solution 1 gram/20 ml, 5 gram/100 ml, 500 mg/10 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
FRUZAQLA ORAL CAPSULE 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (84 per 28 days)
FRUZAQLA ORAL CAPSULE 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)
fulvestrant intramuscular syringe 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
FYARRO INTRAVENOUS SUSPENSION FOR RECONSTITUTION 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
GAVRETO ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
gefitinib oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (60 per 30 days)
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
GOMEKLI ORAL CAPSULE 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (224 per 28 days)
GOMEKLI ORAL CAPSULE 2 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (112 per 28 days)
GOMEKLI ORAL TABLET FOR SUSPENSION 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (224 per 28 days)
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600 MG-10,000 UNIT/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (5 per 21 days)
HERNEXEOS ORAL TABLET 60 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
hydroxyurea oral capsule 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
HYRNUO ORAL TABLET 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)
IBTROZI ORAL CAPSULE 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
IDHIFA ORAL TABLET 100 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
ifosfamide intravenous recon soln 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
ifosfamide intravenous solution 1 gram/20 ml, 3 gram/60 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
imatinib oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; QL (180 per 30 days)
imatinib oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; QL (60 per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 28 days)
IMBRUVICA ORAL SUSPENSION 70 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (216 per 30 days)
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 28 days)
IMDELLTRA INTRAVENOUS RECON SOLN 1 MG, 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
IMJUDO INTRAVENOUS SOLUTION 20 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
IMKELDI ORAL SOLUTION 80 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (280 per 28 days)
INLEXZO INTRAVESICAL IMPLANT 225 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
INLURIYO ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
INLYTA ORAL TABLET 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
INLYTA ORAL TABLET 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
INQOVI ORAL TABLET 35-100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (5 per 28 days)
INREBIC ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ITOVEBI ORAL TABLET 3 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
ITOVEBI ORAL TABLET 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
IWILFIN ORAL TABLET 192 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG, 33 MG, 44 MG, 55 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
JAYPIRCA ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
JAYPIRCA ORAL TABLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
JEMPERLI INTRAVENOUS SOLUTION 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
JIDEYTRO ORAL TABLET 100 MG, 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
JYLAMVO ORAL SOLUTION 2 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; ST
KEYTRUDA INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
KEYTRUDA QLEX SUBCUTANEOUS SOLUTION 395 MG-4,800 UNIT/2.4 ML, 790 MG-9,600 UNIT/4.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
KIMMTRAK INTRAVENOUS SOLUTION 100 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (2 per 28 days)
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (49 per 28 days)
KISQALI FEMARA CO-PACK ORAL TABLET 400 MG/DAY(200 MG X 2)-2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (70 per 28 days)
KISQALI FEMARA CO-PACK ORAL TABLET 600 MG/DAY(200 MG X 3)-2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (91 per 28 days)
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (42 per 28 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (63 per 28 days)
KOMZIFTI ORAL CAPSULE 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
KOSELUGO ORAL CAPSULE 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (300 per 30 days)
KOSELUGO ORAL CAPSULE 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
KOSELUGO ORAL CAPSULE, SPRINKLE 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (600 per 30 days)
KOSELUGO ORAL CAPSULE, SPRINKLE 7.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (390 per 30 days)
KRAZATI ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
lapatinib oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS
LAZCLUZE ORAL TABLET 240 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
LAZCLUZE ORAL TABLET 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (28 per 28 days)
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
letrozole oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
LEUKERAN ORAL TABLET 2 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
leuprolide acetate (3 month) intramuscular suspension for reconstitution 22.5 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
leuprolide subcutaneous kit 1 mg/0.2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO
LIFYORLI ORAL CAPSULE 125 MG/DAY(100 MG X1-25MG X1), 125 MG/DAY(100 MG X1-25MG X3), 125 MG/DAY(100 MG X1-25MG X9), 150 MG/DAY(100 MG X1-25MG X2), 150 MG/DAY(100 MG X1-25MG X3), 150 MG/DAY(100 MG X1-25MG X9)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
lomustine oral capsule 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lomustine oral capsule 100 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
LONSURF ORAL TABLET 15-6.14 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (100 per 28 days)
LONSURF ORAL TABLET 20-8.19 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (80 per 28 days)
LOQTORZI INTRAVENOUS SOLUTION 240 MG/6 ML (40 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LORBRENA ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
LORBRENA ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
LUMAKRAS ORAL TABLET 120 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
LUMAKRAS ORAL TABLET 240 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
LUMAKRAS ORAL TABLET 320 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
LUNSUMIO INTRAVENOUS SOLUTION 1 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUNSUMIO VELO SUBCUTANEOUS SOLUTION 45 MG/ML, 5 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 22.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 7.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUTRATE DEPOT (3 MONTH) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
LYNOZYFIC INTRAVENOUS SOLUTION 2 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (15 per 8 days)
LYNOZYFIC INTRAVENOUS SOLUTION 20 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (40 per 28 days)
LYNPARZA ORAL TABLET 100 MG, 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
LYSODREN ORAL TABLET 500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (140 per 28 days)
MARGENZA INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
MATULANE ORAL CAPSULE 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
megestrol oral tablet 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
MEKINIST ORAL RECON SOLN 0.05 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (1260 per 30 days)
MEKINIST ORAL TABLET 0.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
MEKINIST ORAL TABLET 2 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
MEKTOVI ORAL TABLET 15 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
mercaptopurine oral suspension 20 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
mercaptopurine oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
methotrexate sodium (pf) injection recon soln 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
methotrexate sodium (pf) injection solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
methotrexate sodium injection solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
methotrexate sodium oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; ST
mitoxantrone intravenous concentrate 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
MODEYSO ORAL CAPSULE 125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (20 per 28 days)
NERLYNX ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
nilotinib hcl oral capsule 150 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (112 per 28 days)
nilotinib hcl oral capsule 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (120 per 30 days)
nilutamide oral tablet 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (3 per 28 days)
NUBEQA ORAL TABLET 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
ODOMZO ORAL CAPSULE 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS
OGIVRI INTRAVENOUS RECON SOLN 150 MG, 420 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
OGSIVEO ORAL TABLET 100 MG, 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
OGSIVEO ORAL TABLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (96 per 28 days)
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4), 500 MG/WEEK (100 MG X 5), 600 MG/WEEK (100 MG X 6)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (24 per 28 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
ONUREG ORAL TABLET 200 MG, 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (14 per 28 days)
OPDIVO INTRAVENOUS SOLUTION 100 MG/10 ML, 120 MG/12 ML, 240 MG/24 ML, 40 MG/4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
OPDIVO QVANTIG SUBCUTANEOUS SOLUTION 300 MG-5,000 UNIT/2.5 ML, 600 MG-10,000 UNIT/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
OPDUALAG INTRAVENOUS SOLUTION 240-80 MG/20 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ORSERDU ORAL TABLET 345 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
ORSERDU ORAL TABLET 86 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
paclitaxel protein-bound intravenous suspension for reconstitution 100 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
pazopanib oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (120 per 30 days)
pazopanib oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (60 per 30 days)
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
pemetrexed disodium intravenous recon soln 1,000 mg, 100 mg, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
pemetrexed disodium intravenous solution 25 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PEMRYDI RTU INTRAVENOUS SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 28 days)
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (56 per 28 days)
pomalidomide oral capsule 1 mg, 2 mg, 3 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (21 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (21 per 28 days)
QINLOCK ORAL TABLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
RASONQUE ORAL TABLET 100 MG, 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
RETEVMO ORAL CAPSULE 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
RETEVMO ORAL CAPSULE 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
RETEVMO ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
REVUFORJ ORAL TABLET 110 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
REVUFORJ ORAL TABLET 160 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
REVUFORJ ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
REZLIDHIA ORAL CAPSULE 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
RITUXAN HYCELA SUBCUTANEOUS SOLUTION 1400 MG/11.7 ML (120 MG/ML), 1600 MG/13.4 ML (120 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (8 per 28 days)
ROZLYTREK ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
ROZLYTREK ORAL CAPSULE 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (360 per 30 days)
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
RYBREVANT FASPRO SUBCUTANEOUS SOLUTION 1,600 MG-20,000 UNIT/10 ML, 2,240 MG-28,000 UNIT/14 ML, 2,400 MG-30,000 UNIT/15 ML, 3,520 MG-44,000 UNIT/22 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
RYBREVANT INTRAVENOUS SOLUTION 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
RYDAPT ORAL CAPSULE 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (224 per 28 days)
RYTELO INTRAVENOUS RECON SOLN 188 MG, 47 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
SCEMBLIX ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
SCEMBLIX ORAL TABLET 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
SCEMBLIX ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (300 per 30 days)
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
sorafenib oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (120 per 30 days)
STIVARGA ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (84 per 28 days)
sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (28 per 28 days)
SYNRIBO SUBCUTANEOUS RECON SOLN 3.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
TABLOID ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
TABRECTA ORAL TABLET 150 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (112 per 28 days)
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (900 per 30 days)
TAGRISSO ORAL TABLET 40 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS; QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TALVEY SUBCUTANEOUS SOLUTION 2 MG/ML, 40 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
tamoxifen oral tablet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
TECVAYLI SUBCUTANEOUS SOLUTION 10 MG/ML, 90 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
TEPMETKO ORAL TABLET 225 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
TEVIMBRA INTRAVENOUS SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
TIBSOVO ORAL TABLET 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
TICE BCG INTRAVESICAL SUSPENSION FOR RECONSTITUTION 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
TIVDAK INTRAVENOUS RECON SOLN 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (5 per 21 days)
toremifene oral tablet 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
Torpenz oral tablet 10 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
Torpenz oral tablet 2.5 mg, 5 mg, 7.5 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 11.25 MG, 22.5 MG, 3.75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
tretinoin (antineoplastic) oral capsule 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
TRUQAP ORAL TABLET 160 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (64 per 28 days)
TRUXIMA INTRAVENOUS SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
TUKYSA ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
TUKYSA ORAL TABLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (300 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TURALIO ORAL CAPSULE 125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
VENCLEXTA ORAL TABLET 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; LA; QL (60 per 30 days)
VENCLEXTA ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS; QL (180 per 30 days)
VENCLEXTA ORAL TABLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS; QL (30 per 30 days)
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; LA; NDS
VEPPANU ORAL TABLET 100 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (56 per 28 days)
vinorelbine intravenous solution 10 mg/ml, 50 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
VITRAKVI ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
VITRAKVI ORAL CAPSULE 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
VITRAKVI ORAL SOLUTION 20 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (300 per 30 days)
VIVIMUSTA INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
VONJO ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
VORANIGO ORAL TABLET 10 MG, 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
VYLOY INTRAVENOUS RECON SOLN 100 MG, 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
WELIREG ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
XALKORI ORAL CAPSULE 200 MG, 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
XALKORI ORAL PELLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
XALKORI ORAL PELLET 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
XALKORI ORAL PELLET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
XATMEP ORAL SOLUTION 2.5 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; ST
XOSPATA ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (90 per 30 days)
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40MG TWICE WEEK (40 MG X 2), 80 MG/WEEK (40 MG X 2), 80 MG/WEEK (80 MG X 1)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (8 per 28 days)
XPOVIO ORAL TABLET 40 MG/WEEK (10 MG X 4)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (16 per 28 days)
XPOVIO ORAL TABLET 40 MG/WEEK (40 MG X 1), 60 MG/WEEK (60 MG X 1)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (4 per 28 days)
XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (24 per 28 days)
XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (32 per 28 days)
XTANDI ORAL CAPSULE 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
XTANDI ORAL TABLET 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
XTANDI ORAL TABLET 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
YERVOY INTRAVENOUS SOLUTION 200 MG/40 ML (5 MG/ML), 50 MG/10 ML (5 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
YONSA ORAL TABLET 125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
yulithira oral tablet 10 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; QL (60 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
yulithira oral tablet 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; QL (30 per 30 days)
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
ZELBORAF ORAL TABLET 240 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (240 per 30 days)
ZENBEXUS ORAL CAPSULE 0.75 MG, 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ZIIHERA INTRAVENOUS RECON SOLN 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ZIRABEV INTRAVENOUS SOLUTION 25 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG, 3.6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO
ZOLINZA ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ZYDELIG ORAL TABLET 100 MG, 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
ZYKADIA ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (84 per 28 days)
ZYNLONTA INTRAVENOUS RECON SOLN 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ZYNYZ INTRAVENOUS SOLUTION 500 MG/20 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (20 per 28 days)
Anticonvulsants		
Anticonvulsants		
brivaracetam intravenous solution 50 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (80 per 30 days)
brivaracetam oral solution 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (600 per 30 days)
brivaracetam oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (60 per 30 days)
BRIVIACT INTRAVENOUS SOLUTION 50 MG/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (80 per 30 days)
carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
carbamazepine oral suspension 100 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
carbamazepine oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carbamazepine oral tablet,chewable 100 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clobazam oral suspension 2.5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (480 per 30 days)
clobazam oral tablet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
DIACOMIT ORAL CAPSULE 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (360 per 30 days)
DIACOMIT ORAL CAPSULE 500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
DIACOMIT ORAL POWDER IN PACKET 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (360 per 30 days)
DIACOMIT ORAL POWDER IN PACKET 500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (180 per 30 days)
diazepam rectal kit 12.5-15-17.5-20 mg, 5-7.5-10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diazepam rectal kit 2.5 mg	$0/$4.90/$12.65 (Tier 1-Brand)	
DILANTIN ORAL CAPSULE 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
divalproex oral capsule, delayed rel sprinkle 125 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
divalproex oral tablet extended release 24 hr 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR 1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (90 per 30 days)
ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HR 1,500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (60 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EPIDIOLEX ORAL SOLUTION 100 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
epitol oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
eslicarbazepine oral tablet 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (30 per 30 days)
eslicarbazepine oral tablet 600 mg, 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (60 per 30 days)
ethosuximide oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ethosuximide oral solution 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
felbamate oral suspension 600 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
felbamate oral tablet 400 mg, 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
fosphenytoin injection solution 100 mg pe/2 ml, 500 mg pe/10 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
gabapentin oral capsule 100 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (360 per 30 days)
gabapentin oral capsule 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (270 per 30 days)
gabapentin oral solution 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2160 per 30 days)
gabapentin oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
gabapentin oral tablet 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
lacosamide intravenous solution 200 mg/20 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (200 per 5 days)
lacosamide oral solution 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1200 per 30 days)
lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lamotrigine oral tablet,disintegrating 100 mg, 200 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
levetiracetam intravenous solution 500 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
levetiracetam oral solution 100 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
levetiracetam oral tablet for suspension 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST
levetiracetam oral tablet for suspension 500 mg	$0/$4.90/$12.65 (Tier 1-Brand)	ST
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
methsuximide oral capsule 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
NAYZILAM NASAL SPRAY,NON-AEROSOL 5 MG/SPRAY (0.1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
perampanel oral suspension 0.5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (720 per 30 days)
perampanel oral tablet 10 mg, 12 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (30 per 30 days)
perampanel oral tablet 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (30 per 30 days)
perampanel oral tablet 4 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (60 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
phenytek oral capsule 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
phenytoin oral suspension 125 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
phenytoin oral tablet,chewable 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
phenytoin sodium intravenous solution 50 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
phenytoin sodium intravenous syringe 50 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
pregabalin oral capsule 225 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
pregabalin oral solution 20 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (900 per 30 days)
primidone oral tablet 125 mg, 250 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rufinamide oral suspension 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS
rufinamide oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST
rufinamide oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS
SEZABY INTRAVENOUS RECON SOLN 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG, 250 MG, 500 MG, 750 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST
SUBVENITE ORAL SUSPENSION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (60 per 30 days)
tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
topiramate oral capsule, sprinkle 15 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
topiramate oral solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	ST
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
valproate sodium intravenous solution 500 mg/5 ml (100 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
valproic acid (as sodium salt) oral solution 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
valproic acid oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
VALTOCO NASAL SPRAY,NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (10 per 30 days)
vigabatrin oral powder in packet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
vigabatrin oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
vigadrone oral powder in packet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
vigadrone oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
vigpoder oral powder in packet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO; NM; NDS; QL (180 per 30 days)
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (56 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
XCOPRI ORAL TABLET 100 MG, 25 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
XCOPRI ORAL TABLET 150 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (60 per 30 days)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14)	$0/$4.90/$12.65 (Tier 1-Brand)	
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ZONISADE ORAL SUSPENSION 100 MG/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
zonisamide oral capsule 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ZTALMY ORAL SUSPENSION 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (1080 per 30 days)
Antidementia Agents		
Antidementia Agents		
donepezil oral tablet 10 mg, 23 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
donepezil oral tablet,disintegrating 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
donepezil oral tablet,disintegrating 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
ergoloid oral tablet 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
galantamine oral solution 4 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (200 per 30 days)
galantamine oral tablet 12 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (30 per 30 days)
memantine oral solution 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
memantine oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
Antidepressants		
Antidepressants		
amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
AUVELITY ORAL TABLET,IR ER BIPHASIC,DOSEPACK 30 MG-105 MG /45 MG-105 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
bupropion hcl oral tablet 100 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
citalopram oral solution 10 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
citalopram oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
citalopram oral tablet 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
clomipramine oral capsule 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
doxepin oral concentrate 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
DRIZALMA SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 60 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (60 per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (30 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (30 per 30 days)
escitalopram oxalate oral solution 5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
EXXUA ORAL TABLET EXTENDED RELEASE 24 HR 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
EXXUA ORAL TABLET, EXT REL 24HR DOSE PACK 18.2 MG (32 TABS)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (30 per 30 days)
fluoxetine oral capsule 10 mg, 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fluoxetine oral solution 20 mg/5 ml (4 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
fluvoxamine oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MARPLAN ORAL TABLET 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mirtazapine oral tablet,disintegrating 15 mg, 30 mg, 45 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nortriptyline oral solution 10 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
paroxetine hcl oral suspension 10 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA NSO-HRM; AGE (Max 64 Years)
perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
phenelzine oral tablet 15 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
protriptyline oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
RALDESY ORAL SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (1200 per 30 days)
sertraline oral concentrate 20 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
sertraline oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
SPRAVATO NASAL SPRAY,NON-AEROSOL 28 MG, 56 MG (28 MG X 2), 84 MG (28 MG X 3)	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
tranylcypromine oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
trimipramine oral capsule 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
venlafaxine oral capsule,extended release 24hr 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
venlafaxine oral capsule,extended release 24hr 37.5 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vilazodone oral tablet 10 mg, 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (28 per 14 days)
ZURZUVAE ORAL CAPSULE 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (14 per 14 days)
Antidiabetic Agents		
Antidiabetic Agents, Miscellaneous		
acarbose oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dapagliflozin oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-1,000 mg, 10-500 mg, 5-1,000 mg, 5-500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
JARDIANCE ORAL TABLET 10 MG, 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
JENTADUETO ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 2.5-850 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
metformin oral solution 500 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (765 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
metformin oral tablet 1,000 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (75 per 30 days)
metformin oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (150 per 30 days)
metformin oral tablet 850 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
metformin oral tablet extended release 24 hr 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
metformin oral tablet extended release 24 hr 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
mifepristone oral tablet 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (112 per 28 days)
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (2 per 28 days)
nateglinide oral tablet 120 mg, 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (3 per 28 days)
pioglitazone oral tablet 15 mg, 30 mg, 45 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
repaglinide oral tablet 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
repaglinide oral tablet 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
RYBELSUS ORAL TABLET 1.5 MG, 14 MG, 3 MG, 4 MG, 7 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
sitagliptin phos-metformin oral tablet 50-1,000 mg, 50-500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 100-1,000 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 50-1,000 mg, 50-500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
sitagliptin phosphate oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
TRADJENTA ORAL TABLET 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 25-5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5-1,000 MG, 5-2.5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (2 per 28 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
Insulins		
FIASP FLEXTOUCH U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
FIASP PUMPCART SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (1.6 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply
FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (24 per 28 days)
insulin asp prt-insulin aspart subcutaneous insulin pen 100 unit/mL (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
insulin asp prt-insulin aspart subcutaneous solution 100 unit/mL (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
insulin aspart U-100 subcutaneous cartridge 100 unit/mL	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
insulin aspart U-100 subcutaneous insulin pen 100 unit/mL (3 mL)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
insulin aspart U-100 subcutaneous solution 100 unit/mL	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
insulin glargine-yfgn subcutaneous insulin pen 100 unit/mL (3 mL)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
insulin glargine-yfgn subcutaneous solution 100 unit/mL	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
insulin lispro subcutaneous solution 100 unit/mL	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 28 days)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (40 per 28 days)
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (30 per 30 days)
TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (18 per 28 days)
TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (13.5 per 28 days)
XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	max $35 copay per month supply; QL (15 per 28 days)
Sulfonylureas		
glimepiride oral tablet 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
glimepiride oral tablet 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
glipizide oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
glipizide oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
glipizide oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
glipizide oral tablet extended release 24hr 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
glipizide oral tablet extended release 24hr 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
glipizide-metformin oral tablet 2.5-250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
glipizide-metformin oral tablet 2.5-500 mg, 5-500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
Antifungals		
Antifungals		
3-day vaginal vaginal cream 2 %	$0 (OTC)	
ABELCET INTRAVENOUS SUSPENSION 5 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
amphotericin b injection recon soln 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
amphotericin b liposome intravenous suspension for reconstitution 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
antifungal (clotrimazole) topical cream 1 %	$0 (OTC)	
antifungal (miconazole) topical powder 2 %	$0 (OTC)	
antifungal ringworm topical cream 1 %	$0 (OTC)	
athlete's foot (clotrimazole) topical cream 1 %	$0 (OTC)	
athlete's foot (clotrimazole) topical solution 1 %	$0 (OTC)	
athlete's foot (tolnaftate) topical aerosol powder 1 %	$0 (OTC)	
athlete's foot topical aerosol,spray 2 %	$0 (OTC)	
athlete's foot topical powder 2 %	$0 (OTC)	
athletic foot cream topical cream 1 %	$0 (OTC)	
azolen topical tincture 2 %	$0 (OTC)	
baza antifungal topical cream 2 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
blis-to-sol (tolnaftate) topical solution 1 %	$0 (OTC)	
ciclopirox topical cream 0.77 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
ciclopirox topical solution 8 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (19.8 per 30 days)
ciclopirox topical suspension 0.77 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
clotrimazole 1% solution (otc)	$0 (OTC)	
clotrimazole 1% topical cream (otc)	$0 (OTC)	
clotrimazole af topical cream 1 %	$0 (OTC)	
clotrimazole mucous membrane troche 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clotrimazole topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clotrimazole topical solution 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clotrimazole vaginal cream 1 %	$0 (OTC)	
clotrimazole-7 vaginal cream 1 %	$0 (OTC)	
clotrimazole-betamethasone topical cream 1-0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
CRESEMBA INTRAVENOUS RECON SOLN 372 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
critic-aid clear af(miconazol) topical ointment 2 %	$0 (OTC)	
dermafungal topical cream 2 %	$0 (OTC)	
desenex topical cream 2 %	$0 (OTC)	
desenex topical powder 2 %	$0 (OTC)	
econazole nitrate topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (170 per 30 days)
fluconazole in nacl (iso-osm) intravenous piggyback 200 mg/100 ml, 400 mg/200 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
flucytosine oral capsule 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
foot and sneaker topical aerosol powder 1 %	$0 (OTC)	
formula 3 topical solution 1 %	$0 (OTC)	
fungi cure topical spray,non-aerosol 1 %	$0 (OTC)	
fungi-nail (tolnaftate) topical solution 1 %	$0 (OTC)	
griseofulvin microsize oral suspension 125 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
griseofulvin microsize oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
griseofulvin ultramicrosize oral tablet 125 mg, 165 mg, 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
inzo antifungal topical cream 2 %	$0 (OTC)	
itch relief (clotrimazole) topical cream 1 %	$0 (OTC)	
itraconazole oral capsule 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
jock itch (clotrimazole) topical cream 1 %	$0 (OTC)	
ketoconazole oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ketoconazole topical cream 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
ketoconazole topical shampoo 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (360 per 30 days)
lasolex ac topical cream 2 %	$0 (OTC)	
lasolex al topical liquid 2 %	$0 (OTC)	
lasolex topical solution 1 %	$0 (OTC)	
micafungin intravenous recon soln 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
micatin topical cream 2 %	$0 (OTC)	
micoclear topical cream 1 %	$0 (OTC)	
miconazole nitrate topical cream 2 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
miconazole nitrate vaginal comb pack,prefill appl, cream 4 % (200 mg)- 2 % (9 gram)	$0 (OTC)	
miconazole nitrate vaginal cream 2 %	$0 (OTC)	
miconazole nitrate vaginal kit 1,200-2 mg-%	$0 (OTC)	
miconazole-3 vaginal cream 200 mg/5 gram (4 %)	$0 (OTC)	
miconazole-3 vaginal kit 200 mg- 2 % (9 gram)	$0 (OTC)	
miconazole-3 vaginal suppository 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
micro-guard topical powder 2 %	$0 (OTC)	
monistat 7 vaginal cream 2 %	$0 (OTC)	
nyamyc topical powder 100,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
nystatin oral suspension 100,000 unit/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
nystatin oral tablet 500,000 unit	$0/$1.60/$5.10 (Tier 1-Generic)	
nystatin topical cream 100,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
nystatin topical ointment 100,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
nystatin topical powder 100,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%	$0/$1.60/$5.10 (Tier 1-Generic)	
nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%	$0/$1.60/$5.10 (Tier 1-Generic)	
nystop topical powder 100,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
odor control foot-sneaker topical aerosol powder 1 %	$0 (OTC)	
odor-x athlete's foot topical aerosol powder 1 %	$0 (OTC)	
posaconazole oral tablet,delayed release (dr/ec) 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
remedy phytoplex antifungal topical ointment 2 %	$0 (OTC)	
ringworm topical cream 1 %	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
terbinafine hcl oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
terbinafine hcl topical cream 1 %	$0 (OTC)	
tolcylen topical solution 1 %	$0 (OTC)	
tolnaftate topical aerosol powder 1 %	$0 (OTC)	
tolnaftate topical cream 1 %	$0 (OTC)	
tolnaftate topical powder 1 %	$0 (OTC)	
trimazole topical cream 1 %	$0 (OTC)	
triple paste af topical ointment 2 %	$0 (OTC)	
tritolnacide s topical solution 1 %	$0 (OTC)	
voriconazole intravenous recon soln 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
voriconazole intravenous solution 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
voriconazole oral tablet 200 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
votriza-al topical lotion 1 %	$0 (OTC)	
zeasorb af topical powder 2 %	$0 (OTC)	
Antigout Agents		
Antigout Agents, Other		
allopurinol oral tablet 100 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
colchicine oral capsule 0.6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
colchicine oral tablet 0.6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
febuxostat oral tablet 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
probenecid oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
probenecid-colchicine oral tablet 500-0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Antihistamines		
Antihistamines		
aler-cap oral capsule 25 mg	$0 (OTC)	
alka-seltzer plus allergy oral tablet 25 mg	$0 (OTC)	
aller-chlor oral tablet 4 mg	$0 (OTC)	
allergy (chlorpheniramine) oral tablet 4 mg	$0 (OTC)	
allergy (diphenhydramine) oral liquid 12.5 mg/5 ml	$0 (OTC)	
allergy medication oral capsule 25 mg	$0 (OTC)	
allergy medicine oral tablet 25 mg	$0 (OTC)	
allergy relief(diphenhydramin) oral liquid 12.5 mg/5 ml	$0 (OTC)	
allergy relief(diphenhydramin) oral tablet,chewable 25 mg	$0 (OTC)	
banophen oral capsule 25 mg, 50 mg	$0 (OTC)	
banophen oral tablet 25 mg	$0 (OTC)	
benadryl allergy oral tablet 25 mg	$0 (OTC)	
benadryl allergy oral tablet 50 mg	$0 (OTC)	
child dimetapp cough-allergy oral tablet,chewable 12.5 mg	$0 (OTC)	
children's allergy (diphenhyd) oral liquid 12.5 mg/5 ml	$0 (OTC)	
children's allergy (diphenhyd) oral tablet,chewable 12.5 mg	$0 (OTC)	
children's wal-dryl allergy oral liquid 12.5 mg/5 ml	$0 (OTC)	
children's wal-dryl allergy oral tablet,disintegrating 12.5 mg	$0 (OTC)	
dayhist allergy oral tablet 1.34 mg	$0 (OTC)	
diphedryl oral liquid 12.5 mg/5 ml	$0 (OTC)	
diphenhydramine hcl oral capsule 25 mg	$0 (OTC)	
diphenhydramine hcl oral liquid 12.5 mg/5 ml	$0 (OTC)	
diphenhydramine hcl oral tablet 25 mg	$0 (OTC)	
ed chlorped jr oral syrup 2 mg/5 ml	$0 (OTC)	
geri-dryl oral liquid 12.5 mg/5 ml	$0 (OTC)	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
levocetirizine oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lohist - d oral liquid 2-30 mg/5 ml	$0 (OTC)	
maxallergy kids oral liquid 12.5 mg/5 ml	$0 (OTC)	
m-dryl oral liquid 12.5 mg/5 ml	$0 (OTC)	
nightime sleep oral capsule 50 mg	$0 (OTC)	
nytol oral tablet 25 mg	$0 (OTC)	
rynex pe oral solution 1-2.5 mg/5 ml	$0 (OTC)	
rynex pse oral liquid 1-15 mg/5 ml	$0 (OTC)	
siladryl sa oral liquid 12.5 mg/5 ml	$0 (OTC)	
simply sleep oral tablet 25 mg	$0 (OTC)	
sleep aid (diphenhydramine) oral capsule 25 mg	$0 (OTC)	
sleep tablet (diphenhydramine) oral tablet 25 mg	$0 (OTC)	
sleep time oral liquid 50 mg/30 ml	$0 (OTC)	
sominex maximum strength oral tablet 50 mg	$0 (OTC)	
sominex oral tablet 25 mg	$0 (OTC)	
sudogest cold and allergy oral tablet 4-60 mg	$0 (OTC)	
unisom sleepminis oral capsule 25 mg	$0 (OTC)	
wal-dryl allergy oral capsule 25 mg	$0 (OTC)	
wal-dryl allergy oral tablet 25 mg	$0 (OTC)	
wal-finate oral tablet 4 mg	$0 (OTC)	
wal-sleep z oral capsule 25 mg	$0 (OTC)	
wal-sleep z oral liquid 50 mg/30 ml	$0 (OTC)	
wal-sleep z oral tablet,disintegrating 25 mg	$0 (OTC)	
wal-som (diphenhydramine) oral capsule 50 mg	$0 (OTC)	
wal-tap oral solution 1-2.5 mg/5 ml	$0 (OTC)	
Antihypoglycemic Agents		
Antihypoglycemic Agents, Miscellaneous		
glucose oral tablet,chewable 2 gram, 4 gram	$0 (OTC)	
trueplus glucose oral tablet,chewable 3.75 gram	$0 (OTC)	

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

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Anti-Infectives (Skin And Mucous Membrane)		
Anti-Infectives (Skin And Mucous Membrane)		
clindamycin phosphate vaginal cream 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	$0/$1.60/$5.10 (Tier 1-Generic)	
terconazole vaginal cream 0.4 %, 0.8 %	$0/$1.60/$5.10 (Tier 1-Generic)	
terconazole vaginal suppository 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Antivirals (Skin And Mucous Membrane)		
abreva topical cream 10 %	$0 (OTC)	
docosanol topical cream 10 %	$0 (OTC)	
Antimigraine Agents		
Antimigraine Agents		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (1 per 30 days)
dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	ST; NM; NDS; QL (8 per 28 days)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (2 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (2 per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (3 per 30 days)
naratriptan oral tablet 1 mg, 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 30 days)
NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (18 per 30 days)
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
rizatriptan oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
rizatriptan oral tablet,disintegrating 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 30 days)
sumatriptan 4 mg/0.5 ml inject outer, suv	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 28 days)
SUMATRIPTAN 6 MG/0.5 ML AUTOINJ SUV	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 28 days)
sumatriptan nasal spray,non-aerosol 20 mg/actuation, 5 mg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (12 per 30 days)
sumatriptan succinate oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (9 per 30 days)
sumatriptan succinate oral tablet 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 30 days)
sumatriptan succinate subcutaneous pen injector 4 mg/0.5 mL	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 28 days)
sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 28 days)
sumatriptan succinate subcutaneous solution 6 mg/0.5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (5 per 28 days)
UBRELVY ORAL TABLET 100 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (16 per 30 days)
Antimycobacterials		
Antimycobacterials		
dapsone oral tablet 100 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ethambutol oral tablet 100 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
isoniazid oral tablet 100 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pyrazinamide oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rifabutin oral capsule 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rifampin intravenous recon soln 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rifampin oral capsule 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
rifapentine oral tablet 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
SIRTURO ORAL TABLET 100 MG, 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TRECATOR ORAL TABLET 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
Antinausea Agents		
Antinausea Agents		
aprepitant oral capsule 125 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; QL (2 per 28 days)
aprepitant oral capsule 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; QL (1 per 28 days)
aprepitant oral capsule 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; QL (4 per 28 days)
aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
compro rectal suppository 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dramamine (meclizine) oral tablet,chewable 25 mg	$0 (OTC)	
dramamine less drowsy oral tablet 25 mg	$0 (OTC)	
dramamine oral tablet 50 mg	$0 (OTC)	
driminate oral tablet 50 mg	$0 (OTC)	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (60 per 30 days)
meclizine 12.5 mg caplet (otc)	$0 (OTC)	
meclizine 25 mg tablet (otc)	$0 (OTC)	
meclizine oral tablet 12.5 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
meclizine oral tablet,chewable 25 mg	$0 (OTC)	
medi-meclizine oral tablet 25 mg	$0 (OTC)	
motion sickness (meclizine) oral tablet 25 mg	$0 (OTC)	
motion sickness relief oral tablet 50 mg	$0 (OTC)	
motion sickness relief(mecliz) oral tablet 25 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
motion sickness relief(mecliz) oral tablet,chewable 25 mg	$0 (OTC)	
motion-time oral tablet,chewable 25 mg	$0 (OTC)	
ondansetron hcl oral tablet 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
ondansetron oral tablet,disintegrating 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
prochlorperazine maleate oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prochlorperazine rectal suppository 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
promethazine injection solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
promethazine oral tablet 12.5 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
promethazine rectal suppository 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
promethegan rectal suppository 12.5 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
scopolamine base transdermal patch 3 day 1 mg over 3 days	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; QL (10 per 30 days); AGE (Max 64 Years)
travel sickness oral tablet 50 mg	$0 (OTC)	
travel-ease (meclizine) oral tablet 25 mg	$0 (OTC)	
travel-ease (meclizine) oral tablet,chewable 25 mg	$0 (OTC)	
verticalm oral tablet 25 mg	$0 (OTC)	
wal-dram 2 oral tablet 25 mg	$0 (OTC)	
wal-dram oral tablet 50 mg	$0 (OTC)	
Antiparasite Agents		
Antiparasite Agents		
albendazole oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
atovaquone oral suspension 750 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
chloroquine phosphate oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
COARTEM ORAL TABLET 20-120 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
hydroxychloroquine oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
hydroxychloroquine oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
hydroxychloroquine oral tablet 300 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
IMPAVIDO ORAL CAPSULE 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (84 per 28 days)
ivermectin oral tablet 3 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mefloquine oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nitazoxanide oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (60 per 30 days)
pentamidine inhalation recon soln 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
pentamidine injection recon soln 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
praziquantel oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
PRIMAQUINE ORAL TABLET 26.3 MG (15 MG BASE)	$0/$4.90/$12.65 (Tier 1-Brand)	
pyrimethamine oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
quinine sulfate oral capsule 324 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA
tinidazole oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Antiparkinsonian Agents		
Antiparkinsonian Agents		
amantadine hcl oral capsule 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amantadine hcl oral solution 50 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
amantadine hcl oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
benztropine oral tablet 0.5 mg, 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bromocriptine oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cabergoline oral tablet 0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
entacapone oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ONAPGO SUBCUTANEOUS CARTRIDGE 4.9 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (600 per 30 days)
pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rasagiline oral tablet 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ropinirole oral tablet extended release 24 hr 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
selegiline hcl oral capsule 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
selegiline hcl oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
trihexyphenidyl oral tablet 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
VYALEV CONTIN. SUBCUTANEOUS INFUSION SOLUTION 12-240 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (560 per 28 days)
Antipsychotic Agents		
Antipsychotic Agents		
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 720 MG/2.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2.4 per 42 days)
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 960 MG/3.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (3.2 per 42 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2 per 28 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG, 400 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2 per 28 days)
aripiprazole oral solution 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
aripiprazole oral tablet,disintegrating 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (90 per 30 days)
aripiprazole oral tablet,disintegrating 15 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (60 per 30 days)
ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 675 MG/2.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (4.8 per 365 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (3.9 per 14 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1.6 per 14 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2.4 per 14 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (3.2 per 14 days)
asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
BYSANTI ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (60 per 30 days)
BYSANTI TITRATION PACK A ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
BYSANTI TITRATION PACK B ORAL TABLETS,DOSE PACK 1 MG(6)-2MG(2)- 6 MG(2)-8 MG(2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
BYSANTI TITRATION PACK C ORAL TABLETS,DOSE PACK 1 MG(4)-2MG(2)- 6 MG (2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (30 per 30 days)
chlorpromazine injection solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (90 per 30 days)
clozapine oral tablet,disintegrating 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (180 per 30 days)
clozapine oral tablet,disintegrating 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (120 per 30 days)
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (60 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
COBENFY STARTER PACK ORAL CAPSULE,DOSE PACK 50 MG-20 MG /100 MG-20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS
ERZOFRI INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.75 per 21 days)
ERZOFRI INTRAMUSCULAR SYRINGE 156 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1 per 21 days)
ERZOFRI INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1.5 per 21 days)
ERZOFRI INTRAMUSCULAR SYRINGE 351 MG/2.25 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2.25 per 21 days)
ERZOFRI INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.25 per 21 days)
ERZOFRI INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.5 per 21 days)
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (60 per 30 days)
FANAPT TITRATION PACK A ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
FANAPT TITRATION PACK B ORAL TABLETS,DOSE PACK 1 MG(6)-2MG(2)- 6 MG(2)-8 MG(2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
FANAPT TITRATION PACK C ORAL TABLETS,DOSE PACK 1 MG(4)-2 MG(2) -6 MG (2)	$0/$4.90/$12.65 (Tier 1-Brand)	ST
fluphenazine decanoate injection solution 25 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fluphenazine hcl injection solution 2.5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fluphenazine hcl oral concentrate 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fluphenazine hcl oral elixir 2.5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml (1 ml), 50 mg/ml, 50 mg/ml(1ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
haloperidol lactate injection solution 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
haloperidol lactate intramuscular syringe 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
haloperidol lactate oral concentrate 2 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (3.5 per 166 days)
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,560 MG/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (5 per 166 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.75 per 21 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1 per 21 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1.5 per 21 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (0.25 per 21 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.5 per 21 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.88 per 70 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1.32 per 70 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1.75 per 70 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2.63 per 70 days)
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
molindone oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
molindone oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (270 per 30 days)
molindone oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (120 per 30 days)
NUPLAZID ORAL CAPSULE 34 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
NUPLAZID ORAL TABLET 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (30 per 30 days)
olanzapine intramuscular recon soln 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
olanzapine oral tablet,disintegrating 10 mg, 15 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
OPIPZA ORAL FILM 10 MG, 2 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS
paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
paliperidone oral tablet extended release 24hr 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
PERSERIS SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 120 MG, 90 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1 per 30 days)
pimozide oral tablet 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
quetiapine oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
risperidone microspheres intramuscular suspension,extended rel recon 12.5 mg/2 ml, 25 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2 per 28 days)
risperidone microspheres intramuscular suspension,extended rel recon 37.5 mg/2 ml, 50 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (2 per 28 days)
risperidone oral solution 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
RYKINDO INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2 per 28 days)
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (30 per 30 days)
thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 100 MG/0.28 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.28 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 125 MG/0.35 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.35 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 150 MG/0.42 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.42 per 56 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 200 MG/0.56 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.56 per 56 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 250 MG/0.7 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.7 per 56 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 50 MG/0.14 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.14 per 28 days)
UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 75 MG/0.21 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (0.21 per 28 days)
VERSACLOZ ORAL SUSPENSION 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (540 per 30 days)
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (30 per 30 days)
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (6 per 28 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (2 per 28 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (2 per 28 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 405 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (1 per 28 days)
Antivirals (Systemic)		
Antiretrovirals		
abacavir oral solution 20 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
abacavir oral tablet 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
abacavir-lamivudine oral tablet 600-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
APTIVUS ORAL CAPSULE 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
atazanavir oral capsule 150 mg, 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML, 600 MG/3 ML- 900 MG/3 ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
cabotegravir intramuscular suspension,extended release 400 mg/2 mL (200 mg/mL), 600 mg/3 mL (200 mg/mL)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (24 per 365 days)
CIMDUO ORAL TABLET 300-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
darunavir oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
darunavir oral tablet 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
DELSTRIGO ORAL TABLET 100-300-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
didanosine oral capsule,delayed release(dr/ec) 250 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
DOVATO ORAL TABLET 50-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
efavirenz oral capsule 200 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
efavirenz oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
efavirenz-lamivu-tenofov disop oral tablet 400-300-300 mg, 600-300-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
emtricitabine oral capsule 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 167-250 mg, 200-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
emtricitabine-tenofovir (tdf) oral tablet 133-200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
emtricita-rilpivirine-tenof df oral tablet 200-25-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
EMTRIVA ORAL SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	
etravirine oral tablet 100 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
EVOTAZ ORAL TABLET 300-150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
fosamprenavir oral tablet 700 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
GENVOYA ORAL TABLET 150-150-200-10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
IDVYNSO ORAL TABLET 100-0.25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
INTELENCE ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
ISENTRESS HD ORAL TABLET 600 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ISENTRESS ORAL POWDER IN PACKET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ISENTRESS ORAL TABLET 400 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ISENTRESS ORAL TABLET,CHEWABLE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ISENTRESS ORAL TABLET,CHEWABLE 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
JULUCA ORAL TABLET 50-25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
KALETRA ORAL SOLUTION 400-100 MG/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (480 per 30 days)
lamivudine oral solution 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
lamivudine oral tablet 100 mg, 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lamivudine-zidovudine oral tablet 150-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
LEXIVA ORAL SUSPENSION 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	
lopinavir-ritonavir oral solution 400-100 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (480 per 30 days)
lopinavir-ritonavir oral tablet 100-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 30 days)
lopinavir-ritonavir oral tablet 200-50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
maraviroc oral tablet 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
nevirapine oral suspension 50 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1200 per 30 days)
nevirapine oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
nevirapine oral tablet extended release 24 hr 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
NORVIR ORAL POWDER IN PACKET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
ODEFSEY ORAL TABLET 200-25-25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PIFELTRO ORAL TABLET 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG-MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PREZISTA ORAL SUSPENSION 100 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PREZISTA ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
PREZISTA ORAL TABLET 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
REYATAZ ORAL POWDER IN PACKET 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
rilpivirine hcl oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
rilpivirine intramuscular suspension,extended release 600 mg/2 mL (300 mg/mL), 900 mg/3 mL (300 mg/mL)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
ritonavir oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
SELZENTRY ORAL SOLUTION 20 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
SELZENTRY ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
SELZENTRY ORAL TABLET 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
STRIBILD ORAL TABLET 150-150-200-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
SUNLENCA ORAL TABLET 300 MG, 300 MG (4-TABLET PACK), 300 MG (5-TABLET PACK)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
SYMTUZA ORAL TABLET 800-150-200-10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
tenofovir disoproxil fumarate oral tablet 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
TIVICAY ORAL TABLET 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
TIVICAY ORAL TABLET 25 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TRIUMEQ ORAL TABLET 600-50-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
TRIZIVIR ORAL TABLET 300-150-300 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33 ML (150 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
VEMLIDY ORAL TABLET 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (30 per 30 days)
VIRACEPT ORAL TABLET 250 MG, 625 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS
VOCABRIA ORAL TABLET 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
zidovudine oral capsule 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
zidovudine oral syrup 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
zidovudine oral tablet 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Antivirals, Miscellaneous		
LIVTENCITY ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
oseltamivir oral capsule 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (84 per 180 days)
oseltamivir oral capsule 45 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (48 per 180 days)
oseltamivir oral capsule 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (42 per 180 days)
oseltamivir oral suspension for reconstitution 6 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (540 per 180 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (20 per 5 days)
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (6)- 100 MG (5)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (11 per 28 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 5 days)
PREVYMIS ORAL TABLET 240 MG, 480 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 180 days)
Hcv Antivirals		
EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
EPCLUSA ORAL PELLETS IN PACKET 200-50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
HARVONI ORAL PELLETS IN PACKET 33.75-150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
HARVONI ORAL PELLETS IN PACKET 45-200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
HARVONI ORAL TABLET 45-200 MG, 90-400 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
VOSEVI ORAL TABLET 400-100-100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
Interferons		
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Nucleosides And Nucleotides		
acyclovir oral capsule 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
acyclovir oral suspension 200 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
acyclovir oral tablet 400 mg, 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
acyclovir sodium intravenous solution 50 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
adefovir oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
entecavir oral tablet 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
famciclovir oral tablet 125 mg, 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ribavirin oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
valacyclovir oral tablet 1 gram, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
valganciclovir oral recon soln 50 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
valganciclovir oral tablet 450 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Blood Products/Modifiers/Volume Expanders		
Anticoagulants		
dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	$0/$4.90/$12.65 (Tier 1-Brand)	
ELIQUIS ORAL TABLET 2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
ELIQUIS ORAL TABLET 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (74 per 30 days)
ELIQUIS ORAL TABLET FOR SUSPENSION 0.5 MG, 1.5 MG (0.5 MG X 3), 2 MG (0.5 MG X 4)	$0/$4.90/$12.65 (Tier 1-Brand)	QL (960 per 30 days)
ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE 0.15 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (120 per 30 days)
enoxaparin subcutaneous syringe 100 mg/ml, 150 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
enoxaparin subcutaneous syringe 120 mg/0.8 ml, 80 mg/0.8 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (48 per 30 days)
enoxaparin subcutaneous syringe 30 mg/0.3 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 30 days)
enoxaparin subcutaneous syringe 40 mg/0.4 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (24 per 30 days)
enoxaparin subcutaneous syringe 60 mg/0.6 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (36 per 30 days)
fondaparinux subcutaneous syringe 10 mg/0.8 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (24 per 30 days)
fondaparinux subcutaneous syringe 2.5 mg/0.5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (15 per 30 days)
fondaparinux subcutaneous syringe 5 mg/0.4 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (12 per 30 days)
fondaparinux subcutaneous syringe 7.5 mg/0.6 ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS; QL (18 per 30 days)
heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rivaroxaban oral suspension for reconstitution 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (600 per 30 days)
rivaroxaban oral tablet 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	$0/$4.90/$12.65 (Tier 1-Brand)	
XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (600 per 30 days)
XARELTO ORAL TABLET 10 MG, 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
XARELTO ORAL TABLET 15 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
XARELTO ORAL TABLET 2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (60 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Blood Formation Modifiers		
ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
eltrombopag olamine oral powder in packet 12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (90 per 30 days)
eltrombopag olamine oral powder in packet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (180 per 30 days)
eltrombopag olamine oral tablet 12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (90 per 30 days)
eltrombopag olamine oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (30 per 30 days)
eltrombopag olamine oral tablet 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (60 per 30 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (20 per 30 days)
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
NYVEPRIA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (12 per 28 days)
RETACRIT INJECTION SOLUTION 40,000 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (4 per 28 days)
UDENYCA ONBODY SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Hematologic Agents, Miscellaneous		
anagrelide oral capsule 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tranexamic acid oral tablet 650 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Platelet-Aggregation Inhibitors		
aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cilostazol oral tablet 100 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clopidogrel oral tablet 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
pentoxifylline oral tablet extended release 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prasugrel hcl oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ticagrelor oral tablet 60 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Caloric Agents		
Caloric Agents		
CLINIMIX 6%-D5W (SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 6-5 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
CLINIMIX 8%-D10W(SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 8-10 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
CLINIMIX 8%-D14W(SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 8-14 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
CLINIMIX E 8%-D10W SULFITEFREE INTRAVENOUS PARENTERAL SOLUTION 8-10 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
CLINIMIX E 8%-D14W SULFITEFREE INTRAVENOUS PARENTERAL SOLUTION 8-14 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
dextrose 5 % in water (d5w) intravenous parenteral solution	$0/$1.60/$5.10 (Tier 1-Generic)	
dextrose oral liquid 15 gram/59 ml, 15 gram/60 ml	$0 (OTC)	
gluco burst oral gel 40 %	$0 (OTC)	
glucose gel oral gel 40 %	$0 (OTC)	
glutose-15 oral gel 40 %	$0 (OTC)	
l-carnitine (tartrate) oral capsule 500 mg	$0 (OTC)	
l-carnitine oral tablet 500 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
levocarnitine tartrate oral capsule 250 mg	$0 (OTC)	
microdot glucose gel oral gel 40 %	$0 (OTC)	
trueplus glucose oral gel in packet 15 gram/32 ml	$0 (OTC)	
trueplus glucose oral liquid 15 gram/60 ml	$0 (OTC)	
Cardiovascular Agents		
Alpha-Adrenergic Agents		
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	
doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
droxidopa oral capsule 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (180 per 30 days)
droxidopa oral capsule 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (180 per 30 days)
guanfacine oral tablet 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
midodrine oral tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prazosin oral capsule 1 mg, 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sinus decongestant (pe) oral tablet 10 mg	$0 (OTC)	
sinus pressure-cong relief pe oral tablet 10 mg	$0 (OTC)	
wal-phed pe oral tablet 10 mg	$0 (OTC)	
Angiotensin Ii Receptor Antagonists		
candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
ENTRESTO SPRINKLE ORAL PELLET 15-16 MG, 6-6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (240 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
irbesartan oral tablet 150 mg, 300 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
losartan oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
olmesartan oral tablet 20 mg, 40 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
olmesartan-amlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sacubitril-valsartan oral tablet 24-26 mg, 49-51 mg, 97-103 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
telmisartan oral tablet 20 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Angiotensin-Converting Enzyme Inhibitors		
benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
fosinopril oral tablet 10 mg, 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
moexipril oral tablet 15 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
trandolapril oral tablet 1 mg, 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Antiarrhythmic Agents		
amiodarone oral tablet 100 mg, 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
flecainide oral tablet 100 mg, 150 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
MULTAQ ORAL TABLET 400 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
pacerone oral tablet 100 mg, 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
propafenone oral capsule,extended release 12 hr 225 mg, 325 mg, 425 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
propafenone oral tablet 150 mg, 225 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
quinidine sulfate oral tablet 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Beta-Adrenergic Blocking Agents		
acebutolol oral capsule 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
atenolol oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bisoprolol fumarate oral tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
labetalol oral tablet 100 mg, 200 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
metoprolol ta-hydrochlorothiaz oral tablet 50-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sotalol af oral tablet 120 mg, 160 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Calcium-Channel Blocking Agents		
cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diltiazem hcl oral capsule,extended release 24 hr 360 mg, 420 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
taztia xt oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tiadylt er oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
verapamil oral capsule,ext rel. pellets 24 hr 360 mg	$0/$4.90/$12.65 (Tier 1-Brand)	
verapamil oral tablet 120 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
verapamil oral tablet extended release 120 mg, 180 mg, 240 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Cardiovascular Agents, Miscellaneous		
ATTRUBY ORAL TABLET 356 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (112 per 28 days)
CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
CORLANOR ORAL SOLUTION 5 MG/5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (600 per 30 days)
digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)	$0/$1.60/$5.10 (Tier 1-Generic)	
epinephrine injection auto-injector 0.15 mg/0.15 mL, 0.3 mg/0.3 mL	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 30 days)
hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
icatibant subcutaneous syringe 30 mg/3 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (18 per 30 days)
ivabradine oral tablet 5 mg, 7.5 mg	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
metyrosine oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
VYNDAMAX ORAL CAPSULE 61 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
Dihydropyridines		
amlodipine oral tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amlodipine-valsartan-hcthiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Diuretics		
amiloride oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
chlorthalidone oral tablet 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
furosemide injection solution 10 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
furosemide oral tablet 20 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrochlorothiazide oral capsule 12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
indapamide oral tablet 1.25 mg, 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
JYNARQUE ORAL TABLET 15 MG, 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (120 per 30 days)
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
spironolactone oral tablet 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
spironolacton-hydrochlorothiaz oral tablet 25-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tolvaptan (polycys kidney dis) oral tablets, sequential 15 mg (am)/ 15 mg (pm), 30 mg (am)/ 15 mg (pm), 45 mg (am)/ 15 mg (pm), 60 mg (am)/ 30 mg (pm), 90 mg (am)/ 30 mg (pm)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (56 per 28 days)
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
triamterene-hydrochlorothiazid oral capsule 37.5-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Dyslipidemics		
amlodipine-atorvastatin oral tablet 10-10 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
amlodipine-atorvastatin oral tablet 10-20 mg, 10-40 mg, 10-80 mg, 5-20 mg, 5-40 mg, 5-80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cholestyramine (with sugar) oral powder in packet 4 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
cholestyramine light oral powder in packet 4 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
colesevelam oral powder in packet 3.75 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
colesevelam oral tablet 625 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
colestipol oral packet 5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
colestipol oral tablet 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
endur-acin oral tablet extended release 250 mg, 500 mg, 750 mg	$0 (OTC)	
ezetimibe oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fenofibrate oral tablet 160 mg, 54 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
fluvastatin oral capsule 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
fluvastatin oral tablet extended release 24 hr 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
gemfibrozil oral tablet 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
icosapent ethyl oral capsule 0.5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (240 per 30 days)
icosapent ethyl oral capsule 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
lovastatin oral tablet 10 mg, 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
NEXLETOL ORAL TABLET 180 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (30 per 30 days)
NEXLIZET ORAL TABLET 180-10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (30 per 30 days)
niacin (inositol niacinate) oral tablet 500 mg	$0 (OTC)	
niacin oral capsule 100 mg	$0 (OTC)	
niacin oral capsule, extended release 250 mg, 500 mg	$0 (OTC)	
niacin oral tablet 100 mg, 250 mg, 50 mg, 500 mg	$0 (OTC)	
niacin oral tablet extended release 1,000 mg, 250 mg, 500 mg	$0 (OTC)	
niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
omega-3 acid ethyl esters oral capsule 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (120 per 30 days)
pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prevalite oral powder in packet 4 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (7 per 28 days)
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (6 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	ST; QL (6 per 28 days)
rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Renin-Angiotensin-Aldosterone System Inhibitors		
aliskiren oral tablet 150 mg, 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
eplerenone oral tablet 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
Vasodilators		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
isosorbide mononitrate oral tablet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
minoxidil oral tablet 10 mg, 2.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	$0/$1.60/$5.10 (Tier 1-Generic)	
nitro-time oral capsule, extended release 2.5 mg, 6.5 mg, 9 mg	$0 (OTC)	
Central Nervous System Agents		
Central Nervous System Agents		
atomoxetine oral capsule 10 mg, 18 mg, 25 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
atomoxetine oral capsule 100 mg, 60 mg, 80 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
AUSTEDO ORAL TABLET 12 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (120 per 30 days)
AUSTEDO ORAL TABLET 6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (90 per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 18 MG, 24 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 30 MG, 36 MG, 42 MG, 48 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (210 per 30 days)
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG, 6 MG (14)-12 MG (14)-24 MG (14)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
BETASERON SUBCUTANEOUS KIT 0.3 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (15 per 30 days)
cladribine 10 mg x 10 tab pk outer	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
cladribine(multiple sclerosis) oral tablet 10 mg (10 pack), 10 mg (4 pack), 10 mg (5 pack), 10 mg (6 pack), 10 mg (7 pack), 10 mg (8 pack), 10 mg (9 pack)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
dalfampridine oral tablet extended release 12 hr 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (60 per 30 days)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 20 mg, 25 mg, 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (14 per 7 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg (14)- 240 mg (46)	$0/$1.60/$5.10 (Tier 1-Generic)	PA
dimethyl fumarate oral capsule,delayed release(dr/ec) 240 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (60 per 30 days)
fingolimod oral capsule 0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (30 per 30 days)
glatiramer subcutaneous syringe 20 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
glatiramer subcutaneous syringe 40 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (12 per 28 days)
Glatopa subcutaneous syringe 20 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
Glatopa subcutaneous syringe 40 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (12 per 28 days)
guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE,DOSE PACK 40 MG (7)- 80 MG (21)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE 40 MG, 60 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)
KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1.2 per 28 days)
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lithium carbonate oral tablet 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lithium carbonate oral tablet extended release 300 mg, 450 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lithium citrate oral solution 8 meq/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
MAYZENT ORAL TABLET 0.25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (112 per 28 days)
MAYZENT ORAL TABLET 1 MG, 2 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (30 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (7 TABS)	$0/$4.90/$12.65 (Tier 1-Brand)	PA
MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (12 TABS)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (900 per 30 days)
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
riluzole oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tetrabenazine oral tablet 12.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (112 per 28 days)
tetrabenazine oral tablet 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (112 per 28 days)
VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC) 231 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (120 per 30 days)
Contraceptives		
Contraceptives		
afirmelle oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
aimsco latex condom device	$0 (OTC)	
altavera (28) oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
alyacen 1/35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
alyacen 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
amethyst (28) oral tablet 90-20 mcg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
apri oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
aubra eq oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
aurovela 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
aurovela 1/20 (21) oral tablet 1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
aurovela 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
aurovela fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
aurovela fe 1-20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
aviane oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
ayuna oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	
blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
camila oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
chateal eq (28) oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cryselle (28) oral tablet 0.3-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
cyred eq oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
dasetta 1/35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
dasetta 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
deblitane oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	
dolishale oral tablet 90-20 mcg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
elinest oral tablet 0.3-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
eluryng vaginal ring 0.12-0.015 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1 per 28 days)
emzahh oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
enilloring vaginal ring 0.12-0.015 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1 per 28 days)
enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0/$1.60/$5.10 (Tier 1-Generic)	
enskyce oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
errin oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
estarylla oral tablet 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1 per 28 days)
falmina (28) oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
fantasy condom device	$0 (OTC)	
fc2 female condom	$0 (OTC)	
feirza oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
hailey fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
haloette vaginal ring 0.12-0.015 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1 per 28 days)
heather oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
iclevia oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (91 per 84 days)
incassia oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
introvale oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (91 per 84 days)
isibloom oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
jencycla oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Jolessa oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0/$4.90/$12.65 (Tier 1-Brand)	QL (91 per 84 days)
juleber oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
junel 1/20 (21) oral tablet 1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
kelnor 1/35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
kelnor 1/50 (28) oral tablet 1-50 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
kimono lubricated condoms device	$0 (OTC)	
kimono microthin aqua lube con device	$0 (OTC)	
kimono microthin condoms device	$0 (OTC)	
kimono microthin large condoms device	$0 (OTC)	
kimono textured condoms device	$0 (OTC)	
kimono thin lubricated condoms device	$0 (OTC)	
kurvelo (28) oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HR (5 YRS) 19.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
larin 1/20 (21) oral tablet 1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
larin 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
lessina oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0/$1.60/$5.10 (Tier 1-Generic)	
levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)	$0/$4.90/$12.65 (Tier 1-Brand)	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg, 90-20 mcg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (91 per 84 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0/$1.60/$5.10 (Tier 1-Generic)	
levora-28 oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HR (8 YRS) 52 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
low-ogestrel (28) oral tablet 0.3-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
luizza oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
lutera (28) oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
lyleq oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lyza oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
marlissa (28) oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
meleya oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
microgestin 1/20 (21) oral tablet 1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
mili oral tablet 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
MIRENA INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/24HR (UP TO 8 YRS) 52 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE 175 SQUARE MM	$0/$4.90/$12.65 (Tier 1-Brand)	
mono-linyah oral tablet 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
NEXPLANON SUBDERMAL IMPLANT 68 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (3 per 28 days)
norethindrone (contraceptive) oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1-20(5)/1-30(7) /1mg-35mcg (9), 1.5 mg-30 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg, 0.18/0.215/0.25 mg-0.035mg (28), 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
nortrel 1/35 (21) oral tablet 1-35 mg-mcg (21)	$0/$1.60/$5.10 (Tier 1-Generic)	
nortrel 1/35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
nylia 1/35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
nylia 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
orquidea oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	
portia 28 oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
reclipsen (28) oral tablet 0.15-0.03 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
setlakin oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (91 per 84 days)
sharobel oral tablet 0.35 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
simliya (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HR (3 YRS) 13.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
sprintec (28) oral tablet 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sronyx oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0/$1.60/$5.10 (Tier 1-Generic)	
tarina fe 1-20 eq (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0/$1.60/$5.10 (Tier 1-Generic)	
tilia fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-estarylla oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-linyah oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-lo-mili oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-mili oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0/$1.60/$5.10 (Tier 1-Generic)	
tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
tri-vylibra oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0/$1.60/$5.10 (Tier 1-Generic)	
trojan bareskin device	$0 (OTC)	
trojan ultra ribbed condom device	$0 (OTC)	
true cover condom device	$0 (OTC)	
trustex latex condom device	$0 (OTC)	
trustex lubricated condoms device	$0 (OTC)	
trustex non-lub condoms device	$0 (OTC)	
trustex-ria lub/spermicide device	$0 (OTC)	
trustex-ria non-lub condoms device	$0 (OTC)	
turqoz (28) oral tablet 0.3-30 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
Tyblume oral tablet,chewable 0.1 mg- 20 mcg	$0/$4.90/$12.65 (Tier 1-Brand)	
valtya oral tablet 1-35 mg-mcg, 1-50 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
vcf contraceptive gel vaginal gel 4 %	$0 (OTC)	
vienva oral tablet 0.1-20 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	
volnea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0/$1.60/$5.10 (Tier 1-Generic)	
vylibra oral tablet 0.25-0.035 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
xarah fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0/$1.60/$5.10 (Tier 1-Generic)	
xulane transdermal patch weekly 150-35 mcg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (3 per 28 days)
zafemy transdermal patch weekly 150-35 mcg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (3 per 28 days)
zovia 1-35 (28) oral tablet 1-35 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Cough And Cold Products		
Cough And Cold Products		
adult wal-tussin dm max oral liquid 10-200 mg/5 ml	$0 (OTC)	
alka-seltzer plus mucus-conges oral capsule 10-200 mg	$0 (OTC)	
antitussive dm oral syrup 10-100 mg/5 ml	$0 (OTC)	
bio-dtuss dmx oral liquid 1-30-20 mg/5 ml	$0 (OTC)	
chest congestion relief dm oral syrup 10-100 mg/5 ml	$0 (OTC)	
chest congestion relief oral liquid 100 mg/5 ml	$0 (OTC)	
chest congestion relief oral tablet 400 mg	$0 (OTC)	
chest congestion-cough relief oral tablet 20-400 mg	$0 (OTC)	
codeine-guaifenesin oral liquid 10-100 mg/5 ml	$0 (OTC)	QL (1800 per 30 days)
coditussin ac oral liquid 10-200 mg/5 ml	$0 (OTC)	
coricidin hbp chest cong-cough oral capsule 10-200 mg	$0 (OTC)	
dextromethorphan polistirex oral suspension,extended rel 12 hr 30 mg/5 ml	$0 (OTC)	
diabetic tussin dm oral liquid 10-200 mg/5 ml	$0 (OTC)	
dometuss-dm oral liquid 30-200 mg/5 ml	$0 (OTC)	
ed bron gp oral liquid 5-100 mg/5 ml	$0 (OTC)	
endacof - dm oral solution 1-2.5-5 mg/5 ml	$0 (OTC)	
expectorant cough syrup oral liquid 100 mg/5 ml	$0 (OTC)	
expectorant dm oral liquid 20-300 mg/5 ml	$0 (OTC)	
expectorant oral liquid 100 mg/5 ml	$0 (OTC)	
expectorant oral tablet 200 mg	$0 (OTC)	
giltuss ex oral liquid 200 mg/5 ml	$0 (OTC)	
guaicon dms oral liquid in packet 20-200 mg/10 ml	$0 (OTC)	
guaifenesin oral tablet 200 mg	$0 (OTC)	
mar-cof cg oral liquid 7.5-225 mg/5 ml	$0 (OTC)	
mucinex d maximum strength oral tablet extended release 12 hr 120-1,200 mg	$0 (OTC)	
mucinex dm oral tablet extended release 12 hr 30-600 mg, 60-1,200 mg	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
mucinex oral tablet extended release 12hr 1,200 mg, 600 mg	$0 (OTC)	
mucus relief er oral tablet extended release 12hr 600 mg	$0 (OTC)	
mucus-er max oral tablet extended release 12hr 1,200 mg	$0 (OTC)	
neo-tuss oral liquid 30-200 mg/5 ml	$0 (OTC)	
ninjacof-xg oral liquid 8-200 mg/5 ml	$0 (OTC)	
pseudoephedrine hcl oral tablet 30 mg, 60 mg	$0 (OTC)	
pseudoephedrine hcl oral tablet extended release 120 mg	$0 (OTC)	
refenesen oral tablet 400 mg	$0 (OTC)	
robitussin cough-chest cong dm oral liquid 5-100 mg/5 ml	$0 (OTC)	
scot-tussin expectorant oral liquid 100 mg/5 ml	$0 (OTC)	
sinus 12 hour oral tablet extended release 120 mg	$0 (OTC)	
sudogest 12-hour oral tablet extended release 120 mg	$0 (OTC)	
sudogest oral tablet 30 mg, 60 mg	$0 (OTC)	
suphedrin oral liquid 15 mg/5 ml	$0 (OTC)	
suphedrine 12 hour oral tablet extended release 120 mg	$0 (OTC)	
suphedrine oral tablet 30 mg	$0 (OTC)	
supress dm oral drops 5-50 mg/ml	$0 (OTC)	
tussin cough-chest congestion oral liquid 10-100 mg/5 ml	$0 (OTC)	
vicks dayquil mucus control dm oral liquid 10-200 mg/15 ml	$0 (OTC)	
wal-phed d oral tablet extended release 120 mg	$0 (OTC)	
wal-phed oral tablet 30 mg	$0 (OTC)	
wal-tussin dm clear oral syrup 10-100 mg/5 ml	$0 (OTC)	
wal-tussin oral liquid 100 mg/5 ml	$0 (OTC)	
zephrex-d oral tablet (abuse-resistant) 30 mg	$0 (OTC)	
zyncof oral liquid 20-400 mg/5 ml	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Dental And Oral Agents		
Dental And Oral Agents		
cevimeline oral capsule 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
chlorhexidine gluconate mucous membrane mouthwash 0.12 %	$0/$1.60/$5.10 (Tier 1-Generic)	
denta 5000 plus dental cream 1.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
dentagel dental gel 1.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluoridex daily defense dental paste 1.1 %	$0 (OTC)	
periogard mucous membrane mouthwash 0.12 %	$0/$1.60/$5.10 (Tier 1-Generic)	
pilocarpine hcl oral tablet 5 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sf 5000 plus dental cream 1.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium fluoride dental gel 1.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium fluoride dental solution 0.2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium fluoride-pot nitrate dental paste 1.1-5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
triamcinolone acetonide dental paste 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
Dermatological Agents		
Dermatological Agents, Other		
4-n-1 no rinse wash topical cream 1 %	$0 (OTC)	
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
acne cleanser topical cleanser 2 %	$0 (OTC)	
acne control (salicylic acid) topical cleanser 2 %	$0 (OTC)	
acne control(benzoyl peroxide) topical cleanser 10 %	$0 (OTC)	
acne foaming wash topical cleanser 10 %	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
acne medication topical gel 10 %, 5 %	$0 (OTC)	
acne treatment (benzoyl perox) topical cream 10 %	$0 (OTC)	
acne-clear topical gel 10 %	$0 (OTC)	
acyclovir topical ointment 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
amerigel topical gel	$0 (OTC)	
amlactin topical lotion 12 %	$0 (OTC)	
ammonium lactate topical cream 12 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ammonium lactate topical lotion 12 %	$0/$1.60/$5.10 (Tier 1-Generic)	
anti-dandruff topical shampoo 1 %	$0 (OTC)	
antiseptic skin clnsr(chlorhe) topical liquid 4 %	$0 (OTC)	
aquaphor baby diaper rash topical ointment 40 %	$0 (OTC)	
arthritis pain relief(capsaic) topical cream 0.075 %, 0.1 %	$0 (OTC)	
benzoyl peroxide topical gel 2.5 %	$0 (OTC)	
betasept surgical scrub topical liquid 4 %	$0 (OTC)	
betatar gel topical shampoo 2.5 %	$0 (OTC)	
boudreauxs butt paste barrier topical ointment 1 %	$0 (OTC)	
bp wash topical cleanser 2.5 %	$0 (OTC)	
calamine-zinc oxide topical lotion , 8-8 %	$0 (OTC)	
calcipotriene scalp solution 0.005 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
calcipotriene topical cream 0.005 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
calcipotriene topical ointment 0.005 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
calicylic topical cream 10 %	$0 (OTC)	
callus removers topical adhesive patch,medicated 40 %	$0 (OTC)	
calmoseptine topical ointment 0.44-20.6 %	$0 (OTC)	
calprotect topical ointment 0.44-20.6 %	$0 (OTC)	
capsaicin topical adhesive patch,medicated 0.025 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
capsaicin topical cream 0.025 %, 0.035 %, 0.1 %	$0 (OTC)	
capsaicin topical liquid 0.15 %	$0 (OTC)	
capsicum topical adhesive patch,medicated 0.025 %	$0 (OTC)	
chamosyn topical ointment 0.45-20 %	$0 (OTC)	
chlorhexidine gluconate topical towelette 2 %	$0 (OTC)	
clear pore cleanser-mask topical cleanser 3.5 %	$0 (OTC)	
clearasil daily clear(benzoyl) topical cream 10 %	$0 (OTC)	
clearasil rapid rescue (salic) topical cleanser 2 %	$0 (OTC)	
clearasil stubborn acne topical cleanser 2 %	$0 (OTC)	
clearasil ultra topical cream 10 %	$0 (OTC)	
compound w topical adhesive patch,medicated 40 %	$0 (OTC)	
compound w topical gel 17 %	$0 (OTC)	
compound w topical liquid 17 %	$0 (OTC)	
cool bottoms topical cream 1 %	$0 (OTC)	
daily acne wash topical cleanser 2 %	$0 (OTC)	
daily face wash topical cleanser 2 %	$0 (OTC)	
dandruff shampoo (selen-aloe) topical shampoo 1 %	$0 (OTC)	
daylogic acne treatment topical gel 10 %	$0 (OTC)	
dermacinrx skin repair complex topical cream 5 %	$0 (OTC)	
dermaseptin topical ointment 0.5-20.65 %	$0 (OTC)	
dhs sal topical shampoo 3 %	$0 (OTC)	
diaper rash topical ointment 40 %	$0 (OTC)	
diaper rash topical paste 40 %	$0 (OTC)	
dibucaine topical ointment 1 %	$0 (OTC)	
duofilm topical liquid 17 %	$0 (OTC)	
dyna-hex topical liquid 4 %	$0 (OTC)	
effaclar (salicylic acid) topical cleanser 2 %	$0 (OTC)	
excel-gel topical gel	$0 (OTC)	
fluorouracil topical cream 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluorouracil topical solution 2 %, 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
foaming acne face wash topical cleanser 10 %	$0 (OTC)	
gold bond ultimate psoriasis topical cream 3 %	$0 (OTC)	
hand wash topical liquid 2 %	$0 (OTC)	
hemorrhoidal rectal ointment	$0 (OTC)	
hemorrhoidal(pe-min oil-petro) rectal ointment 0.25-14-74.9 %	$0 (OTC)	
hemorrhoidal-analgesic topical ointment 1 %	$0 (OTC)	
imiquimod topical cream in packet 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (24 per 30 days)
ionil t topical shampoo 1 %	$0 (OTC)	
KLISYRI (250 MG) TOPICAL OINTMENT IN PACKET 1 %	$0/$4.90/$12.65 (Tier 1-Brand)	ST; NM; NDS; QL (5 per 5 days)
lantiseptic multi-purpose topical ointment 20-0.45-2 %	$0 (OTC)	
medicated heat patch topical adhesive patch,medicated 0.025 %	$0 (OTC)	
mediplast corn-callus-wart topical adhesive patch,medicated 40 %	$0 (OTC)	
menthol-zinc oxide topical ointment 0.44-20.6 %	$0 (OTC)	
methoxsalen oral capsule,liqd-filled,rapid rel 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
natural oatmeal bath treatment topical packet	$0 (OTC)	
neutraphor topical cream 1 %	$0 (OTC)	
neutrogena t/sal topical shampoo 3 %	$0 (OTC)	
nizoral psoriasis topical cream 3 %	$0 (OTC)	
nizoral psoriasis topical shampoo 3 %	$0 (OTC)	
noble formula s topical spray,non-aerosol 2-0.25 %	$0 (OTC)	
p and s (salicylic acid) topical shampoo 2 %	$0 (OTC)	
panoxyl (salicylic acid) topical liquid 2 %	$0 (OTC)	
panoxyl topical cleanser 10 %	$0 (OTC)	
PANRETIN TOPICAL GEL 0.1 %	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (60 per 28 days)
persa-gel topical gel 10 %	$0 (OTC)	
podofilox topical solution 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
proshield plus topical ointment 1 %	$0 (OTC)	
renewal bath treatment topical packet	$0 (OTC)	
revitaderm wound care topical gel 0.1 %	$0 (OTC)	
risamine topical ointment 0.44-20.6 %	$0 (OTC)	
salicylic acid topical gel 6 %	$0 (OTC)	
salicylic acid topical lotion,extended release 6 %	$0 (OTC)	
salicylic acid topical shampoo 6 %	$0 (OTC)	
salicylic acid-ceramides no.1 topical kit,cleanser and cream er 6 %	$0 (OTC)	
sal-plant topical gel 17 %	$0 (OTC)	
salyntra topical gel 6 %	$0 (OTC)	
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	$0/$4.90/$12.65 (Tier 1-Brand)	QL (180 per 30 days)
scalp relief topical liquid 3 %	$0 (OTC)	
selsun blue (salicylic acid) topical shampoo 2 %	$0 (OTC)	
selsun blue naturals topical shampoo 3 %	$0 (OTC)	
selsun blue topical shampoo 1 %	$0 (OTC)	
skin treatment topical lotion 12 %	$0 (OTC)	
soothing bath treatment topical packet	$0 (OTC)	
targeted acne spot treatment topical cream 2.5 %	$0 (OTC)	
tarsum professional topical shampoo 2 %	$0 (OTC)	
thera-gel topical shampoo 0.5 %	$0 (OTC)	
therapeutic shampoo topical shampoo 0.5 %, 1 %	$0 (OTC)	
therapeutic t plus topical shampoo 3 %	$0 (OTC)	
tridergel topical gel 0.1 %	$0 (OTC)	
VALCHLOR TOPICAL GEL 0.016 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
wart remover topical gel 17 %	$0 (OTC)	
wart remover topical liquid 17 %	$0 (OTC)	
wart remover topical plaster 40 %	$0 (OTC)	
wound gel topical gel	$0 (OTC)	
wound gel topical spray,non-aerosol	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
xalix topical film-forming soln er w/ appl 28 %	$0 (OTC)	
x-seb t pearl topical shampoo 10-4 %	$0 (OTC)	
x-seb t plus topical shampoo 2 %	$0 (OTC)	
zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
zostrix topical cream 0.033 %	$0 (OTC)	
zostrix-hp topical cream 0.1 %	$0 (OTC)	
Dermatological Antibacterials		
anti-dandruff with menthol topical shampoo 1 %	$0 (OTC)	
bacitracin topical ointment 500 unit/gram	$0 (OTC)	
bacitracin zinc topical ointment 500 unit/gram	$0 (OTC)	
clindamycin phosphate topical solution 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (180 per 30 days)
clindamycin phosphate topical swab 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clindamycin-benzoyl peroxide topical gel 1-5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
erythromycin with ethanol topical solution 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
first aid antibiotic topical ointment 3.5-500-10,000 mg-unit-unit	$0 (OTC)	
gentamicin topical cream 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (90 per 30 days)
gentamicin topical ointment 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
metronidazole topical cream 0.75 %	$0/$1.60/$5.10 (Tier 1-Generic)	
metronidazole topical gel 0.75 %, 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
mupirocin topical ointment 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (220 per 30 days)
rosadan topical cream 0.75 %	$0/$1.60/$5.10 (Tier 1-Generic)	
selenium sulfide topical lotion 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
silver sulfadiazine topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
SSD topical cream 1 %	$0/$4.90/$12.65 (Tier 1-Brand)	
triple antibiotic spray topical aerosol,spray 3.5-400-5,000 mg-unit-unit	$0 (OTC)	
triple antibiotic topical ointment 3.5mg-400 unit- 5,000 unit/gram	$0 (OTC)	
Dermatological Anti-Inflammatory Agents		
ala-cort topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
anti-itch (hc) topical aerosol,spray 1 %	$0 (OTC)	
anti-itch (hc) topical cream 1 %	$0 (OTC)	
anti-itch (hc) topical ointment 1 %	$0 (OTC)	
aquanil hc topical lotion 1 %	$0 (OTC)	
aquaphor itch relief topical ointment 1 %	$0 (OTC)	
aveeno anti-itch (hydrocortsn) topical cream 1 %	$0 (OTC)	
beta-hc topical lotion 1 %	$0 (OTC)	
betamethasone dipropionate topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone dipropionate topical lotion 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone dipropionate topical ointment 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone valerate topical cream 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone valerate topical lotion 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone valerate topical ointment 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone, augmented topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone, augmented topical gel 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
betamethasone, augmented topical lotion 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
betamethasone, augmented topical ointment 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol scalp solution 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol topical gel 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol topical lotion 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol topical ointment 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol topical shampoo 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol-emollient topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
clobetasol-emollient topical foam 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
cortaid topical cream 1 %	$0 (OTC)	
cortisone (hydrocortisone) topical cream 1 %	$0 (OTC)	
cortisone with aloe topical cream 1 %	$0 (OTC)	
cortizone-10 topical ointment 1 %	$0 (OTC)	
cortizone-10 topical solution 1 %	$0 (OTC)	
cortizone-10 with aloe topical cream 1 %	$0 (OTC)	
EUCRISA TOPICAL OINTMENT 2 %	$0/$4.90/$12.65 (Tier 1-Brand)	
fluocinolone topical cream 0.01 %, 0.025 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluocinolone topical ointment 0.025 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluocinonide topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
fluocinonide topical gel 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluocinonide topical ointment 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluocinonide topical solution 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluticasone propionate topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
halobetasol propionate topical cream 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
halobetasol propionate topical ointment 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone 1% cream w/aloe,max strength (otc)	$0 (OTC)	
hydrocortisone 1% ointment maximum strength (otc)	$0 (OTC)	
hydrocortisone 2.5% cream	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone acetate topical cream 0.5 %, 1 %	$0 (OTC)	
hydrocortisone acetate topical ointment 1 %	$0 (OTC)	
hydrocortisone plus topical cream 1 %	$0 (OTC)	
hydrocortisone topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone topical cream with perineal applicator 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone topical lotion 1 %	$0 (OTC)	
hydrocortisone topical lotion 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone topical ointment 0.5 %	$0 (OTC)	
hydrocortisone topical ointment 1 %, 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone valerate topical cream 0.2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone-aloe vera topical cream 1 %	$0 (OTC)	
hydrocream topical cream 1 %	$0 (OTC)	
itch relief (hc) topical ointment 1 %	$0 (OTC)	
itch relief (hc) with aloe topical cream 1 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
mometasone topical cream 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
mometasone topical ointment 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
mometasone topical solution 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
monistat care (hydrocortisone) topical cream 1 %	$0 (OTC)	
noble formula hc topical aerosol,spray 1 %	$0 (OTC)	
obagi nu-derm tolereen topical lotion 0.5 %	$0 (OTC)	
pimecrolimus topical cream 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (100 per 30 days)
preparation h hydrocortisone topical cream 1 %	$0 (OTC)	
procto-med hc topical cream with perineal applicator 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
proctosol hc topical cream with perineal applicator 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
proctozone-hc topical cream with perineal applicator 2.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
scalp relief (hydrocortisone) topical solution 1 %	$0 (OTC)	
tacrolimus topical ointment 0.03 %, 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (100 per 30 days)
triamcinol ac (pf) in 0.9%nacl injection suspension 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
triamcinolone acetonide topical lotion 0.025 %, 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
vanicream hc topical cream 1 %	$0 (OTC)	
Dermatological Retinoids		
adapalene topical cream 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ALTRENO TOPICAL LOTION 0.05 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
tazarotene topical cream 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
tretinoin topical cream 0.025 %, 0.05 %, 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA
Scabicides And Pediculicides		
complete lice treatment topical kit 4-0.33-0.5 %	$0 (OTC)	
home lice-bedbug-dust mite spr aerosol,spray 0.5 %	$0 (OTC)	
lice bedding spray aerosol,spray 0.5 %	$0 (OTC)	
lice complete kit 1-2-3 topical kit 4-0.33-0.5 %	$0 (OTC)	
lice killing (permethrin) topical liquid 1 %	$0 (OTC)	
lice killing topical shampoo 0.33-4 %	$0 (OTC)	
lice pyrinyl shampoo topical shampoo 0.33-4 %	$0 (OTC)	
lice solution topical kit 4-0.33-0.5 %	$0 (OTC)	
lice-bedbug-mite bedding aerosol,spray 0.5 %	$0 (OTC)	
malathion topical lotion 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
permethrin topical cream 5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
rid complete lice elim kit aerosol,spray 0.5 %	$0 (OTC)	
rid complete lice elim kit topical kit 4-0.33-0.5 %	$0 (OTC)	
rid lice killing topical shampoo 0.33-4 %	$0 (OTC)	
stop lice aerosol,spray 0.5 %	$0 (OTC)	
Devices		
Devices		
1ST TIER UNIFINE PENTP 5MM 31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
1ST TIER UNIFINE PNTIP 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
1ST TIER UNIFINE PNTIP 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
1ST TIER UNIFINE PNTIP 8MM 31G STRL,SINGLE-USE,SHRT 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
1ST TIER UNIFINE PNTP 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
1ST TIER UNIFINE PNTP 31GX3/16 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
1ST TIER UNIFINE PNTP 32GX5/32 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ace elbow brace	$0 (OTC)	
activa men's dress sock	$0 (OTC)	
active life 1-pc stoma cap	$0 (OTC)	
active life convex drain pouch 1 1/8 ", 1 3/8 ", 7/8 "	$0 (OTC)	
active life convex urostomy , 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 1/2 ", 3/4 ", 5/8 ", 7/8 "	$0 (OTC)	
active life drainable pouch , 1 "	$0 (OTC)	
active life pre-cut drainable 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 ", 2 1/2 ", 3/4 "	$0 (OTC)	
active life urostomy pouch 1 3/4 " (9")	$0 (OTC)	
adapt barrier ring 1 3/16 ", 1 9/16 ", 2 "	$0 (OTC)	
adapt barrier strips	$0 (OTC)	
adapt ceraring 2 "	$0 (OTC)	
adapt convex barrier rings	$0 (OTC)	
adapt ostomy belt	$0 (OTC)	
adapt ostomy paste paste	$0 (OTC)	
adhesive barrier 2-pc 1 3/4 "	$0 (OTC)	
adhesive barriers	$0 (OTC)	
adhesive remover wipes swab	$0 (OTC)	
adhesive tape topical tape 1 x 10 "-yard, 1 x 5 "-yard, 1/2 x 5 "-yard	$0 (OTC)	
ADVOCATE INS 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE INS 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE INS 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE INS 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ADVOCATE INS 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE INS SYR 1 ML 30GX5/16 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE PEN NEEDLE 4MM 33G 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE PEN NEEDLES 5MM 31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ADVOCATE PEN NEEDLES 8MM 31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
all purpose cloth tape topical tape 2 x 10 "-yard	$0 (OTC)	
allkare protect barrier wipes	$0 (OTC)	
AQINJECT PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
AQINJECT PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
assura 2pc drainable	$0 (OTC)	
assura ac baseplate	$0 (OTC)	
assura ac convex baseplate 1 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 7/8 "	$0 (OTC)	
assura convex easiclose maxi 1 "	$0 (OTC)	
assura convex light standard 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 1 5/8 ", 3/4 "	$0 (OTC)	
assura convex skin barrier fla 1 ", 1 1/4 ", 1 1/8 ", 1/2 ", 3/4 ", 7/8 "	$0 (OTC)	
assura convex uropouch 7/8 "	$0 (OTC)	
assura easiclose drainable 11 1/4-600 "-ml	$0 (OTC)	
assura easiclose midi pouch	$0 (OTC)	
assura easiclose mini pouch 10 1/4-470 "-ml	$0 (OTC)	
assura easiclose wide maxi , 1 ", 1 3/8 "	$0 (OTC)	
assura extra non-convex pouch	$0 (OTC)	
assura flange 1 5/8 ", 1 7/8 "	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
assura flange convex 1 1/2 ", 1 5/8 ", 1 7/8 "	$0 (OTC)	
assura irrig fce plt 1/2-2 1/4	$0 (OTC)	
assura light easiclose drainab 11 1/4-600 "-ml	$0 (OTC)	
assura non-convex drainable	$0 (OTC)	
assura ostomy belt	$0 (OTC)	
assura pediatric pouch , 8 1/2 "	$0 (OTC)	
assura pediatric skin barrier	$0 (OTC)	
assura pouch	$0 (OTC)	
assura skin barrier flange 1 ", 1 1/2 ", 1 1/4 ", 7/8 "	$0 (OTC)	
assura standard wear 11 1/4-760 "-ml	$0 (OTC)	
assura wound manager 1/2-2 3/4 12 "	$0 (OTC)	
ASSURE ID DUO PRO NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID DUO-SHIELD 30GX3/16" 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID DUO-SHIELD 30GX5/16" 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID PEN NEEDLE 30GX5/16" 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID PRO PEN NDL 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID SYR 0.5 ML 31GX15/64" 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ASSURE ID SYR 1 ML 31GX15/64" 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
athletic tape topical tape 1 1/2 x 10 "-yard	$0 (OTC)	
AUTOKEEPER SAF PEN NDL 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
AUTOKEEPER SAF PEN NDL 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
bard plastic tubing/adapter 8 1/2 "	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
BD AUTOSHIELD DUO NDL 5MMX30G 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD ECLIPSE 30GX1/2" SYRINGE 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD INS SYR 0.3 ML 8MMX31G(1/2) 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD INS SYR UF 0.3 ML 12.7MMX30G 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD INS SYR UF 0.5 ML 12.7MMX30G NOT FOR RETAIL SALE 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD INSULIN SYR 1 ML 27GX12.7MM 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD INSULIN SYR 1 ML 27GX5/8" MICRO-FINE 1 ML 27 GAUGE X 5/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETGLD INS 0.3 ML 29G 13MM 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETYGLD INS 0.3 ML 31G 8MM 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETYGLD INS 0.5 ML 30G 8MM 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETYGLD INS 1 ML 29G 13MM 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETYGLID INS 1 ML 6MMX31G 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFETYGLIDE SYRINGE 27GX5/8 1 ML 27 GAUGE X 5/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFTYGLD INS 0.3 ML 6MMX31G 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFTYGLD INS 0.5 ML 29G 13MM 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SAFTYGLD INS 0.5 ML 6MMX31G 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD SINGLE USE SWAB	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD UF MICRO PEN NEEDLE 6MMX32G 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
BD UF MINI PEN NEEDLE 5MMX31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD UF NANO PEN NEEDLE 4MMX32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD UF ORIG PEN NDL 12.7MMX29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD UF SHORT PEN NEEDLE 8MMX31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD VEO INS 0.3 ML 6MMX31G (1/2) 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD VEO INS SYRING 1 ML 6MMX31G 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD VEO INS SYRN 0.3 ML 6MMX31G 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
BD VEO INS SYRN 0.5 ML 6MMX31G 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
blenderm surgical topical tape 1 x 5 "-yard, 1/2 x 5 "-yard, 2 x 5 "-yard	$0 (OTC)	
BORDERED GAUZE 2"X2" 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
butterfly closures topical tape 1 3/4 x 3/8 "	$0 (OTC)	
CAREFINE PEN NEEDLE 12.7MM 29G HRI 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLE 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLE 5MM 32G 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLE 6MM 31G HRI 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLE 8MM 30G HRI 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLES 6MM 32G 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CAREFINE PEN NEEDLES 8MM 31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
CARETOUCH ALCOHOL 70% PREP PAD	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 32GX3/16" 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 1 ML 28GX5/16" 1 ML 28 X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 1 ML 29GX5/16" 1 ML 29 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CARETOUCH SYR 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
clear tape topical tape 1 x 10 "-yard	$0 (OTC)	
CLICKFINE PEN NEEDLE 32GX5/32" 32GX4MM, STERILE 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CLICKFINE UNIVERSAL 31G X 1/4" 6MM, STORE BRAND 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
closed-end pouch	$0 (OTC)	
cloth tape topical tape 1 x 10 "-yard	$0 (OTC)	
coban action wrap topical bandage 3 x 5 "-yard	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
coban self-adherent wrap topical bandage 1 x 5 "-yard, 2 x 5 "-yard, 4 x 5 "-yard, 6 x 5 "-yard	$0 (OTC)	
coloplast barrier ring 1 ", 1 1/8 ", 1 5/8 ", 2 ", 3/4 ", 3/8 ", 5/8 "	$0 (OTC)	
coloplast paste paste	$0 (OTC)	
coloplast paste strip	$0 (OTC)	
coloplast skin barrier wafer 4 x 4 ", 6 x 6 ", 8 x 8 "	$0 (OTC)	
COMFORT EZ 0.3 ML 31G 15/64" 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ 0.5 ML 31G 15/64" 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INS 0.3 ML 30GX1/2" 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INS 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INS 1 ML 31G 15/64" 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INS 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INSULIN SYR 0.3 ML 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ INSULIN SYR 0.5 ML 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLE 12MM 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 4MM 32G SINGLE USE, MICRO 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 4MM 33G 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 5MM 31G MINI 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 5MM 32G SINGLE USE,MINI,HRI 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 5MM 33G 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
COMFORT EZ PEN NEEDLES 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 6MM 32G 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 6MM 33G 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 8MM 31G SHORT 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 8MM 32G 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PEN NEEDLES 8MM 33G 33 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PLS PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PRO PEN NDL 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PRO PEN NDL 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ PRO PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 0.5 ML 28GX1/2" 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 0.5 ML 29GX1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 0.5 ML 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 1 ML 27G 12.7MM 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 1 ML 28GX1/2" 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 1 ML 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT EZ SYR 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
COMFORT EZ SYR 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT POINT PEN NDL 31GX1/3" 31 GAUGE X 1/3"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT POINT PEN NDL 31GX1/6" 31 GAUGE X 1/6"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 33G 5MM 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
COMFORT TOUCH PEN NDL 33G 6MM 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
compr.stocking,knee,reg,2x-lrg	$0 (OTC)	
compr.stocking,knee,reg,3x-lrg	$0 (OTC)	
compr.stocking,thigh,reg,large	$0 (OTC)	
compr.stocking,thigh,reg,x-lrg	$0 (OTC)	
compres.stocking,knee,reg,smal	$0 (OTC)	
compres.stocking,knee,reg,xlrg	$0 (OTC)	
compres.stocking,thigh,reg,med	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
compress.stocking,knee,reg,lrg	$0 (OTC)	
compress.stocking,knee,reg,med	$0 (OTC)	
compression socks, medium	$0 (OTC)	
compression socks, x-large	$0 (OTC)	
contour i stoma cap	$0 (OTC)	
convatec night drain container	$0 (OTC)	
convatec night drainage tubing	$0 (OTC)	
copper compress sleeve elbow	$0 (OTC)	
curi-strip wound closures topical strip 1/2 x 4 ", 1/4 x 1 1/2 ", 1/4 x 3 ", 1/4 x 4 ", 1/8 x 3 "	$0 (OTC)	
CURITY ALCOHOL PREPS 2 PLY,MEDIUM	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CURITY GAUZE PADS 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
CURITY GAUZE SPONGES (12 PLY)-200/BAG 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
cymed seal	$0 (OTC)	
daily comfort socks large	$0 (OTC)	
daily comfort socks medium	$0 (OTC)	
daily comfort socks x-large	$0 (OTC)	
deluxe wrist stabilizer	$0 (OTC)	
DERMACEA 2"X2" GAUZE 12 PLY, USP TYPE VII 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DERMACEA GAUZE 2"X2" SPONGE 8 PLY 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DERMACEA NON-WOVEN 2"X2" SPNGE 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
diabetic socks large	$0 (OTC)	
diabetic socks medium	$0 (OTC)	
diabetic socks x-large	$0 (OTC)	
double-hesive	$0 (OTC)	
drainable fecal collector	$0 (OTC)	
drainable pouch , 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 7/8 "	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
drainable pouch clamp	$0 (OTC)	
DROPLET 0.3 ML 29G 12.7MM(1/2) OUTER 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET 0.3 ML 30G 12.7MM(1/2) OUTER 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET 0.5 ML 29GX12.5MM(1/2) 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET 0.5 ML 30GX12.5MM(1/2) 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.3 ML 29GX12.5MM 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.3 ML 30G 8MM(1/2) OUTER 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.3 ML 30GX12.5MM 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.3 ML 31G 6MM(1/2) OUTER 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.3 ML 31G 8MM(1/2) OUTER 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 29G 12.7MM OUTER 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 30G 12.7MM OUTER 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 30GX6MM(1/2) 0.5ML 30 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 30GX8MM(1/2) 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 31GX6MM(1/2) 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS 0.5 ML 31GX8MM(1/2) 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.3 ML 30GX6MM 0.3 ML 30 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.3 ML 30GX8MM 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
DROPLET INS SYR 0.3 ML 31GX6MM 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.3 ML 31GX8MM 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.5 ML 30G 8MM OUTER 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.5 ML 31G 6MM OUTER 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 0.5 ML 31G 8MM OUTER 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 29G 12.7MM OUTER 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 30G 12.5MM 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 30G 6MM 1 ML 30 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 30G 8MM OUTER 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 31G 6MM OUTER 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET INS SYR 1 ML 31G 8MM 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET MICRON 34G X 9/64" 34 GAUGE X 9/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 29G 10MM 29 GAUGE X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
DROPLET PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPLET PEN NEEDLE 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE ALCOHOL 70% PREP PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INS SYR 0.3 ML 31G 6MM 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INS SYR 0.3 ML 31G 8MM 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INS SYR 0.5 ML 31G 6MM 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INS SYR 0.5 ML 31G 8MM 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INSUL SYR 1 ML 31G 6MM 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INSUL SYR 1 ML 31G 8MM 1 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE INSULN 1 ML 29G 12.5MM 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE PEN NEEDLE 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
DROPSAFE PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
duolock curved tail closure	$0 (OTC)	
durahesive moldable convex	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
durapore surgical topical tape 1 x 1 1/2 "-yard, 1 x 10 "-yard, 1/2 x 10 "-yard, 2 x 1 1/2 "-yard, 2 x 10 "-yard, 3 x 10 "-yard	$0 (OTC)	
eakin cohesive seals	$0 (OTC)	
eakin cohesive slims	$0 (OTC)	
eakin cohesive wafer 4 x 4 ", 4 x 8 "	$0 (OTC)	
eakin wound pouch	$0 (OTC)	
easiclose wide outlet 2-pc 10 1/2-485 "-ml, 11 1/2-655 "-ml	$0 (OTC)	
EASY CMFT SFTY PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY CMFT SFTY PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY CMFT SFTY PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.3 ML 31G 1/2" 0.3 ML 31 X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.3 ML 31G 5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.5 ML 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.5 ML 32GX5/16" 1/2 ML 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 0.5 ML SYRINGE 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT 1 ML 32GX5/16" 1 ML 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT ALCOHOL 70% PAD	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT INSULIN 1 ML SYR 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EASY COMFORT PEN NDL 29G 4MM 29 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 29G 5MM 29 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 33G 5MM 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT PEN NDL 33G 6MM 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT SYR 0.5 ML 29G 8MM 1/2 ML 29 X5/16 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT SYR 1 ML 29G 8MM 1 ML 29 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY COMFORT SYR 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY GLIDE INS 0.3 ML 31GX6MM 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY GLIDE INS 0.5 ML 31GX6MM 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY GLIDE INS 1 ML 31GX6MM 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY GLIDE PEN NEEDLE 4MM 33G 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.3 ML 30G 8MM(1/2) 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.3 ML 31G 6MM(1/2) 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EASY TOUCH 0.3 ML 31G 8MM(1/2) 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.3 ML SYR 30GX1/2" 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.5 ML SYR 27GX1/2" 1/2 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.5 ML SYR 29GX1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.5 ML SYR 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 0.5 ML SYR 30GX5/16 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 1 ML SYR 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH 1 ML SYR 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH ALCOHOL 70% PADS GAMMA-STERILIZED	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH AUTO 0.5 ML 30G 6MM 0.5 ML 30 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH AUTO 0.5 ML 30G 8MM 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH AUTORET 1 ML 30G 6MM 1 ML 30 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH AUTORET 1 ML 30G 8MM 1 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH FLIPLOK 1 ML 27GX0.5 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 0.3 ML 30G 8MM 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 0.3 ML 31G 8MM 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 0.5 ML 30G 8MM 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 0.5 ML 31G 6MM 1/2 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EASY TOUCH INS 0.5 ML 31G 8MM 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 1 ML 27G 1/2" 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS 1 ML 28G 12.7MM 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS SYR 1 ML 30G 8MM 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS SYR 1 ML 31G 6MM 1 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INS SYR 1 ML 31G 8MM 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULIN 1 ML 29GX1/2 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULIN 1 ML 30GX1/2 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULIN SYR 1 ML 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULIN SYR 1 ML RETRACTABLE 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 30GX5/16 1 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 30GX5/16 1 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 31GX5/16 1 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH INSULN 1 ML 31GX5/16 1 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH LUER LOK INSUL 1 ML	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EASY TOUCH PEN NEEDLE 30GX5/16 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 31GX3/16 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 31GX5/16 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 32GX1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 32GX3/16 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH PEN NEEDLE 32GX5/32 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SAF PEN NDL 29G 5MM 29 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SAF PEN NDL 29G 8MM 29 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SAF PEN NDL 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SAF PEN NDL 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SYR 0.5 ML 28G 12.7MM 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SYR 0.5 ML 29G 12.7MM 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH SYR 1 ML 27G 16MM 1 ML 27 GAUGE X 5/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASY TOUCH UNI-SLIP SYR 1 ML	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EASYLIFE INS PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 33G 5MM 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 33G 6MM 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS PEN NDL 33G 8MM 33 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS SYR 0.5 ML 30G 8MM 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS SYR 1 ML 30G 8MM 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE INS SYR 1 ML 31G 8MM 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE SAFTY PEN NDL 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE SAFTY PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYLIFE SYR 1 ML 30G 12.7MM 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EASYTOUCH SAF PEN NDL 30G 6MM 30 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
elastic bandage topical bandage 4 ", 6 x 1.8 "-yard	$0 (OTC)	
elbow compression sleeve	$0 (OTC)	
elbow strap	$0 (OTC)	
eliminator odor spray aerosol,spray	$0 (OTC)	
EMBRACE PEN NEEDLE 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EMBRACE PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ems anti-embolism stocking	$0 (OTC)	
enema bag	$0 (OTC)	
enema bag with catheter	$0 (OTC)	
esteem closed pouch 2" (8")	$0 (OTC)	
esteem drainable pouch 1 " (12"), 1 1/2 " (12"), 1 1/4 " (12"), 1 1/8 " (12"), 1 3/16 " (12"), 1 3/8 " (12"), 1 9/16 " (12"), 13/16-2 3/4 " (12"), 3/4 " (12"), 7/8 " (12")	$0 (OTC)	
esteem plus closed pouch 1 " (8"), 1 3/16 " (8"), 1 3/8 " (8"), 1 9/16 " (8"), 13/16"-2 3/4" (8")	$0 (OTC)	
esteem plus drainable pouch 1 3/16"- 1 9/16" (12"), 1 9/16-2 " (12"), 1/3-4 " (14"), 13/16"- 1 3/16" (12")	$0 (OTC)	
esteem plus durahesive plus 3/4"- 2 1/2" (12")	$0 (OTC)	
esteem synergy closed pouch 1 3/8 ", 1 7/8 ", 2 3/8 "	$0 (OTC)	
esteem synergy drainable pouch 1 3/8 " (12"), 1 7/8 " (12"), 2 3/8 " (12")	$0 (OTC)	
esteem synergy plus 2 3/8 " (8")	$0 (OTC)	
esteem synergy urostomy pouch 10.3 ", 9.2 "	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
EXEL U100 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
EXEL U100 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
fecal collector	$0 (OTC)	
filtrodor pouch filter	$0 (OTC)	
flexi-seal fms	$0 (OTC)	
flexi-trak anchoring device	$0 (OTC)	
flextend skin barrier wafer 4 x 4 ", 8 x 8 "	$0 (OTC)	
FT STERILE PADS 2" X 2" 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
futuro anti-embolism stockings	$0 (OTC)	
futuro restoring medium	$0 (OTC)	
GAUZE PADS & DRESSINGS - PADS 2 X 2 TOPICAL BANDAGE 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ALCOHOL SWAB STERILE, TWO PLY	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP PEN NEEDLE 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP SIMPLI PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ULT C 0.3 ML 29GX1/2" (1/2) 1/2 UNIT 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ULT CMFRT 0.5 ML 29GX1/2" 1/2 ML 29	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ULTR CMFRT 0.5 ML 30GX5/16 1/2 ML 30 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ULTRA COMFORT 1 ML SYRINGE 1 ML 30 GAUGE X 7/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GNP ULTRA COMFORT 3/10 ML SYR 0.3 ML 30	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
GS PEN NEEDLE 31G X 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
hand support	$0 (OTC)	
HEALTHWISE INS 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE INS 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE INS 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE INS 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE INS 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE INS 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHWISE PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHY ACCENTS PENTIP 5MM 31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHY ACCENTS PENTIP 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHY ACCENTS PENTIP 8MM 31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEALTHY ACCENTS PENTP 12MM 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
HEB INCONTROL ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
hollihesive skin barrier wafer 4 x 4 "	$0 (OTC)	
hollister replacement filters	$0 (OTC)	
ile-sorb original	$0 (OTC)	
INCONTROL PEN NEEDLE 12MM 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INCONTROL PEN NEEDLE 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
INCONTROL PEN NEEDLE 5MM 31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INCONTROL PEN NEEDLE 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INCONTROL PEN NEEDLE 8MM 31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INPEN (FOR HUMALOG) BLUE SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INPEN (FOR HUMALOG) GREY SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INPEN (NOVOLOG OR FIASP) BLUE SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INPEN (NOVOLOG OR FIASP) GREY SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INPEN (NOVOLOG OR FIASP) PINK SUBCUTANEOUS INSULIN PEN	$0/$4.90/$12.65 (Tier 1-Brand)	
INSULIN 1 ML SYRINGE 1 ML 29 GAUGE X 7/16", 1 ML 30 GAUGE X 7/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN 1/2 ML SYRINGE 1/2 ML 29 , 1/2 ML 30 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN 3/10 ML SYRINGE 0.3 ML 30	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYR 0.3 ML 31GX1/4(1/2) 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRIN 0.5 ML 28GX1/2" (OTC) 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRIN 0.5 ML 29GX1/2" (OTC) 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRIN 0.5 ML 30GX1/2" (RX) 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRIN 0.5 ML 30GX5/16" SHORT NEEDLE (OTC) 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRING 0.5 ML 27G 1/2" INNER 1/2 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
INSULIN SYRINGE 0.3 ML 0.3 ML 29 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 0.3 ML 31GX1/4 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 0.5 ML 1/2 ML 29	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 0.5 ML 31GX1/4 1/2 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 1 ML 29 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 27G 1/2" INNER 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 28GX1/2" (OTC) 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 30GX1/2" SHORT NEEDLE (OTC) 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 30GX5/16" SHORT NEEDLE (OTC) 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 31GX1/4" 1 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE 1 ML 31GX5/16" SHORT NEEDLE,THIN II (OTC) 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1/2 ML 28 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSULIN U-500 SYRINGE-NEEDLE SYRINGE 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSUPEN PEN NEEDLE 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSUPEN PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSUPEN PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
INSUPEN PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
INSUPEN PEN NEEDLE 32G 6MM (RX) 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
irrigation sleeve	$0 (OTC)	
ISOPROPYL ALCOHOL 0.7 ML/ML MEDICATED PAD TOPICAL PADS, MEDICATED	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
IV ANTISEPTIC WIPES	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
jobst anti-embolism stocking	$0 (OTC)	
jobst ultrasheer	$0 (OTC)	
jobst ultrasheer thigh stockng	$0 (OTC)	
karaya 5 closed pouch - tape 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 ", 2 1/2 ", 3 "	$0 (OTC)	
karaya 5 drainable pouch 1 ", 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 ", 2 1/2 ", 3 "	$0 (OTC)	
karaya 5 drainable pouch cloth 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 ", 2 1/2 "	$0 (OTC)	
KENDALL ALCOHOL 70% PREP PAD	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
lifestylecomfort socks large	$0 (OTC)	
lifestylecomfort socks medium	$0 (OTC)	
lifestylecomfort socks x-large	$0 (OTC)	
LISCO SPONGES 100/BAG 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH 31GX1/4" PEN NEEDLE 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH INSULIN 0.5 ML SYR 1/2 ML 28 GAUGE, 1/2 ML 29 , 1/2 ML 30 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH INSULIN 1 ML SYR 1 ML 28 GAUGE, 1 ML 29 GAUGE, 1 ML 30 GAUGE X 7/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH INSULIN SYR 1 ML 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH PEN NEEDLE 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITE TOUCH PEN NEEDLE 31G 31 GAUGE X 3/16", 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
LITETOUCH INS 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH INS 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH INS 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH INS 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYR 0.5 ML 28GX1/2" 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYR 0.5 ML 29GX1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYR 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYRIN 1 ML 28GX1/2" 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYRIN 1 ML 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
LITETOUCH SYRIN 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
little ones closed-end pouch , 1 1/4 ", 1 3/4 "	$0 (OTC)	
little ones drainable pouch , 1 3/4 "	$0 (OTC)	
little ones flexible skin 1 1/4 ", 1 3/4 "	$0 (OTC)	
little ones skin barrier	$0 (OTC)	
little ones urostomy pouch 1 1/4 "	$0 (OTC)	
loop ostomy bridge sterile	$0 (OTC)	
lo-profile urostomy pouch 1 ", 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 "	$0 (OTC)	
MAGELLAN INSUL SYRINGE 0.3 ML 0.3 ML 30 X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAGELLAN INSUL SYRINGE 0.5 ML 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAGELLAN INSULIN SYR 0.3 ML 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MAGELLAN INSULIN SYR 0.5 ML 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAGELLAN INSULIN SYRINGE 1 ML 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXICOMFORT II PEN NDL 31GX6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXICOMFORT INS 0.5 ML 27GX1/2" 1/2 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXI-COMFORT INS 0.5 ML 28G 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXICOMFORT INS 1 ML 27GX1/2" 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXI-COMFORT INS 1 ML 28GX1/2" 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXICOMFORT PEN NDL 29G X 5MM 29 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MAXICOMFORT PEN NDL 29G X 8MM 29 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
medical adhesive aerosol,spray	$0 (OTC)	
medipore h topical tape 3 x 10 "-yard, 4 x 10 "-yard	$0 (OTC)	
medipore soft cloth tape topical tape 4 x 10 "-yard	$0 (OTC)	
medipore topical tape 2 x 10 "-yard	$0 (OTC)	
men's medical socks large	$0 (OTC)	
men's medical socks medium	$0 (OTC)	
men's medical socks x-large	$0 (OTC)	
microderm 1 ", 1 1/2 ", 1 1/8 ", 1 3/8 ", 7/8 "	$0 (OTC)	
microderm package 1 1/4 "	$0 (OTC)	
microderm plus 1 ", 1 1/2 ", 1 1/8 ", 1 3/8 ", 7/8 "	$0 (OTC)	
microderm plus package 1 1/2 ", 1 1/4 "	$0 (OTC)	
MICRODOT PEN NEEDLE 31GX6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MICRODOT PEN NEEDLE 32GX4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MICRODOT PEN NEEDLE 33GX4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MICRODOT READYGARD NDL 31G 5MM OUTER 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
microfoam surgical topical tape 1 x 5 1/2 "-yard, 2 x 5 1/2 "-yard, 3 x 5 1/2 "-yard, 4 x 5 1/2 "-yard, 4 x 7 "	$0 (OTC)	
microhesive stoma paste paste	$0 (OTC)	
micropore surgical topical tape 1 x 1 1/2 "-yard, 1 x 10 "-yard, 1/2 x 10 "-yard, 2 x 1 1/2 "-yard, 2 x 10 "-yard, 3 x 10 "-yard	$0 (OTC)	
microskin barrier large size	$0 (OTC)	
mini drainable pouch	$0 (OTC)	
MINI PEN NEEDLE 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MINI PEN NEEDLE 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MINI PEN NEEDLE 33G 5MM 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MINI PEN NEEDLE 33G 6MM 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MINI ULTRA-THIN II PEN NDL 31G STERILE 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
mini urostomy pouch 7 "	$0 (OTC)	
mini-drain open end pouch	$0 (OTC)	
MONOJECT 0.5 ML SYRN 28GX1/2" 1/2 ML 28 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT 1 ML SYRN 27X1/2" 1 ML 27 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT 1 ML SYRN 28GX1/2" (OTC) 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSUL SYR U100 (OTC) 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSUL SYR U100 .5ML,29GX1/2" (OTC) 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSUL SYR U100 0.5 ML CONVERTS TO 29G (OTC) 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSUL SYR U100 1 ML 1 ML 25 GAUGE X 5/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MONOJECT INSUL SYR U100 1 ML 3'S, 29GX1/2" (OTC) 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSUL SYR U100 1 ML W/O NEEDLE (OTC)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR 0.3 ML (OTC) 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR 0.3 ML 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR 0.5 ML (OTC) 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR 0.5 ML 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR 1 ML 3'S (OTC) 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT INSULIN SYR U-100 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT SYRINGE 0.3 ML 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT SYRINGE 0.5 ML 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
MONOJECT SYRINGE 1 ML 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
NANO 2 GEN PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
NANO PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
natura closed pouch 1 1/2 ", 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
natura drainable pouch 1 1/2 " (12"), 1 3/4 " (12"), 1 3/4" (14"), 2 1/4 " (12"), 2 1/4" (14"), 2 3/4 " (12"), 2 3/4" (14"), 4 " (12")	$0 (OTC)	
natura durahesive skin barrier 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
natura stomahesive skn barrier 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image ceraplus skn barrier 1 3/4 "	$0 (OTC)	
new image closed mini-pouch 1 3/4 ", 2 1/4 "	$0 (OTC)	
new image closed pouch 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
new image colost-ileo kit,ste 1 3/4 " (1 1/4")	$0 (OTC)	
new image colostomy-ileo kit 2 3/4 " (12"), 4 " (12")	$0 (OTC)	
new image drain mini-pouch 1 3/4 ", 1 3/4 " (7"), 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image drainable kit 2 1/4 " (12"), 2 3/4 " (12")	$0 (OTC)	
new image drainable lock n rol 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image drainable mini-pouch 2 1/4 ", 2 3/4 " (7")	$0 (OTC)	
new image drainable pouch 1 3/4 " (12"), 2 1/4 " (12"), 2 1/4 " (7"), 4 ", 4 " (12")	$0 (OTC)	
new image flextend barrier 1 3/4 "	$0 (OTC)	
new image flextend barrier fla 2 1/4 ", 2 3/4 ", 4 "	$0 (OTC)	
new image flextend skn barrier 1 "	$0 (OTC)	
new image flexwear barrier 1 ", 1 1/2 "	$0 (OTC)	
new image flexwear flat 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image irrigator sleeve 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image lock'n roll pouch 2 1/4 "	$0 (OTC)	
new image ostomy kit 2 1/4 " (12 "), 4 " (12")	$0 (OTC)	
new image skin barrier 2 1/4 ", 2 3/4 ", 4 "	$0 (OTC)	
new image skin barrier-flange 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
new image urostomy pouch 1 3/4 " (9"), 2 1/4 " (9"), 2 3/4 " (9")	$0 (OTC)	
new image urostomy set 1 3/4" (1 1/4"), 2 1/4" (1 3/4"), 2 3/4" (2 1/4")	$0 (OTC)	
new image urostomyset,sterile 1 3/4" (1 1/4"), 2 1/4" (9 "), 2 3/4" (2 1/4")	$0 (OTC)	
night drain adapter	$0 (OTC)	
NOVOFINE 32G NEEDLES 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
NOVOFINE AUTOCOVER 30G NEEDLE 30 GAUGE X 1/3"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
NOVOFINE PLUS PEN NDL 32GX1/6" 32 GAUGE X 1/6"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
o.a.d. topical liquid	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
OMNIPOD 5 (LIBRE 2/3 PLUS) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (1 per 365 days)
OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
OMNIPOD 5 INTRO (LIBRE2/3PLUS) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (1 per 365 days)
OMNIPOD CLASSIC PODS (GEN 3) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (1 per 365 days)
OMNIPOD DASH PDM KIT (GEN 4)	$0/$4.90/$12.65 (Tier 1-Brand)	QL (1 per 365 days)
OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10 per 30 days)
one-piece drainable pouch	$0 (OTC)	
one-piece urostomy pouch 2 1/2 " (11")	$0 (OTC)	
ostomy appliance belt	$0 (OTC)	
ostomy belt medium	$0 (OTC)	
ostomy paste paste	$0 (OTC)	
pain free wrap topical bandage 2 x 2.3 "-yard	$0 (OTC)	
paper tape topical tape 1 x 10 "-yard	$0 (OTC)	
PEN NEEDLE 30G 5MM OUTER 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLE 30G 8MM INNER 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLE 30G X 5/16" 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLE 31G X 1/4" HRI 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLE 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
PEN NEEDLES 12MM 29G 29GX12MM,STRL 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLES 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLES 5MM 31G 31GX5MM,STRL,MINI (OTC) 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PEN NEEDLES 8MM 31G 31GX8MM,STRL,SHORT (OTC) 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 29G 1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 31G 1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 31GX3/16" MINI, 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 31GX5/16" SHORT, 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 32G 1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PENTIPS PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PIP PEN NEEDLE 31G X 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PIP PEN NEEDLE 32G X 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
pouch clamp	$0 (OTC)	
pouchkins drainable pouch 1 1/2 ", 1 3/4 ", 2 "	$0 (OTC)	
pouchkins ostomy system	$0 (OTC)	
pouchkins ped ostomy belt	$0 (OTC)	
pouchkins skin barrier package 1 3/4 "	$0 (OTC)	
pouchkins urostomy pouch 1 1/2 "	$0 (OTC)	
premier closed mini-pouch 1 " (7"), 1 3/8 " (7"), 5/8-2 1/8 " (7")	$0 (OTC)	
premier closed pouch 1 ", 1 3/16 " (9"), 1 3/8 " (9"), 5/8-2 1/8 " (9")	$0 (OTC)	
premier colostomy-ileostomy 12 " (2 1/2")	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
premier drain flextend convex , 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 ", 3/4 "	$0 (OTC)	
premier drainable lock n roll 1 1/4 ", 1 1/8 ", 1 3/8 ", 2 1/2 ", 3/4 ", 7/8 "	$0 (OTC)	
premier drainable mini-pouch 1 ", 1 " (7"), 1 1/2 ", 1 1/4 ", 1 3/16 " (12"), 1 3/16 " (7"), 1 3/4 ", 1 3/8 " (7"), 1 9/16 " (7"), 2 1/2 " (9"), 2 1/8 " (12"), 3/4 ", 5/8-2 1/8 " (7")	$0 (OTC)	
premier drainable pouch 1 ", 1 " (12"), 1 3/16 " (12"), 1 3/8 ", 1 3/8 " (12"), 1 9/16 " (11"), 1 9/16 " (12"), 2 1/2 ", 2 1/2-3 " (12"), 2 1/8 " (12"), 4 1/3 " (12")	$0 (OTC)	
premier drainable pouch convex 2 "	$0 (OTC)	
premier high output drainable 2 3/4 " (12")	$0 (OTC)	
premier lock n roll 1 ", 2 "	$0 (OTC)	
premier lock n roll convex 1 1/2 "	$0 (OTC)	
premier ostomy pouch 1 1/8 "	$0 (OTC)	
premier pre-sized mini-pouch 1 3/16 " (7")	$0 (OTC)	
premier urostomy 9" (2 1/2")	$0 (OTC)	
premier urostomy convex pouch 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 1/2 ", 5/8 ", 7/8 "	$0 (OTC)	
premier urostomy flextend pouc , 2 "	$0 (OTC)	
premier urostomy pouch 1 ", 1 " (9"), 1 1/2 " (9"), 1 3/4 ", 2 " (9"), 2 1/2 ", 2 1/2 " (9"), 2 1/8 " (9"), 3/4 ", 3/4 " (9")	$0 (OTC)	
premium drainable pouch/karaya 1 1/4 "	$0 (OTC)	
premium skin barrier wafer 4 x 4 "	$0 (OTC)	
PREVENT PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PREVENT PEN NEEDLE 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT 0.5 ML 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
PRO COMFORT 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT PEN NDL 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT PEN NDL 32G X 1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT PEN NDL 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRO COMFORT PEN NDL 5MM 32G 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
pro sports tape topical tape 1 1/2 x 10 "-yard	$0 (OTC)	
PRO-COMFORT ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRODIGY INS SYR 1 ML 28GX1/2" 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRODIGY SYRNG 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PRODIGY SYRNGE 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
protective barrier film wipes	$0 (OTC)	
PURE CMFT SFTY PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE CMFT SFTY PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE CMFT SFTY PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE COMFORT ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
PURE COMFORT PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE COMFORT PEN NDL 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE COMFORT PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
PURE COMFORT PEN NDL 32G 8MM 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RA ISOPROPYL ALCOHOL 70% WIPES	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RA STERILE PADS 2"X 2" 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RAYA SURE PEN NEEDLE 29G 12MM 29 GAUGE X 15/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RAYA SURE PEN NEEDLE 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RAYA SURE PEN NEEDLE 31G 5MM 31 GAUGE X 13/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RAYA SURE PEN NEEDLE 31G 6MM 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
relief knee close toe stocking	$0 (OTC)	
relief knee open toe stocking	$0 (OTC)	
relief knee-high stocking	$0 (OTC)	
RELION INS SYR 0.3 ML 31GX6MM 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RELION INS SYR 0.5 ML 31GX6MM 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RELION INS SYR 1 ML 31GX15/64" 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RELION PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RELION SYRING 0.3 ML 31GX5/16" INNER 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
RELION SYRING 0.5 ML 31GX5/16" INNER (OTC) 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
reston light support roll pad 4 x 196 "	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
reston medium support pad pad 7 7/8 x 11 3/4 "	$0 (OTC)	
SAFESNAP INS SYR UNITS-100 0.3 ML 30GX5/16",10X10 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFESNAP INS SYR UNITS-100 0.5 ML 29GX1/2",10X10 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFESNAP INS SYR UNITS-100 0.5 ML 30GX5/16",10X10 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFESNAP INS SYR UNITS-100 1 ML 28GX1/2",10X10 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFESNAP INS SYR UNITS-100 1 ML 29GX1/2",10X10 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFETY PEN NEEDLE 31G 4MM 31 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFETY PEN NEEDLE 5MM X 31G 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SAFETY SYRINGE 0.5 ML 30G 1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SECURESAFE PEN NDL 30GX5/16" OUTER 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SECURESAFE PEN NEEDLE 31G 5MM OUTER 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SECURESAFE SYR 0.5 ML 29G 1/2" OUTER 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SECURESAFE SYRNG 1 ML 29G 1/2" OUTER 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
self adherent wrap topical bandage 1 x 2.2 "-yard	$0 (OTC)	
self-adherent gentle wrap topical bandage 1 x 2.2 "-yard, 2 x 2.2 "-yard	$0 (OTC)	
self-adhering bandage topical bandage 4 "	$0 (OTC)	
sensi-care skin barrier wipe	$0 (OTC)	
sensura click ostomy pouch	$0 (OTC)	
sensura easiclose wide (ns) 11 1/2-655 "-ml	$0 (OTC)	
sensura easiclose wide outlet 11 1/2-655 "-ml	$0 (OTC)	
sensura flex ostomy base plate	$0 (OTC)	
sensura flex ostomy pouch	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
sensura ostomy base plate	$0 (OTC)	
skin closure strips topical strip 1/4 x 4 "	$0 (OTC)	
skin gel protect dressing wipe	$0 (OTC)	
skin prep wipes	$0 (OTC)	
skin-prep spray-on dressing aerosol,spray	$0 (OTC)	
SKY SAFETY PEN NEEDLE 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SKY SAFETY PEN NEEDLE 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
softflex skin barrier ring	$0 (OTC)	
sports tape topical tape 1 1/2 x 10 "-yard	$0 (OTC)	
steri-strip skin closures topical strip 1 x 5 ", 1/2 x 4 ", 1/4 x 1 1/2 ", 1/4 x 3 ", 1/4 x 4 ", 1/8 x 3 "	$0 (OTC)	
steri-strip topical strip 1/2 x 2 "	$0 (OTC)	
stoma cap-adhesive-filter	$0 (OTC)	
stoma cone-connector repl unit	$0 (OTC)	
stoma lubricant topical liquid	$0 (OTC)	
stomahesive moldable adhesive strip	$0 (OTC)	
stomahesive paste paste	$0 (OTC)	
stomahesive skin barrier , 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/4 ", 1 3/8 ", 1 5/8 ", 1 7/8 ", 3/4 ", 5/8 ", 7/8 "	$0 (OTC)	
stomahesive skin barrier wafer 4 x 4 ", 8 x 8 "	$0 (OTC)	
stomaseal dressing bandage 4 x 4 "	$0 (OTC)	
SURE CMFT SFTY PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE CMFT SFTY PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
NEEDLES, INSULIN DISP., SAFETY	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT 0.5 ML SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
SURE COMFORT 1 ML SYRINGE 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT 3/10 ML SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT 3/10 ML SYRINGE INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT 30G PEN NEEDLE 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT ALCOHOL PREP PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT INS 0.3 ML 31GX1/4 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT INS 0.5 ML 31GX1/4 1/2 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT INS 1 ML 31GX1/4" 1 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT PEN NDL 29GX1/2" 12.7MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE COMFORT PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-FINE PEN NEEDLES 12.7MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-FINE PEN NEEDLES 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-FINE PEN NEEDLES 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
SURE-JECT INSU SYR U100 0.3 ML 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-JECT INSU SYR U100 0.5 ML 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-JECT INSU SYR U100 1 ML 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-JECT INSUL SYR U100 1 ML 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-JECT INSULIN SYRINGE 1 ML 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
SURE-PREP ALCOHOL PREP PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
sur-fit natura convex inserts 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/8 ", 1 5/8 ", 3/4 "	$0 (OTC)	
sur-fit natura drainable pouch , 1 1/2 ", 1 1/4 ", 1 3/4 ", 1 3/4 " (12"), 2 1/4 ", 2 1/4 " (12"), 2 3/4 "	$0 (OTC)	
sur-fit natura durahesive 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 1/4 ", 2 3/4 ", 4 "	$0 (OTC)	
sur-fit natura flange cap 1 3/4 "	$0 (OTC)	
sur-fit natura high output 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
sur-fit natura irrig faceplate 1 3/4 ", 2 3/4 "	$0 (OTC)	
sur-fit natura pouch-wafer combo pack 4" (14")	$0 (OTC)	
sur-fit natura stomahesive 1 ", 1 1/2 ", 1 1/4 ", 1 1/8 ", 1 3/4 ", 1 3/8 ", 1 5/8 ", 1/2 ", 2 1/4 ", 2 3/4 ", 3/4 ", 4 ", 5/8 ", 7/8 "	$0 (OTC)	
sur-fit natura urostomy pouch 1 1/2 ", 1 1/4 ", 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
sur-fit-active life tail clos	$0 (OTC)	
system pouch large size	$0 (OTC)	
t.e.d. anti-embolism stocking	$0 (OTC)	
t.e.d. knee length-s-regular	$0 (OTC)	
TECHLITE 0.3 ML 29GX12MM (1/2) 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TECHLITE 0.3 ML 30GX8MM (1/2) 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.3 ML 31GX6MM (1/2) 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.3 ML 31GX8MM (1/2) 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.5 ML 30GX12MM (1/2) 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.5 ML 30GX8MM (1/2) 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.5 ML 31GX6MM (1/2) 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE 0.5 ML 31GX8MM (1/2) 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE INS SYR 1 ML 29GX12MM 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE INS SYR 1 ML 30GX12MM 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE INS SYR 1 ML 31GX6MM 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE INS SYR 1 ML 31GX8MM 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 29GX3/8" 29 GAUGE X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 32GX1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PEN NEEDLE 32GX5/16" 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TECHLITE PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TECHLITE PLUS PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TERUMO INS SYRINGE U100-1 ML 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TERUMO INS SYRINGE U100-1 ML 1 ML 30 GAUGE X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TERUMO INS SYRINGE U100-1/2 ML 1/2 ML 30 X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TERUMO INS SYRINGE U100-1/3 ML 0.3 ML 30 X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TERUMO INS SYRNG U100-1/2 ML 0.5 ML 29 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
THINPRO INS SYRIN U100-0.3 ML 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 X 3/8", 0.3 ML 31 X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
THINPRO INS SYRIN U100-0.5 ML 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 X 3/8", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
THINPRO INS SYRIN U100-1 ML 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 3/8", 1 ML 31 X 3/8"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TOPFINE INSULN PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
transpore surgical topical tape 1 x 1 1/2 "-yard, 1 x 10 "-yard, 1/2 x 10 "-yard, 2 x 1 1/2 "-yard, 2 x 10 "-yard, 3 x 10 "-yard	$0 (OTC)	
TRUE CMFRT PRO 0.5 ML 30G 5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE CMFRT PRO 0.5 ML 31G 5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE CMFRT PRO 0.5 ML 32G 5/16" 1/2 ML 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE CMFT SFTY PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TRUE CMFT SFTY PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE CMFT SFTY PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT 0.5 ML 30G 1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT 0.5 ML 30G 5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT 0.5 ML 31G 5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT ALCOHOL 70% PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 31GX5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 31GX6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 32G 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 32GX4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 33G 5MM 33 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PEN NDL 33G 6MM 33 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PRO 1 ML 30G 1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TRUE COMFORT PRO 1 ML 30G 5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PRO 1 ML 31G 5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PRO 1 ML 32G 5/16" 1 ML 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT PRO ALCOHOL PADS	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFORT SFTY 1 ML 30G 1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
true comfort shoulder compress	$0 (OTC)	
TRUE COMFRT PRO 0.5 ML 30G 1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFRT SFTY 1 ML 30G 5/16" 1 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFRT SFTY 1 ML 31G 5/16" 1 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE COMFRT SFTY 1 ML 32G 5/16" 1 ML 32 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
true support wrist brace	$0 (OTC)	
TRUE-CMFRT PRO PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE-CMFRT PRO PEN NDL 31G 6MM 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE-CMFRT PRO PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUE-CMFRT PRO PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS PEN NEEDLE 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS PEN NEEDLE 31G X 1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS PEN NEEDLE 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TRUEPLUS PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.5 ML 28GX1/2" 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.5 ML 29GX1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 1 ML 28GX1/2" 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 1 ML 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
TRUEPLUS SYR 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
truform compression stocking	$0 (OTC)	
two-piece stoma caps	$0 (OTC)	
ULT CFT 0.3 ML 31GX5/16" (1/2) 1/2 UNIT 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICAR INS 0.3 ML 31GX1/4(1/2) 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE INS 0.3 ML 31GX1/4" 0.3 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE INS 0.5 ML 31GX1/4" 1/2 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE INS 1 ML 31GX1/4" 1 ML 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ULTICARE INS SYR 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLE 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLE 8MM 31G 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLES 12MM 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLES 4MM 32G MICRO, 32GX4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE PEN NEEDLES 6MM 32G 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SAFE PEN NDL 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SAFE PEN NDL 5MM 30G 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SYR 0.3 ML 30GX1/2" 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SYR 0.3 ML 31GX5/16" SHORT NDL 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SYR 0.5 ML 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SYR 0.5 ML 31GX5/16" SHORT NDL 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTICARE SYR 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFE 1 ML 30G 12.7MM 1 ML 30 X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFE0.3 ML 30G 12.7MM 0.3 ML 30 X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFE0.5 ML 30G 12.7MM 1/2 ML 30 X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 1 ML 31G 8MM 1 ML 31 X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ULTIGUARD SAFEPACK 29G 12.7MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPACK 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPK 0.3 ML 31G 8MM 0.3 ML 31 X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTIGUARD SAFEPK 0.5 ML 31G 8MM 1/2 ML 31 X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET ALCOHOL STERL SWAB	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET INSULIN SYRINGE 0.3 ML 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET INSULIN SYRINGE 0.5 ML 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET INSULIN SYRINGE 1 ML 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET PEN NEEDLE 29 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTILET PEN NEEDLE 4MM 32G 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.3 ML SYRINGE 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ULTRA COMFORT 0.5 ML 28GX1/2" CONVERTS TO 29G 1/2 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.5 ML 29GX1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.5 ML SYRINGE 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 0.5 ML SYRINGE 1/2 ML 28 GAUGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 1 ML 29GX1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA COMFORT 1 ML SYRINGE 1 ML 28 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO 0.3 ML 30G 1/2" (1/2) 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO 0.3 ML 30G 5/16"(1/2) 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO 0.3 ML 31G 5/16"(1/2) 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO PEN NEEDLE 33G 4MM 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO PEN NEEDLES 12MM 29G 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO SYR 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ULTRA FLO SYR 0.3 ML 30G 5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO SYR 0.3 ML 31G 5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA FLO SYR 0.5 ML 29G 1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA THIN PEN NDL 32G X 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 0.3 ML 30GX5/16" 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 0.3 ML 31GX5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 0.5 ML 30GX1/2" 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 0.5 ML 31GX5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 1 ML 30G X 5/16" 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 1 ML 30GX1/2" 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE INS 1 ML 31G X 5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 31GX1/4" 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 31GX3/16" 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 31GX5/16" 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 32GX1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 32GX3/16" 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRACARE PEN NEEDLE 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ULTRACARE PEN NEEDLE 33GX5/32" 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE 0.3 ML 30G 12.7MM 0.3 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE 0.3 ML 31G 6MM (1/2) 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE 0.3 ML 31G 8MM (1/2) 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE 0.5 ML 30G 12.7MM 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRAFINE INS 0.5 ML 29G 12.7MM 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE INS 0.5 ML 31G 6MM 0.5 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE INS SYR 1 ML 31G 6MM 1 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE INS SYR 1 ML 31G 8MM 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE PEN NDL 29G 12.7MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE PEN NEEDLE 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE PEN NEEDLE 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE SYR 0.3 ML 31G 6MM 0.3 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE SYR 0.3 ML 31G 8MM 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE SYR 0.5 ML 31G 6MM 1/2 ML 31 GAUGE X 15/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE SYR 0.5 ML 31G 8MM 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-FINE SYR 1 ML 30G 12.7MM 1 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ultra-fresh aerosol,spray	$0 (OTC)	
ULTRA-THIN II 1 ML 31GX5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS 0.3 ML 30G 0.3 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS 0.3 ML 31G 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS 0.5 ML 29G 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS 0.5 ML 30G 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS 0.5 ML 31G 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS SYR 1 ML 29G 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II INS SYR 1 ML 30G 1 ML 30 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II PEN NDL 29GX1/2" 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
ULTRA-THIN II PEN NDL 31GX5/16 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE OTC PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE OTC PEN NEEDLE 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 12MM 29G 29GX12MM, STRL 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 31GX3/16" 31GX5MM,STRL,MINI 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 32GX1/4" 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 33GX5/32" 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
UNIFINE PENTIPS 6MM 31G 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS 8MM 31G 31GX8MM, SHORT, STRL 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS MAX 30GX3/16" 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 29GX1/2" 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 30GX3/16" 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 31GX1/4" ULTRA SHORT, 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 32GX5/32" 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PENTIPS PLUS 33GX5/32" 33 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PROTECT 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PROTECT 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE PROTECT 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 30G 5MM 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 30G 8MM 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE SAFECONTROL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
UNIFINE ULTR PEN NDL 34G 3.5MM 34 GAUGE X 9/64"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 31G 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
UNIFINE ULTRA PEN NDL 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
uri-clean liquid	$0 (OTC)	
uro minicap	$0 (OTC)	
urostomy drain tube adapter	$0 (OTC)	
urostomy micro-pouch	$0 (OTC)	
urostomy multi-chamber 10 1/2 "-456 ml	$0 (OTC)	
urostomy multi-chamber pouch	$0 (OTC)	
urostomy pouch 1 " (9"), 1 1/4 " (9"), 1 1/8 " (9"), 1 3/4 " (9"), 3/4 " (9"), 7/8 " (9")	$0 (OTC)	
urostomy pouch-mic washer 1 1/2 " (9"), 1 3/8 " (9")	$0 (OTC)	
VANISHPOINT 0.5 ML 30GX1/2" SY OUTER 0.5 ML 30 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VANISHPOINT INS 0.5 ML 30G 8MM OUTER 0.5 ML 30 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VANISHPOINT INS 1 ML 30GX3/16" 1 ML 30 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VANISHPOINT U-100 29X1/2 SYR 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE INS SYR 1 ML 29G 1/2" 1 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 29G 12MM 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
VERIFINE PEN NEEDLE 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 31G X 6MM 31 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 31G X 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 32G 6MM 32 GAUGE X 1/4"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 32G X 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PEN NEEDLE 32G X 5MM 32 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PLUS PEN NDL 31G 5MM 31 GAUGE X 3/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PLUS PEN NDL 31G 8MM 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PLUS PEN NDL 32G 4MM 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE PLUS PEN NDL 32G 4MM-SHARPS CONTAINER 32 GAUGE X 5/32"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE SYRING 0.5 ML 29G 1/2" 0.5 ML 29 GAUGE X 1/2"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE SYRING 1 ML 31G 5/16" 1 ML 31 GAUGE X 5/16	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE SYRNG 0.3 ML 31G 5/16" 0.3 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERIFINE SYRNG 0.5 ML 31G 5/16" 0.5 ML 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
VERSALON ALL PURPOSE SPONGE 25'S,N-STERILE,3PLY 2 X 2 "	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
V-GO 20 DEVICE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
V-GO 30 DEVICE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
V-GO 40 DEVICE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)

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

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
visi-flow irrigation sleeve 1 1/2 ", 1 3/4 ", 2 1/4 ", 2 3/4 "	$0 (OTC)	
visi-flow irrigator-stoma cone	$0 (OTC)	
visi-flow sleeve tail closures	$0 (OTC)	
visi-flow stoma cone	$0 (OTC)	
WEBCOL ALCOHOL PREPS 20'S,LARGE	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
WM UNIFINE PENTIP PLUS 8MM 31G W/ SAFETY CLICK 31 GAUGE X 5/16"	$0/$1.60/$5.10 (Tier 1-Generic)	PA; ST
wrist brace	$0 (OTC)	
wrist support one size	$0 (OTC)	
Enzyme Cofactors/Chaperones		
Enzyme Cofactors/Chaperones		
MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (90 per 30 days)
Enzyme Replacement/Modifiers		
Enzyme Replacement/Modifiers		
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 - 30,000 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	
dairy aid oral tablet,chewable 3,000 unit	$0 (OTC)	
dairy digestive oral tablet 9,000 unit	$0 (OTC)	
dairy digestive oral tablet,chewable 9,000 unit	$0 (OTC)	
dairy digestive supplement oral tablet 3,000 unit	$0 (OTC)	
dairy relief oral tablet 4,500 unit	$0 (OTC)	
dairy-aid oral tablet 3,000 unit	$0 (OTC)	
javygtor oral tablet,soluble 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
lactase fast acting oral tablet 9,000 unit	$0 (OTC)	
lactase oral tablet 3,000 unit, 4,500 unit	$0 (OTC)	
lactose fast acting relief oral tablet 9,000 unit	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
ORFADIN ORAL SUSPENSION 4 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
PULMOZYME INHALATION SOLUTION 1 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
sapropterin oral tablet,soluble 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	
Eye, Ear, Nose, Throat Agents		
Eye, Ear, Nose, Throat Agents, Miscellaneous		
12 hour nasal spray nasal spray,non-aerosol 0.05 %	$0 (OTC)	
4 way nasal spray,non-aerosol 1 %	$0 (OTC)	
allergy nasal (oxymetazoline) nasal mist 0.05 %	$0 (OTC)	
altamist nasal aerosol,spray 0.65 %	$0 (OTC)	
artificial eye lubricant ophthalmic (eye) ointment 83-15 %	$0 (OTC)	
artificial tears (cmc) ophthalmic (eye) drops 1 %	$0 (OTC)	
artificial tears (pf) ophthalmic (eye) dropperette	$0 (OTC)	
artificial tears(dext70-hypro) ophthalmic (eye) drops , 0.1-0.3 %	$0 (OTC)	
artificial tears(glycerin-peg) ophthalmic (eye) drops 1-0.3 %	$0 (OTC)	
artificial tears(pvalch-povid) ophthalmic (eye) drops 0.5-0.6 %	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
atropine ophthalmic (eye) drops 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ayr saline gel nasal spray,non-aerosol	$0 (OTC)	
ayr saline nasal aerosol,spray 0.65 %	$0 (OTC)	
azelastine nasal spray,non-aerosol 137 mcg (0.1 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
azelastine nasal spray,non-aerosol 205.5 mcg (0.15 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 25 days)
azelastine ophthalmic (eye) drops 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
baby ayr saline nasal drops 0.65 %	$0 (OTC)	
bion tears (pf) ophthalmic (eye) dropperette 0.1-0.3 %	$0 (OTC)	
biotene oralbalance (glycerin) mucous membrane gel	$0 (OTC)	
chloraseptic throat spray mucous membrane aerosol,spray 1.4 %	$0 (OTC)	
clear eyes natural tears ophthalmic (eye) drops 0.5-0.6 %	$0 (OTC)	
cromolyn ophthalmic (eye) drops 4 %	$0/$1.60/$5.10 (Tier 1-Generic)	
deep sea nasal nasal aerosol,spray 0.65 %	$0 (OTC)	
dristan long lasting nasal spray,non-aerosol 0.05 %	$0 (OTC)	
ephrine nasal drops 1 %	$0 (OTC)	
epinastine ophthalmic (eye) drops 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
eq gentle ophthalmic (eye) drops 0.3 %	$0 (OTC)	
eyes alive ophthalmic (eye) dropperette 0.5 %	$0 (OTC)	
for sty relief ophthalmic (eye) ointment	$0 (OTC)	
freshkote ophthalmic (eye) drops 2.7-2 %	$0 (OTC)	
genteal tears moderate (pf) ophthalmic (eye) dropperette 0.1-0.3 %	$0 (OTC)	
genteal tears moderate ophthalmic (eye) drops 0.1-0.3-0.2 %	$0 (OTC)	
genteal tears severe gel ophthalmic (eye) gel 0.3 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
genteal tears severe(petrolat) ophthalmic (eye) ointment 94-3 %	$0 (OTC)	
ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 28 days)
ipratropium bromide nasal spray,non-aerosol 42 mcg (0.06 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (15 per 10 days)
little remedies saline nasal aerosol,spray 0.65 %	$0 (OTC)	
lubricant eye ophthalmic (eye) ointment 57.7-31.9 %	$0 (OTC)	
lubrifresh pm ophthalmic (eye) ointment 83-15 %	$0 (OTC)	
MIEBO (PF) OPHTHALMIC (EYE) DROPS 100 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (12 per 28 days)
moisturizing lubricant ophthalmic (eye) drops 0.25 %	$0 (OTC)	
muro 128 ophthalmic (eye) drops 2 %, 5 %	$0 (OTC)	
muro 128 ophthalmic (eye) ointment 5 %	$0 (OTC)	
nasal moisturizing nasal aerosol,spray 0.65 %	$0 (OTC)	
nasal spray (oxymetazoline) nasal spray,non-aerosol 0.05 %	$0 (OTC)	
natural tears (pf) ophthalmic (eye) dropperette 0.1-0.3 %	$0 (OTC)	
neo-synephrine (phenylephrine) nasal spray,non-aerosol 0.25 %	$0 (OTC)	
nostrilla nasal spray,non-aerosol 0.05 %	$0 (OTC)	
olopatadine ophthalmic (eye) drops 0.1 %, 0.2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ora relief mucous membrane aerosol,spray 1.4 %	$0 (OTC)	
polyvinyl alcohol ophthalmic (eye) drops 1.4 %	$0 (OTC)	
pure and gentle eye ophthalmic (eye) drops 0.3 %	$0 (OTC)	
refresh classic (pf) ophthalmic (eye) dropperette 1.4-0.6 %	$0 (OTC)	
refresh contacts ophthalmic (eye) drops	$0 (OTC)	
refresh lacri-lube ophthalmic (eye) ointment 56.8-42.5 %	$0 (OTC)	
refresh liquigel ophthalmic (eye) drops, liquid gel 1 %	$0 (OTC)	
refresh tears ophthalmic (eye) drops 0.5 %	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
retaine pm ophthalmic (eye) ointment 80-20 %	$0 (OTC)	
saline nasal (aloe vera) nasal gel	$0 (OTC)	
saline nose nasal aerosol,spray 0.65 %	$0 (OTC)	
sodium chloride ophthalmic (eye) drops 5 %	$0 (OTC)	
sodium chloride ophthalmic (eye) ointment 5 %	$0 (OTC)	
soothe hydration ophthalmic (eye) drops 1.25 %	$0 (OTC)	
soothe lubricant ophthalmic (eye) dropperette 0.6-0.6 %	$0 (OTC)	
soothe night time lubricant ophthalmic (eye) ointment 80-20 %	$0 (OTC)	
soothing saline-aloe nasal spray,non-aerosol	$0 (OTC)	
sore throat (phenol) mucous membrane aerosol,spray 1.4 %	$0 (OTC)	
sore throat mucous membrane aerosol,spray	$0 (OTC)	
sterile lubricant ophthalmic (eye) drops, liquid gel 0.7 %	$0 (OTC)	
stye lubricant ophthalmic (eye) ointment 57.7-31.9 %	$0 (OTC)	
systane (propylene glycol) ophthalmic (eye) drops 0.4-0.3 %	$0 (OTC)	
systane gel ophthalmic (eye) gel 0.3 %	$0 (OTC)	
systane ultra (pf) ophthalmic (eye) dropperette 0.4-0.3 %	$0 (OTC)	
theratears ophthalmic (eye) dropperette,gel 1 %	$0 (OTC)	
theratears ophthalmic (eye) drops 0.25 %	$0 (OTC)	
ultra fresh pm ophthalmic (eye) ointment	$0 (OTC)	
ventiva tears plus ophthalmic (eye) drops 0.6 %	$0 (OTC)	
vicks qlearquil(oxymetazoline) nasal mist 0.05 %	$0 (OTC)	
vicks sinex ultra fine mist 12 nasal mist 0.05 %	$0 (OTC)	
wal-four nasal spray,non-aerosol 1 %	$0 (OTC)	
Eye, Ear, Nose, Throat Anti-Infectives Agents		
acetic acid otic (ear) solution 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
bacitracin ophthalmic (eye) ointment 500 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	
ciprofloxacin hcl ophthalmic (eye) drops 0.3 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (7.5 per 7 days)
clearcanal earwax softener otic (ear) drops 6.5 %	$0 (OTC)	
debrox otic (ear) drops 6.5 %	$0 (OTC)	
ear drops (carbamide peroxide) otic (ear) drops 6.5 %	$0 (OTC)	
erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (3.5 per 4 days)
gentamicin ophthalmic (eye) drops 0.3 %	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone-acetic acid otic (ear) drops 1-2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
moxifloxacin ophthalmic (eye) drops 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
murine ear otic (ear) drops 6.5 %	$0 (OTC)	
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	$0/$4.90/$12.65 (Tier 1-Brand)	
neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%	$0/$1.60/$5.10 (Tier 1-Generic)	
neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%	$0/$1.60/$5.10 (Tier 1-Generic)	
neo-polycin hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
neo-polycin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	$0/$1.60/$5.10 (Tier 1-Generic)	
ofloxacin ophthalmic (eye) drops 0.3 %	$0/$1.60/$5.10 (Tier 1-Generic)	
ofloxacin otic (ear) drops 0.3 %	$0/$1.60/$5.10 (Tier 1-Generic)	
polycin ophthalmic (eye) ointment 500-10,000 unit/gram	$0/$1.60/$5.10 (Tier 1-Generic)	
polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfacetamide sodium ophthalmic (eye) drops 10 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfacetamide sodium ophthalmic (eye) ointment 10 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)	$0/$1.60/$5.10 (Tier 1-Generic)	
tobramycin ophthalmic (eye) drops 0.3 %	$0/$1.60/$5.10 (Tier 1-Generic)	
tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
tobramycin-lotepred ophthalmic (eye) drops,suspension 0.3-0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
trifluridine ophthalmic (eye) drops 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
XDEMVY OPHTHALMIC (EYE) DROPS 0.25 %	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (10 per 42 days)
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	$0/$4.90/$12.65 (Tier 1-Brand)	
Eye, Ear, Nose, Throat Anti-Inflammatory Agents		
bromfenac ophthalmic (eye) drops 0.07 %	$0/$1.60/$5.10 (Tier 1-Generic)	
cyclosporine ophthalmic (eye) dropperette 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
diclofenac sodium ophthalmic (eye) drops 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
difluprednate ophthalmic (eye) drops 0.05 %	$0/$1.60/$5.10 (Tier 1-Generic)	
EYSUVIS OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (8.3 per 14 days)
flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (50 per 25 days)
fluocinolone acetonide oil otic (ear) drops 0.01 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluorometholone ophthalmic (eye) drops,suspension 0.1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
flurbiprofen sodium ophthalmic (eye) drops 0.03 %	$0/$1.60/$5.10 (Tier 1-Generic)	
fluticasone propionate nasal spray,suspension 50 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (16 per 30 days)
ILEVRO OPHTHALMIC (EYE) DROPS,SUSPENSION 0.3 %	$0/$4.90/$12.65 (Tier 1-Brand)	
INVELTYS OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (5.6 per 14 days)
ketorolac ophthalmic (eye) drops 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (10 per 25 days)
LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (3.5 per 14 days)
LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL 0.38 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (5 per 16 days)
loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (10 per 14 days)
loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %	$0/$1.60/$5.10 (Tier 1-Generic)	ST
loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (15 per 19 days)
mometasone nasal spray,non-aerosol 50 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (34 per 30 days)
prednisolone acetate ophthalmic (eye) drops,suspension 1 %	$0/$4.90/$12.65 (Tier 1-Brand)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
Gastrointestinal Agents		
Antiflatulents		
bicarsim forte oral tablet 125 mg	$0 (OTC)	
gas relief 80 (simethicone) oral tablet,chewable 80 mg	$0 (OTC)	
gas relief extra strength oral capsule 125 mg	$0 (OTC)	
gas-x extra strength oral capsule 125 mg	$0 (OTC)	
gas-x oral capsule 250 mg	$0 (OTC)	
gas-x ultra-strength oral capsule 180 mg	$0 (OTC)	
infants simethicone oral drops,suspension 40 mg/0.6 ml	$0 (OTC)	
little tummys gas relief oral drops,suspension 40 mg/0.6 ml	$0 (OTC)	
phazyme oral capsule 180 mg	$0 (OTC)	
simethicone oral capsule 180 mg	$0 (OTC)	
simethicone oral tablet,chewable 125 mg	$0 (OTC)	
Antiulcer Agents And Acid Suppressants		
amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cimetidine hcl oral solution 300 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
esomeprazole magnesium oral granules dr for susp in packet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (30 per 30 days)
esomeprazole magnesium oral granules dr for susp in packet 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	ST; QL (60 per 30 days)
famotidine oral tablet 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lansoprazole oral capsule,delayed release(dr/ec) 15 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
lansoprazole oral capsule,delayed release(dr/ec) 30 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
misoprostol oral tablet 100 mcg, 200 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pantoprazole oral tablet,delayed release (dr/ec) 20 mg, 40 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
rabeprazole oral tablet,delayed release (dr/ec) 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sucralfate oral tablet 1 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
VOQUEZNA ORAL TABLET 10 MG, 20 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA
Gastrointestinal Agents, Other		
alka-seltzer heartburn chew oral tablet,chewable 300 mg (750 mg)	$0 (OTC)	
almacone-2 oral suspension 400-400-40 mg/5 ml	$0 (OTC)	
aluminum hydroxide gel oral suspension 320 mg/5 ml	$0 (OTC)	
antacid (calcium carbonate) oral tablet,chewable 215 mg calcium (500 mg)	$0 (OTC)	
antacid ext str (calcium carb) oral tablet,chewable 300 mg (750 mg)	$0 (OTC)	
antacid extra-strength oral tablet,chewable 168 mg calcium (420 mg)	$0 (OTC)	
antacid ultra strength oral tablet,chewable 430 mg calcium (1,000 mg), 470 mg calcium (1,177 mg)	$0 (OTC)	
anti-diarrheal (lope)-anti-gas oral tablet 2-125 mg	$0 (OTC)	
anti-diarrheal (loperamide) oral capsule 2 mg	$0 (OTC)	
anti-diarrheal (loperamide) oral tablet 2 mg	$0 (OTC)	
anti-diarrheal oral suspension 262 mg/15 ml	$0 (OTC)	
bismuth subsalicylate oral tablet,chewable 262 mg	$0 (OTC)	
calcium antacid oral tablet,chewable 200 mg calcium (500 mg)	$0 (OTC)	
calcium carbonate oral suspension 500 mg/5 ml (1,250 mg/5 ml)	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
calcium carbonate oral tablet,chewable 400 mg calcium (1,000 mg), 500 mg calcium (1,250 mg)	$0 (OTC)	
cal-gest antacid oral tablet,chewable 200 mg calcium (500 mg)	$0 (OTC)	
carglumic acid oral tablet, dispersible 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
children's antacid oral suspension 400 mg/5 ml	$0 (OTC)	
children's pepto oral tablet,chewable 160 mg calcium (400 mg)	$0 (OTC)	
children's soothe oral tablet,chewable 160 mg calcium (400 mg)	$0 (OTC)	
comfort gel extra strength oral suspension 400-400-40 mg/5 ml	$0 (OTC)	
constulose oral solution 10 gram/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
cromolyn oral concentrate 100 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
diamode oral tablet 2 mg	$0 (OTC)	
dicyclomine oral capsule 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dicyclomine oral solution 10 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
dicyclomine oral tablet 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
enulose oral solution 10 gram/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
flavor chews antacid oral tablet,chewable 300 mg (750 mg)	$0 (OTC)	
gelusil antacid and anti-gas oral tablet,chewable 200-200-25 mg	$0 (OTC)	
generlac oral solution 10 gram/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
geri-lanta oral suspension 400-400-40 mg/5 ml	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
geri-mox antacid-antigas oral suspension 200-200-20 mg/5 ml	$0 (OTC)	
glycopyrrolate oral tablet 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
imodium a-d oral capsule 2 mg	$0 (OTC)	
imodium a-d oral liquid 1 mg/7.5 ml	$0 (OTC)	
kaopectate (bismuth subsalicy) oral suspension 262 mg/15 ml	$0 (OTC)	
kaopectate max oral suspension 525 mg/15 ml	$0 (OTC)	
kionex oral suspension 15 gram/60 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
lactulose oral solution 10 gram/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
liquid antacid oral suspension 400-400-40 mg/5 ml	$0 (OTC)	
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	$0/$4.90/$12.65 (Tier 1-Brand)	
loperamide oral capsule 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
loperamide oral liquid 1 mg/7.5 ml	$0 (OTC)	
lubiprostone oral capsule 24 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
lubiprostone oral capsule 8 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
maalox advanced oral suspension 200-200-20 mg/5 ml	$0 (OTC)	
magnesium oxide oral capsule 400 mg magnesium	$0 (OTC)	
magnesium oxide oral capsule 500 mg	$0 (OTC)	
magnesium oxide oral tablet 200 mg magnesium, 250 mg magnesium, 400 mg (241.3 mg magnesium), 400 mg magnesium, 420 mg, 500 mg magnesium	$0 (OTC)	
magnesium oxide oral tablet,chewable 200 mg magnesium	$0 (OTC)	
magnesium oxide oral tablet,disintegrating 400 mg magnesium	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
metoclopramide hcl oral solution 5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
metoclopramide hcl oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mgo oral tablet 400 mg (241.3 mg magnesium)	$0 (OTC)	
mintox maximum strength oral suspension 400-400-40 mg/5 ml	$0 (OTC)	
mintox plus oral tablet,chewable 200-200-25 mg	$0 (OTC)	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
phillips oral tablet 500 mg magnesium	$0 (OTC)	
pink bismuth oral suspension 262 mg/15 ml	$0 (OTC)	
pink bismuth oral tablet 262 mg	$0 (OTC)	
sodium bicarbonate oral tablet 325 mg, 650 mg	$0 (OTC)	
sodium polystyrene sulfonate oral powder 15 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium polystyrene sulfonate oral suspension 15 gram/60 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
sps (with sorbitol) oral suspension 15-20 gram/60 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
stomach relief oral suspension 262 mg/15 ml, 525 mg/15 ml	$0 (OTC)	
TRULANCE ORAL TABLET 3 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
tums ultra oral tablet,chewable 470 mg calcium (1,177 mg)	$0 (OTC)	
ultra strength antacid oral tablet,chewable 400 mg calcium (1,000 mg)	$0 (OTC)	
ursodiol oral capsule 200 mg, 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
ursodiol oral capsule 300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
ursodiol oral tablet 250 mg, 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
VELTASSA ORAL POWDER IN PACKET 1 GRAM, 16.8 GRAM, 25.2 GRAM, 8.4 GRAM	$0/$4.90/$12.65 (Tier 1-Brand)	
XERMELO ORAL TABLET 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (84 per 28 days)
Laxatives		
alophen (bisacodyl) oral tablet,delayed release (dr/ec) 5 mg	$0 (OTC)	
bisacodyl oral tablet,delayed release (dr/ec) 5 mg	$0 (OTC)	
bisacodyl rectal suppository 10 mg	$0 (OTC)	
chocolate laxative oral tablet,chewable 15 mg	$0 (OTC)	
citrate of magnesia oral solution	$0 (OTC)	
citroma oral solution	$0 (OTC)	
clearlax oral powder in packet 17 gram	$0 (OTC)	
col-rite oral capsule 250 mg	$0 (OTC)	
daily fiber (psyllium-aspart) oral powder in packet 3 gram, 3.4 gram	$0 (OTC)	
daily fiber (psyllium-sucrose) oral powder 3 gram/7 gram, 3.4 gram/7 gram	$0 (OTC)	
daily fiber oral capsule 0.4 gram, 0.52 gram	$0 (OTC)	
docusate sodium oral capsule 100 mg	$0 (OTC)	
docusate sodium oral liquid 50 mg/5 ml	$0 (OTC)	
docusate sodium oral syrup 60 mg/15 ml	$0 (OTC)	
docusate sodium rectal enema 283 mg/5 ml	$0 (OTC)	
docusol kids rectal enema 100 mg/5 ml	$0 (OTC)	
dok oral tablet 100 mg	$0 (OTC)	
dulcolax (magnesium hydroxide) oral tablet,chewable 1,200 mg, 600 mg	$0 (OTC)	
enema rectal enema 19-7 gram/118 ml	$0 (OTC)	
enemeez kids rectal enema 100 mg/5 ml	$0 (OTC)	
enemeez rectal enema 283 mg/5 ml	$0 (OTC)	
equalactin oral tablet,chewable 500 mg	$0 (OTC)	
evac oral powder 3 gram/3 gram	$0 (OTC)	
evac-u-gen (sennosides) oral tablet 8.6 mg	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ex-lax (sennosides) oral tablet 15 mg	$0 (OTC)	
fiber (calcium polycarbophil) oral tablet 625 mg	$0 (OTC)	
fiber (psyllium husk-sugar) oral powder 3.4 gram/7 gram	$0 (OTC)	
fiber fusion daily oral capsule 620 mg	$0 (OTC)	
fiber laxative (psyllium husk) oral capsule 0.52 gram	$0 (OTC)	
fiber therapy (m-cell/sugar) oral powder 2 gram/19 gram	$0 (OTC)	
fiber therapy (m-cellulose) oral tablet 500 mg	$0 (OTC)	
fiber therapy (psyllium-sucro) oral powder 3 gram/12 gram	$0 (OTC)	
fiber therapy(psyl seed-sugar) oral powder	$0 (OTC)	
fiber-lax oral tablet 625 mg	$0 (OTC)	
fleet bisacodyl rectal enema 10 mg/30 ml	$0 (OTC)	
fleet enema rectal enema 19-7 gram/118 ml	$0 (OTC)	
fleet glycerin (adult) rectal suppository	$0 (OTC)	
fleet glycerin laxative rectal solution 5.4 gram/5.4 ml	$0 (OTC)	
gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
gavilyte-n oral recon soln 420 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
gentlelax oral powder 17 gram/dose	$0 (OTC)	
glycerin (adult) rectal suppository	$0 (OTC)	
glycerin (child) rectal suppository	$0 (OTC)	
hydrocil instant oral packet	$0 (OTC)	
konsyl daily fiber (stevia) oral powder in packet 3.5 gram	$0 (OTC)	
konsyl sugar-free oral powder in packet 6 gram	$0 (OTC)	
laxacin oral tablet 8.6-50 mg	$0 (OTC)	
laxative (bisacodyl) rectal suppository 10 mg	$0 (OTC)	
laxative (sennosides) oral tablet 15 mg, 25 mg	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
magnesium citrate oral solution	$0 (OTC)	
metamucil fiber (aspartame) oral powder in packet 3.4 gram	$0 (OTC)	
metamucil fiber thin oral wafer 2 gram, 2.5 gram	$0 (OTC)	
metamucil free (with sugar) oral powder 3 gram/7 gram	$0 (OTC)	
milk of magnesia oral suspension 400 mg/5 ml	$0 (OTC)	
mineral oil extra heavy oral oil	$0 (OTC)	
mineral oil heavy oral oil	$0 (OTC)	
mineral oil oral oil	$0 (OTC)	
mirafast oral tablet,chewable 1,200 mg	$0 (OTC)	
mucilin oral powder in packet 2.45 gram	$0 (OTC)	
mucilin sf oral powder in packet 3.5 gram	$0 (OTC)	
multihealth fiber (sugar) oral powder 3.4 gram/7 gram	$0 (OTC)	
multihealth fiber oral powder 3.4 gram/5.8 gram	$0 (OTC)	
natural fiber supplement oral powder 6 gram/6 gram	$0 (OTC)	
onelax fiber (with sucrose) oral powder 3.4 gram/12 gram	$0 (OTC)	
oral saline laxative oral liquid 7.2-2.7 gram/15 ml	$0 (OTC)	
p-col rite oral tablet 8.6-50 mg	$0 (OTC)	
pedia-lax (mag hydroxide) oral tablet,chewable 400 mg (170 mg magnesium)	$0 (OTC)	
pedia-lax rectal solution 2.8 gram/2.7 ml	$0 (OTC)	
peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
peg-electrolyte soln oral recon soln 420 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
perdiem overnight relief oral tablet 15 mg	$0 (OTC)	
phillips' liqui-gels oral capsule 100 mg	$0 (OTC)	
phosphate laxative oral liquid 7.2-2.7 gram/15 ml	$0 (OTC)	
prolaxa oral capsule 250 mg	$0 (OTC)	
promolaxin oral tablet 100 mg	$0 (OTC)	
psyllium husk (with sugar) oral powder 3 gram/7 gram	$0 (OTC)	
psyllium husk oral capsule 0.4 gram	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
psyllium husk oral powder 2.6 gram/4.1 gram	$0 (OTC)	
purelax oral powder in packet 17 gram	$0 (OTC)	
reguloid (psyllium husk) oral capsule 0.4 gram	$0 (OTC)	
reguloid (psyllium husk-sucro) oral powder 3 gram/12 gram	$0 (OTC)	
senexon-s oral tablet 8.6-50 mg	$0 (OTC)	
senna oral capsule 8.6 mg	$0 (OTC)	
senna oral syrup 8.8 mg/5 ml	$0 (OTC)	
senna oral tablet 8.6 mg	$0 (OTC)	
senokot extra strength oral tablet 17.2 mg	$0 (OTC)	
senokot-s oral tablet 8.6-50 mg	$0 (OTC)	
sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram, 17.5-3.13-1.6 gram 2 pack (480ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
stimulant laxative plus oral tablet 8.6-50 mg	$0 (OTC)	
stool softener oral capsule 250 mg, 50 mg	$0 (OTC)	
stool softener oral tablet 100 mg	$0 (OTC)	
stool softener-stimulant laxat oral capsule 8.6-50 mg	$0 (OTC)	
the magic bullet rectal suppository 10 mg	$0 (OTC)	
wal-mucil fiber (aspartame) oral powder 3.4 gram/5.8 gram	$0 (OTC)	
wal-mucil fiber oral capsule 0.52 gram	$0 (OTC)	
Phosphate Binders		
calcium acetate(phosphat bind) oral capsule 667 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
calcium acetate(phosphat bind) oral tablet 667 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
sevelamer carbonate oral tablet 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sevelamer hcl oral tablet 400 mg, 800 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Genitourinary Agents		
Antispasmodics, Urinary		
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
flavoxate oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	
oxybutynin chloride oral syrup 5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
oxybutynin chloride oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
solifenacin oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tolterodine oral capsule,extended release 24hr 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tolterodine oral tablet 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
trospium oral tablet 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Genitourinary Agents, Miscellaneous		
alfuzosin oral tablet extended release 24 hr 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
dutasteride oral capsule 0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
finasteride oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tamsulosin oral capsule 0.4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Heavy Metal Antagonists		
Heavy Metal Antagonists		
deferasirox oral granules in packet 180 mg, 360 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
deferasirox oral tablet 180 mg, 360 mg, 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA
penicillamine oral tablet 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
trientine oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (240 per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying		
Androgens		
danazol oral capsule 100 mg, 200 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA
testosterone enanthate intramuscular oil 200 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (5 per 28 days)
testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (300 per 30 days)
testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (150 per 30 days)
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (300 per 30 days)
Estrogens And Antiestrogens		
abigale lo oral tablet 0.5-0.1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
abigale oral tablet 1-0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
conjugated estrogens oral tablet 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (8 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (8 per 28 days)
estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 28 days)
estradiol vaginal cream 0.01 % (0.1 mg/gram)	$0/$1.60/$5.10 (Tier 1-Generic)	
estradiol vaginal tablet 10 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 28 days)
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
mimvey oral tablet 1-0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	$0/$4.90/$12.65 (Tier 1-Brand)	
PREMPHASE ORAL TABLET 0.625 MG (14)/ 0.625MG-5MG(14)	$0/$4.90/$12.65 (Tier 1-Brand)	PA-HRM; AGE (Max 64 Years)
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA-HRM; AGE (Max 64 Years)
raloxifene oral tablet 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
yuvafem vaginal tablet 10 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (18 per 28 days)
Glucocorticoids/Mineralocorticoids		
dexamethasone oral solution 0.5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
fludrocortisone oral tablet 0.1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
methylprednisolone acetate injection suspension 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
methylprednisolone oral tablets,dose pack 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prednisolone 15 mg/5 ml soln d/f 15 mg/5 ml (3 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prednisolone oral solution 15 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prednisone oral solution 5 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
prednisone oral tablets,dose pack 10 mg, 10 mg (48 pack), 5 mg, 5 mg (48 pack)	$0/$1.60/$5.10 (Tier 1-Generic)	
triamcinolone acetonide injection suspension 40 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
Pituitary		
CORTROPHIN GEL INJECTION GEL 80 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (35 per 28 days)
desmopressin 10 mcg/0.1 ml spr 10 mcg/spray (0.1 ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)	$0/$1.60/$5.10 (Tier 1-Generic)	
desmopressin oral tablet 0.1 mg, 0.2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
lanreotide subcutaneous syringe 120 mg/0.5 mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (0.5 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
LUPRON DEPOT-PED INTRAMUSCULAR SYRINGE KIT 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 30 MG/3 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
octreotide acetate injection solution 1,000 mcg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
ORGOVYX ORAL TABLET 120 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
ORILISSA ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (28 per 28 days)
ORILISSA ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 60 MG/0.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (0.2 per 28 days)
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 90 MG/0.3 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (0.3 per 28 days)
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
Progestins		
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (0.65 per 84 days)
gallifrey oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
medroxyprogesterone intramuscular suspension 150 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
medroxyprogesterone intramuscular syringe 150 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)	$0/$1.60/$5.10 (Tier 1-Generic)	PA-HRM; AGE (Max 64 Years)
norethindrone acetate oral tablet 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
progesterone micronized oral capsule 100 mg, 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Thyroid And Antithyroid Agents		
levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
liomny oral tablet 25 mcg, 5 mcg, 50 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
methimazole oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
propylthiouracil oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Immunological Agents		
Immunological Agents		
adalimumab-aaty subcutaneous auto-injector, kit 40 mg/0.4 ml, 80 mg/0.8 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
adalimumab-aaty subcutaneous syringe kit 20 mg/0.2 ml, 40 mg/0.4 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
adalimumab-aaty(cf) ai crohns subcutaneous auto-injector, kit 80 mg/0.8 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
azathioprine oral tablet 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
azathioprine sodium injection recon soln 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (8 per 28 days)
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (8 per 28 days)
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (2 per 28 days)
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
CIMZIA SUBCUTANEOUS SYRINGE KIT 200 MG/ML, 400 MG/2 ML (200 MG/ML X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
cyclosporine intravenous solution 250 mg/5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
cyclosporine modified oral solution 100 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
cyclosporine oral capsule 100 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
CYLTEZO(CF) PEN CROHN'S-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
CYLTEZO(CF) PEN PSORIASIS-UV SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
CYLTEZO(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
CYLTEZO(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.4 ML, 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 100 MG/0.67 ML, 200 MG/1.14 ML, 300 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
everolimus (immunosuppressive) oral tablet 0.25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
everolimus (immunosuppressive) oral tablet 0.5 mg, 0.75 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %)	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
gengraf oral capsule 100 mg, 25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
gengraf oral solution 100 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
HADLIMA PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML, 80 MG/0.8 ML-40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) PEN CROHNS-UC-HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) PEN PEDIATRIC UC SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) PEN PSOR-UV-ADOL HS SUBCUTANEOUS PEN INJECTOR KIT 80 MG/0.8 ML-40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML, 40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; Only NDCs starting with 00074
infliximab intravenous recon soln 100 mg	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
leflunomide oral tablet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
mycophenolate mofetil (hcl) intravenous recon soln 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
mycophenolate mofetil oral capsule 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
mycophenolate mofetil oral suspension for reconstitution 200 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
mycophenolate mofetil oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
mycophenolate sodium oral tablet,delayed release (dr/ec) 180 mg, 360 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
NIKTIMVO INTRAVENOUS SOLUTION 10 MG/ML, 50 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
NULOJIX INTRAVENOUS RECON SOLN 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
OMLYCLO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML, 75 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ORENCIA (WITH MALTOSE) INTRAVENOUS RECON SOLN 250 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML, 50 MG/0.4 ML, 87.5 MG/0.7 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
OTEZLA ORAL TABLET 20 MG, 30 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47), 10 MG (4)-20 MG (4)-30 MG(19)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK 10-20-30-75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
PROGRAF INTRAVENOUS SOLUTION 5 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML, 12.5 MG/0.25 ML, 15 MG/0.3 ML, 17.5 MG/0.35 ML, 20 MG/0.4 ML, 22.5 MG/0.45 ML, 25 MG/0.5 ML, 30 MG/0.6 ML, 7.5 MG/0.15 ML	$0/$4.90/$12.65 (Tier 1-Brand)	ST
REZUROCK ORAL TABLET 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS
RINVOQ LQ ORAL SOLUTION 1 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (360 per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SELARSDI INTRAVENOUS SOLUTION 130 MG/26 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA
SELARSDI SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA
SELARSDI SUBCUTANEOUS SYRINGE 90 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
sirolimus oral solution 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
SKYRIZI INTRAVENOUS SOLUTION 60 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML, 55 MG/0.37 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML), 360 MG/2.4 ML (150 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
tacrolimus intravenous solution 5 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
tacrolimus oral capsule,extended release 24hr 0.5 mg, 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
tacrolimus oral capsule,extended release 24hr 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; NM; NDS
TAVNEOS ORAL CAPSULE 10 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (180 per 30 days)
tofacitinib oral solution 1 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
tofacitinib oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
tofacitinib oral tablet extended release 24 hr 11 mg, 22 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
TREMFYA INTRAVENOUS SOLUTION 200 MG/20 ML (10 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TYENNE INTRAVENOUS SOLUTION 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML), 80 MG/4 ML (20 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
TYENNE SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
ustekinumab-aauz subcutaneous syringe 45 mg/0.5 mL, 90 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA
YESINTEK INTRAVENOUS SOLUTION 130 MG/26 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
YESINTEK SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA
YESINTEK SUBCUTANEOUS SYRINGE 90 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
YUFLYMA(CF) AI CROHN'S-UC-HS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
YUFLYMA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML, 80 MG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
YUFLYMA(CF) SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML, 40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Vaccines		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
DENGVAXIA (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP4.5-6 CCID50/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (3 per 365 days)
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
HAVRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENBRAYA MENACWY COMPONENT(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 5 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENBRAYA MENB COMPONENT (PF) INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENMENVY MEN A-B-C-W-Y (PF) INTRAMUSCULAR KIT 0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENMENVY MENACWY COMPONENT(PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 10-5 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENMENVY MENB COMPONENT (PF) INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-20MCG-5LF- 62 DU/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2-3.3CCID50/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	$0/$4.90/$12.65 (Tier 1-Brand)	
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; $0 copay
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
ROTATEQ VACCINE ORAL SOLUTION 2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay; QL (2 per 365 days)
SHINGRIX (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay; QL (2 per 365 days)
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TICOVAC INTRAMUSCULAR SYRINGE 1.2 MCG/0.25 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
TICOVAC INTRAMUSCULAR SYRINGE 2.4 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
VAQTA (PF) INTRAMUSCULAR SUSPENSION 50 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
VAQTA (PF) INTRAMUSCULAR SYRINGE 50 UNIT/ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION 4X10EXP8 TO 2X 10EXP9 CF UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
VIMKUNYA (PF) INTRAMUSCULAR SYRINGE 40 MCG/0.8 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC) 2 BILLION UNIT	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	$0 copay
Inflammatory Bowel Disease Agents		
Inflammatory Bowel Disease Agents		
alosetron oral tablet 0.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
alosetron oral tablet 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
balsalazide oral capsule 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
budesonide oral capsule,delayed,extend.release 3 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
budesonide rectal foam 2 mg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	
hydrocortisone rectal enema 100 mg/60 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
mesalamine oral capsule, extended release 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
mesalamine oral capsule,extended release 24hr 0.375 gram	$0/$1.60/$5.10 (Tier 1-Generic)	
mesalamine oral tablet,delayed release (dr/ec) 1.2 gram	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
sulfasalazine oral tablet 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
sulfasalazine oral tablet,delayed release (DR/EC) 500 mg	$0/$4.90/$12.65 (Tier 1-Brand)	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
alendronate oral solution 70 mg/75 ml	$0/$1.60/$5.10 (Tier 1-Generic)	QL (300 per 28 days)
alendronate oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
alendronate oral tablet 35 mg, 70 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (4 per 28 days)
calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	
calcitriol oral capsule 0.25 mcg, 0.5 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
cinacalcet oral tablet 30 mg, 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
cinacalcet oral tablet 90 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (120 per 30 days)
ibandronate oral tablet 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (1 per 28 days)
OSENVELT SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR 30 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (60 per 30 days)
STOBOCLO SUBCUTANEOUS SYRINGE 60 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	QL (1 per 180 days)
teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24mL)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (2.24 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1.56 per 30 days)
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
3m nexcare durapore topical tape 1 x 10 "-yard	$0 (OTC)	
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
adhesive tape topical tape 1 x 12 "-yard, 1 x 6 "-yard, 1/2 x 10 "-yard, 1/2 x 12 "-yard	$0 (OTC)	
arch bandage topical bandage	$0 (OTC)	
band-aid hurt-free topical bandage 2 x 2.3 "-yard	$0 (OTC)	
band-aid paper tape topical tape 1 x 10 "-yard	$0 (OTC)	
band-aid secure-flex topical bandage 2 x 2.5 "-yard, 3 x 2.5 "-yard	$0 (OTC)	
BAQSIMI NASAL SPRAY,NON-AEROSOL 3 MG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	
betaine oral powder 1 gram/scoop	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cloth first aid tape topical tape 1 x 10 "-yard	$0 (OTC)	
curity bandage topical bandage 2 x 4.1 "-yard	$0 (OTC)	
diazoxide oral suspension 50 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
elastic bandage topical bandage 2 ", 3 ", 3 x 5 "-yard	$0 (OTC)	
first aid tape topical bandage 1 x 2.3 "-yard, 2 x 2.3 "-yard	$0 (OTC)	
Glucagon Emergency Kit (human) injection recon soln 1 mg	$0/$4.90/$12.65 (Tier 1-Brand)	
glutamine (sickle cell) oral powder in packet 5 gram	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (180 per 30 days)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 0.5 MG/0.1 ML, 1 MG/0.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	$0/$4.90/$12.65 (Tier 1-Brand)	
hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
hypafix topical tape 2 x 72 "	$0 (OTC)	
kendall paper tape topical tape 1/2 x 10 "-yard	$0 (OTC)	
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
lutein oral capsule 20 mg, 40 mg, 6 mg	$0 (OTC)	
lutein-zeaxanthin extract oral capsule 15-0.7 mg	$0 (OTC)	
lutein-zeaxanthin oral capsule 20-4 mg, 25-5 mg, 40-1,600 mg-mcg	$0 (OTC)	
lutein-zeaxanthin oral tablet,chewable 10-2 mg	$0 (OTC)	
medfix ez dressing topical tape 2 x 11 "-yard, 2 x 72 ", 4 x 2 "-yard, 6 x 2 "-yard	$0 (OTC)	
medfix topical tape 2 x 11 "-yard	$0 (OTC)	
medigrip topical bandage	$0 (OTC)	
mefix topical tape 2 x 11 "-yard	$0 (OTC)	
mesna oral tablet 400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	NM; NDS
nexcare gentle paper tape topical tape 1 x 10 "-yard	$0 (OTC)	
nitroglycerin rectal ointment 0.4 % (w/w)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
pain free tape topical tape 3 x 2.3 "-yard	$0 (OTC)	
paper tape and dispenser 1 x 10 "-yard	$0 (OTC)	
pyridostigmine bromide oral tablet 60 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
self adherent wrap topical bandage 2 x 2.2 "-yard	$0 (OTC)	
self-adherent gentle wrap topical bandage 3 x 2.2 "-yard	$0 (OTC)	
self-adhering bandage topical bandage 3 "	$0 (OTC)	
selfgrip topical bandage 2 x 1.9 "-yard, 3 x 1.9 "-yard	$0 (OTC)	
stretch gauze bandage topical bandage 2 x 4.1 "-yard	$0 (OTC)	
surepress high compression topical bandage 4 x 3.2 "-yard	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
tender tape topical bandage 1 x 6 "-yard, 2 x 6 "-yard	$0 (OTC)	
tensor topical bandage 2 x 5 "-yard, 3 x 5 "-yard, 4 x 4.5 "-yard, 6 x 5 "-yard	$0 (OTC)	
THALOMID ORAL CAPSULE 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (120 per 30 days)
THALOMID ORAL CAPSULE 150 MG, 200 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (56 per 28 days)
THALOMID ORAL CAPSULE 50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA NSO; NM; NDS; QL (224 per 28 days)
TYBOST ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
VEOZAH ORAL TABLET 45 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; QL (30 per 30 days)
VOWST ORAL CAPSULE 1 X 10EXP6 TO 3 X 10EXP7 CELL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (12 per 30 days)
Mouthwashes And Gargles		
Mouthwashes And Gargles		
hydrogen peroxide solution 3 %	$0 (OTC)	
hydrogen peroxide topical spray,non-aerosol 3 %	$0 (OTC)	
Ophthalmic Agents		
Antiglaucoma Agents		
acetazolamide oral capsule, extended release 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
acetazolamide oral tablet 125 mg, 250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
acetazolamide sodium injection recon soln 500 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
betaxolol ophthalmic (eye) drops 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %, 0.2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
brinzolamide ophthalmic (eye) drops,suspension 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
carteolol ophthalmic (eye) drops 1 %	$0/$1.60/$5.10 (Tier 1-Generic)	
dorzolamide ophthalmic (eye) drops 2 %	$0/$1.60/$5.10 (Tier 1-Generic)	
dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
latanoprost ophthalmic (eye) drops 0.005 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2.5 per 25 days)
levobunolol ophthalmic (eye) drops 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (2.5 per 25 days)
methazolamide oral tablet 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	$0/$1.60/$5.10 (Tier 1-Generic)	
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (2.5 per 25 days)
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (2.5 per 25 days)
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.2 %	$0/$4.90/$12.65 (Tier 1-Brand)	
timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
timolol ophthalmic (eye) drops 0.5 %	$0/$1.60/$5.10 (Tier 1-Generic)	
travoprost ophthalmic (eye) drops 0.004 %	$0/$1.60/$5.10 (Tier 1-Generic)	QL (2.5 per 25 days)
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	$0/$4.90/$12.65 (Tier 1-Brand)	QL (5 per 30 days)
Replacement Preparations		
Replacement Preparations		
ca-d3-mag ox-zinc-cop-mang-bor oral tablet 600 mg calcium- 20 mcg-50 mg	$0 (OTC)	

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

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ca-d3-mag ox-zinc-cop-mang-bor oral tablet,chewable 600 mg calcium- 800 unit-40 mg, 600 mg-400 unit -40 mg-7.5 mg	$0 (OTC)	
cal-citrate oral tablet 250 mg-2.5 mcg (100 unit)	$0 (OTC)	
calcium 500 + d oral tablet,chewable 500 mg-10 mcg (400 unit)	$0 (OTC)	
calcium 600 + d(3) oral capsule 600 mg-5 mcg (200 unit)	$0 (OTC)	
calcium 600 + minerals oral tablet 600 mg calcium- 200 unit	$0 (OTC)	
calcium 600 with vitamin d3 oral capsule 600 mg-12.5 mcg (500 unit)	$0 (OTC)	
calcium 600-d3 plus (mag-zinc) oral tablet 600 mg calcium- 20 mcg-50 mg	$0 (OTC)	
calcium carbonate oral tablet 260 mg calcium (648 mg), 500 mg calcium (1,250 mg), 600 mg calcium (1,500 mg)	$0 (OTC)	
calcium carbonate-vit d3-min oral tablet 600 mg-10 mcg (400 unit)	$0 (OTC)	
calcium carbonate-vitamin d3 oral capsule 600 mg-10 mcg (400 unit), 600 mg-5 mcg (200 unit)	$0 (OTC)	
calcium carbonate-vitamin d3 oral tablet 1,000 mg-20 mcg (800 unit), 250 mg-3 mcg (120 unit), 250 mg-3.125 mcg (125 unit), 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit), 600 mg-10 mcg (400 unit), 600 mg-20 mcg (800 unit), 600 mg-5 mcg (200 unit)	$0 (OTC)	
calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-10 mcg (400 unit)	$0 (OTC)	
calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)	$0 (OTC)	
calcium citrate oral granules 760 mg calcium /3.5 gram	$0 (OTC)	
calcium citrate oral tablet 200 mg (950 mg)	$0 (OTC)	
calcium citrate-vitamin d3 oral liquid 1,000 mg-10 mcg /30 ml	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
calcium citrate-vitamin d3 oral tablet 200 mg-6.25 mcg (250 unit), 250 mg-5 mcg (200 unit), 315 mg-5 mcg (200 unit), 315 mg-6.25 mcg (250 unit)	$0 (OTC)	
calcium citrate-vitamin d3 oral tablet,chewable 500 mg-12.5 mcg (500 unit)	$0 (OTC)	
caltrate 600 plus d oral tablet,chewable 600 mg-20 mcg (800 unit)	$0 (OTC)	
caltrate 600-d plus minerals oral tablet,chewable 600 mg calcium- 800 unit-40 mg	$0 (OTC)	
caltrate-d3 plus minerals oral tablet,chewable 600 mg-20 mcg- 40 mg-0.25 mg	$0 (OTC)	
ceralyte 50 oral powder in packet 240-300-32 mg-mg-kcal/10 g	$0 (OTC)	
cerasport endurance oral powder in packet 400 mg-160 mg/42 gram	$0 (OTC)	
citracal + d maximum oral tablet 315 mg-6.25 mcg (250 unit)	$0 (OTC)	
d5 % (d-glucose)-0.9 % sodchlr intravenous parenteral solution	$0/$1.60/$5.10 (Tier 1-Generic)	
d5 % and 0.9 % sodium chloride intravenous parenteral solution	$0/$1.60/$5.10 (Tier 1-Generic)	
d5 %-0.45 % sodium chloride intravenous parenteral solution	$0/$1.60/$5.10 (Tier 1-Generic)	
dulcolax (magnesium citrate) oral tablet,chewable 100 mg	$0 (OTC)	
electrolytes-dextrose oral solution	$0 (OTC)	
hi-cal plus vit d oral tablet 500 mg-5 mcg (200 unit)	$0 (OTC)	
hydralyte oral solution	$0 (OTC)	
klor-con m10 oral tablet,er particles/crystals 10 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
klor-con m15 oral tablet,er particles/crystals 15 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
klor-con m20 oral tablet,er particles/crystals 20 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
liquid calcium with vitamin d oral capsule 600 mg-5 mcg (200 unit)	$0 (OTC)	

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
mag 64 oral tablet,delayed release (dr/ec) 64 mg	$0 (OTC)	
mag-delay oral tablet,delayed release (dr/ec) 64 mg	$0 (OTC)	
magnesium (oxide/aa chelate) oral capsule 300 mg	$0 (OTC)	
magnesium chloride oral tablet 64 mg magnesium	$0 (OTC)	
magnesium chloride oral tablet,delayed release (dr/ec) 64 mg, 70 mg	$0 (OTC)	
magnesium citrate,mag oxide oral capsule 250 mg	$0 (OTC)	
magnesium l-lactate oral tablet extended release 84 mg	$0 (OTC)	
magnesium oral tablet 200 mg, 250 mg	$0 (OTC)	
magnesium sulfate injection solution 500 mg/mL (50 %)	$0/$4.90/$12.65 (Tier 1-Brand)	
magnesium sulfate injection syringe 500 mg/ml (50 %)	$0/$1.60/$5.10 (Tier 1-Generic)	
natural calcium oral tablet 500 mg calcium (1,250 mg)	$0 (OTC)	
onevite calcium oral tablet 600 mg calcium (1,500 mg)	$0 (OTC)	
onevite calcium-d3 oral tablet 500 mg-2.5 mcg (100 unit), 500 mg-5 mcg (200 unit), 600 mg-5 mcg (200 unit)	$0 (OTC)	
oralyte oral solution	$0 (OTC)	
oysco 500/d oral tablet 500 mg-5 mcg (200 unit)	$0 (OTC)	
oyster shell calcium 500 oral tablet 500 mg calcium (1,250 mg)	$0 (OTC)	
oyster shell calcium-vit d3 oral tablet 500 mg-10 mcg (400 unit), 500 mg-5 mcg (200 unit)	$0 (OTC)	
pediatric electrolyte oral powder in packet 10.6-4.7 meq/8.5 gram	$0 (OTC)	
pediatric electrolyte oral solution	$0 (OTC)	
pediatric freezer pops oral solution	$0 (OTC)	
potassium chloride intravenous solution 2 meq/ml	$0/$1.60/$5.10 (Tier 1-Generic)	
potassium chloride oral capsule, extended release 10 meq, 8 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
potassium chloride oral tablet extended release 10 meq, 15 meq, 20 meq, 8 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
potassium chloride oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq	$0/$1.60/$5.10 (Tier 1-Generic)	
potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)	$0/$1.60/$5.10 (Tier 1-Generic)	
slow-mag oral tablet,delayed release (dr/ec) 71.5 mg	$0 (OTC)	
sodium chloride 0.45 % intravenous parenteral solution 0.45 %	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium chloride 0.9 % intravenous parenteral solution	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium chloride 0.9% solution mini-bag, single use	$0/$1.60/$5.10 (Tier 1-Generic)	
sodium chloride tablet,soluble 1,000 mg	$0 (OTC)	
super calcium oral tablet 600 mg calcium (1,500 mg)	$0 (OTC)	
thermotabs oral tablet 287-180-15 mg	$0 (OTC)	
zinc gluconate oral lozenge 10 mg	$0 (OTC)	
zinc gluconate oral tablet 100 mg, 30 mg, 50 mg	$0 (OTC)	
zinc sulfate oral capsule 50 mg zinc (220 mg)	$0 (OTC)	
Respiratory Tract Agents		
Anti-Inflammatories, Inhaled Corticosteroids		
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (12 per 30 days)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE, 50-25 MCG/DOSE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
breyna inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30.9 per 30 days)
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; QL (120 per 30 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30.6 per 30 days)
fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (12 per 30 days)
fluticasone propionate inhalation hfa aerosol inhaler 220 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (24 per 30 days)
fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (21.2 per 30 days)
fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
wixela inhub inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	$0/$1.60/$5.10 (Tier 1-Generic)	QL (60 per 30 days)
Antileukotrienes		
montelukast oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
montelukast oral tablet,chewable 4 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
zafirlukast oral tablet 10 mg, 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Bronchodilators		
AIRSUPRA INHALATION HFA AEROSOL INHALER 90-80 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (32.1 per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (17 per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation (nda020503)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (13.4 per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation (nda020983)	$0/$1.60/$5.10 (Tier 1-Generic)	QL (36 per 30 days)
albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
BREZTRI AEROSPHERE 160-18-4.8 MCG 160-18-4.8 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (23.6 per 28 days)

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
BREZTRI AEROSPHERE 160-9-4.8 MCG 160-9-4.8 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (23.6 per 28 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-18-4.8 MCG/ACTUATION, 160-9-4.8 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (10.7 per 30 days)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (8 per 30 days)
ipratropium bromide inhalation hfa aerosol inhaler 17 mcg/actuation	$0/$1.60/$5.10 (Tier 1-Generic)	QL (25.8 per 28 days)
ipratropium bromide inhalation solution 0.02 %	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD; QL (540 per 30 days)
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 30 days)
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 30 days)
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	$0/$4.90/$12.65 (Tier 1-Brand)	QL (4 per 28 days)
theophylline oral solution 80 mg/15 ml	$0/$1.60/$5.10 (Tier 1-Generic)	
theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
theophylline oral tablet extended release 24 hr 400 mg, 600 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tiotropium bromide inhalation capsule, w/inhalation device 18 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (60 per 30 days)
Respiratory Tract Agents, Other		
acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
ALYFTREK ORAL TABLET 10-50-125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ALYFTREK ORAL TABLET 4-20-50 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (90 per 30 days)
BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE 40 MG	$0/$4.90/$12.65 (Tier 1-Brand)	NM; NDS; QL (560 per 28 days)
cromolyn inhalation solution for nebulization 20 mg/2 ml	$0/$1.60/$5.10 (Tier 1-Generic)	PA BvD
cromolyn nasal spray,non-aerosol 5.2 mg/spray (4 %)	$0 (OTC)	
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 30 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 28 days)
JASCAYD ORAL TABLET 18 MG, 9 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
KALYDECO ORAL TABLET 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
nintedanib oral capsule 100 mg, 150 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (60 per 30 days)
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS; QL (3 per 28 days)
NUCALA SUBCUTANEOUS RECON SOLN 100 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS; QL (3 per 28 days)
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS; QL (3 per 28 days)
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS; QL (0.4 per 28 days)
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (112 per 28 days)
pirfenidone oral capsule 267 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (270 per 30 days)
pirfenidone oral tablet 267 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (270 per 30 days)
pirfenidone oral tablet 534 mg, 801 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (90 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+/-)/20 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA BvD; NM; NDS
roflumilast oral tablet 250 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (28 per 28 days)
roflumilast oral tablet 500 mcg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (56 per 28 days)
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (84 per 28 days)
WINREVAIR SUBCUTANEOUS KIT 120 MG (60 MG X 2), 45 MG, 60 MG, 90 MG (45 MG X 2)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (1 per 21 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML, 300 MG/2 ML, 75 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML, 75 MG/0.5 ML	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
baclofen oral tablet 10 mg, 20 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cyclobenzaprine oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
dantrolene oral capsule 100 mg, 25 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
methocarbamol oral tablet 500 mg, 750 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
tizanidine oral tablet 2 mg, 4 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
Sleep Disorder Agents		
Sleep Disorder Agents		
armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (30 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	QL (30 per 30 days)
dormin oral capsule 25 mg	$0 (OTC)	
doxepin oral tablet 3 mg, 6 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
eszopiclone oral tablet 1 mg, 2 mg, 3 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
modafinil oral tablet 100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (30 per 30 days)
modafinil oral tablet 200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (60 per 30 days)
pharbedryl oral capsule 50 mg	$0 (OTC)	
sodium oxybate oral solution 500 mg/mL	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; LA; NDS; QL (540 per 30 days)
unisom sleepgels oral capsule 50 mg	$0 (OTC)	
zaleplon oral capsule 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
zolpidem oral tablet 10 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	QL (30 per 30 days)
Vasodilating Agents		
Vasodilating Agents		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (90 per 30 days)
alyq oral tablet 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (60 per 30 days)
bosentan oral tablet 125 mg, 62.5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; LA; NDS; QL (60 per 30 days)
macitentan oral tablet 10 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; NM; NDS; QL (30 per 30 days)
sildenafil (pulm.hypertension) oral tablet 20 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (360 per 30 days)
tadalafil oral tablet 2.5 mg, 5 mg	$0/$1.60/$5.10 (Tier 1-Generic)	PA; QL (30 per 30 days)

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 400 MCG, 600 MCG, 800 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (60 per 30 days)
UPTRAVI ORAL TABLET 100 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (480 per 30 days)
UPTRAVI ORAL TABLET 150 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (300 per 30 days)
UPTRAVI ORAL TABLET 200 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS; QL (240 per 30 days)
UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60)	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE 106 MCG, 26.5 MCG, 53 MCG, 79.5 MCG	$0/$4.90/$12.65 (Tier 1-Brand)	PA; NM; NDS
Vitamins And Minerals		
Vitamins And Minerals		
50 plus adult eye health oral capsule 250-5-1 mg	$0 (OTC)	
a thru z advanced formula oral tablet 18-400 mg-mcg	$0 (OTC)	
a thru z high potency oral tablet	$0 (OTC)	
a thru z men's ultimate oral tablet 8 mg iron- 200 mcg-600 mcg	$0 (OTC)	
a thru z oral tablet 18-500-300-250 mg-mcg-mcg-mcg	$0 (OTC)	
a thru z select 50plus formula oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
a thru z select oral tablet , 300-60-600-300 mcg, 500-300-250 mcg	$0 (OTC)	
a thru z select women's oral tablet	$0 (OTC)	
a-25 (vit a palmitate) oral capsule 7,500 mcg (25,000 unit)	$0 (OTC)	
acerola c oral tablet,chewable 500 mg	$0 (OTC)	
adult 50 plus eye health oral capsule 250-5-1 mg	$0 (OTC)	
adults 50 plus oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
animal chews oral tablet,chewable	$0 (OTC)	
antioxidant a/c/e/selenium oral capsule	$0 (OTC)	

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

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Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
apatate forte oral liquid	$0 (OTC)	
ascorbic acid (vitamin c) intravenous solution 500 mg/ml	$0 (OTC)	
ascorbic acid (vitamin c) oral capsule 1,000 mg	$0 (OTC)	
ascorbic acid (vitamin c) oral capsule, extended release 500 mg	$0 (OTC)	
ascorbic acid (vitamin c) oral liquid 500 mg/5 ml	$0 (OTC)	
ascorbic acid (vitamin c) oral tablet 1,000 mg, 250 mg	$0 (OTC)	
ascorbic acid (vitamin c) oral tablet extended release 1,500 mg	$0 (OTC)	
ascorbic acid-ascorbate sodium oral tablet,chewable 500 mg, 94 mg	$0 (OTC)	
ascorbic acid-ascorbate sodium oral wafer 500 mg	$0 (OTC)	
b complex 1 (with folic acid) oral tablet 0.4 mg	$0 (OTC)	
b complex w-vit c oral tablet 18-10-45-5-250 mg	$0 (OTC)	
b complex-vitamin c-folic acid oral tablet 400 mcg	$0 (OTC)	
b-12 dots oral tablet 500 mcg	$0 (OTC)	
bacmin oral tablet 27 mg iron- 1 mg	$0 (OTC)	
balance b-50 (with folic acid) oral tablet 0.4 mg	$0 (OTC)	
balanced b-100 oral tablet 0.4 mg	$0 (OTC)	
balanced b-50 oral tablet	$0 (OTC)	
bal-care dha combo pack 27-1-430 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
bal-care dha essential pack 27 mg iron-1 mg -374 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
b-complex oral tablet	$0 (OTC)	
b-complex with vitamin c oral tablet , 400-500 mcg-mg	$0 (OTC)	
beta carotene oral capsule 7,500 mcg (25,000 unit)	$0 (OTC)	
biotect plus oral liquid	$0 (OTC)	
body, hair, skin and nails oral capsule 3-133 mg-mcg	$0 (OTC)	
c complex oral tablet extended release 1,000 mg	$0 (OTC)	
c-1000 oral tablet 1,000 mg	$0 (OTC)	
c-1000 oral tablet extended release 1,000 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
c-500 oral tablet extended release 500 mg	$0 (OTC)	
calcidol oral drops 200 mcg/ml (8,000 unit/ml)	$0 (OTC)	
central-vite women's mature oral tablet 8 mg iron-400 mcg-50 mcg	$0 (OTC)	
centravites 50 plus oral tablet , 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
centrum complete oral tablet 18-400 mg-mcg	$0 (OTC)	
centrum oral liquid 9 mg iron/15 ml	$0 (OTC)	
centrum oral tablet 18-400 mg-mcg	$0 (OTC)	
centrum silver oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
centrum women oral tablet 18-400 mg-mcg	$0 (OTC)	
century adult formula oral tablet 18 mg iron-400 mcg-25 mcg	$0 (OTC)	
century mature oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
century oral tablet 18-400 mg-mcg	$0 (OTC)	
cenvite oral liquid 9 mg iron/15 ml	$0 (OTC)	
cerovite jr oral tablet,chewable 18 mg iron- 10 mcg	$0 (OTC)	
cerovite senior oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
certa plus oral tablet 18-0.4-250 mg-mg-mcg	$0 (OTC)	
certavite senior oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
certavite-antioxidant oral tablet 18-400 mg-mcg	$0 (OTC)	
children's chew multivitamin oral tablet,chewable	$0 (OTC)	
children's multivitamin oral tablet,chewable	$0 (OTC)	
cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit), 125 mcg (5,000 unit), 25 mcg (1,000 unit), 250 mcg (10,000 unit)	$0 (OTC)	
cholecalciferol (vitamin d3) oral liquid 10 mcg/5 ml (400 unit/5 ml)	$0 (OTC)	
cholecalciferol (vitamin d3) oral tablet 1,250 mcg (50,000 unit), 125 mcg (5,000 unit), 25 mcg (1,000 unit), 50 mcg (2,000 unit)	$0 (OTC)	
cholecalciferol (vitamin d3) oral tablet,chewable 10 mcg (400 unit), 25 mcg (1,000 unit)	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
c-nate dha softgel 28 mg iron-1 mg -200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
complete multivitamin-mineral oral liquid 9 mg iron/15 ml	$0 (OTC)	
complete multivitamin-mineral oral tablet 18-400 mg-mcg	$0 (OTC)	
complete mv adult 50 plus oral tablet 0.4 mg-300 mcg-250 mcg	$0 (OTC)	
completenate tablet chew 29 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
cyanocobalamin (vitamin b-12) oral tablet 1,000 mcg, 100 mcg, 500 mcg	$0 (OTC)	
cyanocobalamin (vitamin b-12) oral tablet extended release 2,000 mcg	$0 (OTC)	
cyanocobalamin (vitamin b-12) oral tablet,chewable 1,000 mcg, 1,500 mcg, 2,500 mcg, 500 mcg	$0 (OTC)	
cyanocobalamin (vitamin b-12) sublingual lozenge 2,500 mcg	$0 (OTC)	
cyanocobalamin (vitamin b-12) sublingual tablet 1,000 mcg	$0 (OTC)	
d3 dots oral tablet 50 mcg (2,000 unit)	$0 (OTC)	
daily multiple for women oral tablet 18 mg iron-400 mcg-500 mg ca	$0 (OTC)	
daily multi-vitamin oral tablet	$0 (OTC)	
daily multivitamin-minerals oral tablet , 18-400 mg-mcg	$0 (OTC)	
daily value oral tablet	$0 (OTC)	
daily vitamin formula oral tablet	$0 (OTC)	
daily vitamin formula-iron oral tablet 18-400 mg-mcg	$0 (OTC)	
daily vitamin formula-minerals oral tablet	$0 (OTC)	
daily vitamin with iron oral tablet	$0 (OTC)	
daily vites/iron oral tablet	$0 (OTC)	
daily-vite (with folic acid) oral tablet 400 mcg	$0 (OTC)	
daily-vite oral tablet	$0 (OTC)	
decara oral capsule 1,250 mcg (50,000 unit)	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
decara oral capsule 625 mcg (25,000 unit)	$0 (OTC)	
decubi vite oral capsule 400-50-500 mcg-mg-mg	$0 (OTC)	
dekas essential oral capsule 600 mcg-50 mcg- 101 mg-1,000mcg	$0 (OTC)	
delta d3 oral tablet 10 mcg (400 unit)	$0 (OTC)	
diabetes health formula oral tablet 500-250 mcg	$0 (OTC)	
diabetic support formula oral tablet 167-100-83 mcg	$0 (OTC)	
dialyvite 3000 oral tablet 3-70-15 mg-mcg-mg	$0 (OTC)	
dialyvite 5000 oral tablet 5 mg	$0 (OTC)	
dialyvite 800 with iron oral tablet 29-800 mg-mcg	$0 (OTC)	
dialyvite oral tablet 1-100-300-50 mg-mg-mcg-mg, 100-1 mg	$0 (OTC)	
dialyvite supreme d oral tablet 3-2,000 mg-unit	$0 (OTC)	
e-400 c-500 and beta carotene oral tablet	$0 (OTC)	
endur-c with rose hips oral tablet extended release 1,000 mg, 500 mg	$0 (OTC)	
ergocalciferol (vitamin d2) oral drops 200 mcg/ml (8,000 unit/ml)	$0 (OTC)	
ergocalciferol (vitamin d2) oral tablet 10 mcg (400 unit)	$0 (OTC)	
essentia oral tablet 18-400 mg-mcg	$0 (OTC)	
eye health areds-2 oral capsule 250-90-40-1 mg	$0 (OTC)	
eye health plus lutein oral tablet 300 mcg-200 mg-27 mg-2 mg	$0 (OTC)	
eye multivitamin oral tablet 2,148 mcg-113 mg-45 mg-17.4mg	$0 (OTC)	
ezfe 200 oral capsule 200 mg iron	$0 (OTC)	
fa-8 oral capsule 0.8 mg	$0 (OTC)	
feosol oral tablet 325 mg (65 mg iron)	$0 (OTC)	
ferate oral tablet 240 mg (27 mg iron)	$0 (OTC)	
ferosul oral tablet 325 mg (65 mg iron)	$0 (OTC)	
ferrex 150 forte oral capsule 150-25-1 mg-mcg-mg	$0 (OTC)	
ferrex 150 oral capsule 150 mg iron	$0 (OTC)	
ferrous gluconate oral capsule 18 mg iron	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
ferrous gluconate oral tablet 236 mg (27 mg iron), 240 mg (27 mg iron), 324 mg (38 mg iron)	$0 (OTC)	
ferrous sulfate oral drops 15 mg iron (75 mg)/ml	$0 (OTC)	
ferrous sulfate oral elixir 220 mg (44 mg iron)/5 ml	$0 (OTC)	
ferrous sulfate oral liquid 300 mg (60 mg iron)/5 ml	$0 (OTC)	
ferrous sulfate oral tablet,delayed release (dr/ec) 324 mg (65 mg iron), 325 mg (65 mg iron)	$0 (OTC)	
flintstones multivitamin oral tablet,chewable	$0 (OTC)	
flintstones/extra c oral tablet,chewable	$0 (OTC)	
folbee plus oral tablet 5 mg	$0 (OTC)	
folic acid injection solution 5 mg/ml	$0 (OTC)	
folic acid oral capsule 480 mcg, 5 mg	$0 (OTC)	
folic acid oral tablet 400 mcg, 800 mcg	$0 (OTC)	
folivane-ob capsule 85-1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
fruit c oral tablet,chewable 100 mg	$0 (OTC)	
fruit c-100 oral tablet,chewable 100 mg	$0 (OTC)	
fruit c-200 oral tablet,chewable 200 mg	$0 (OTC)	
fruit c-500 oral tablet,chewable 500 mg	$0 (OTC)	
full spectrum b-vitamin c oral tablet 0.8 mg	$0 (OTC)	
generic prenatal vitamin oral capsule 27-1.25-55-300 mg, 28-1-50-250 mg, 29-1.25-55-325 mg, 30 mg iron-1 mg -50 mg-260 mg, 30 mg iron-1.2 mg-55 mg-265 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
generic prenatal vitamin oral combo pack,tablet and cap,dr 29 mg iron-1 mg -50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
generic prenatal vitamin oral tablet 27 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
generic prenatal vitamin oral tablet 90-1-50 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
generic prenatal vitamin oral tablet extended release 90 mg iron-1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
geri-vite liquid oral liquid 9 mg iron/15 ml	$0 (OTC)	
gummi bear multivitamin oral tablet,chewable	$0 (OTC)	
hair vitamins oral tablet	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
hair, skin and nails advanced oral tablet 3.3 mg iron-25 mcg	$0 (OTC)	
hair,skin and nails oral tablet , 1 mg iron-66.7 mcg-1,000 mcg	$0 (OTC)	
hair,skin and nails(fa-biotin) oral tablet 100-1,500 mcg, 66.7-1,666.7 mcg	$0 (OTC)	
hair-skin-nails(fa-herb cmplx) oral tablet 5 mg-200 mcg- 1,000 mcg-450mg	$0 (OTC)	
halls defense oral lozenge 60 mg	$0 (OTC)	
healthy eyes lutein-zeaxanthin oral capsule 60 mg-13.5 mg- 15 mg-2 mg-6 mg	$0 (OTC)	
healthy eyes oral tablet 300 mcg-200 mg-27 mg-2 mg	$0 (OTC)	
healthy eyes supervision oral capsule 4,296 mcg-226 mg-90 mg	$0 (OTC)	
healthy eyes supervision2 oral capsule 250-90-10-1 mg	$0 (OTC)	
high potency iron oral tablet 134 mg (27 mg iron), 27 mg iron	$0 (OTC)	
high potency multivit (w-iron) oral tablet 18-400 mg-mcg	$0 (OTC)	
high potency multivitamin oral tablet 400 mcg	$0 (OTC)	
honey bears multivitamin oral tablet,chewable	$0 (OTC)	
honey bears with iron-zinc oral tablet,chewable 4.5 mg	$0 (OTC)	
iferex 150 forte oral capsule 150-25-1 mg-mcg-mg	$0 (OTC)	
iferex 150 oral capsule 150 mg iron	$0 (OTC)	
iron chews oral tablet,chewable 15 mg	$0 (OTC)	
i-vite oral tablet 300 mcg-200 mg- 27 mg	$0 (OTC)	
kobee oral tablet 0.4 mg	$0 (OTC)	
kosher prenatal plus iron tab 30 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
k-pax immune support oral tablet 2.25 mg iron- 100 mcg	$0 (OTC)	
liquid c oral liquid 500 mg/5 ml	$0 (OTC)	
liquid multivitamin oral liquid 9 mg iron/ 15 ml (15 ml)	$0 (OTC)	
little animals oral tablet,chewable	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
little animals-iron oral tablet,chewable	$0 (OTC)	
lumivance oral capsule 3-133 mg-mcg	$0 (OTC)	
lutein plus with zeaxanthin oral tablet 1,500 mcg-60 mg -20 mg-15 mg	$0 (OTC)	
lysiplex plus oral liquid	$0 (OTC)	
marnatal-f capsule 60 mg iron-1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mega multi for women oral tablet 13.5-200-250 mg-mcg-mcg	$0 (OTC)	
mega multiple/chelated mineral oral tablet	$0 (OTC)	
mega multivitamin for men oral tablet 200-175-250 mcg	$0 (OTC)	
men 50 plus advanced one daily oral tablet 400-20-370 mcg	$0 (OTC)	
men 50 plus multivitamin oral tablet 300-60-600-300 mcg	$0 (OTC)	
men under 50 multivitamin oral tablet 8 mg iron- 200 mcg-600 mcg	$0 (OTC)	
men's 50 plus daily formula oral tablet 400-20-370 mcg	$0 (OTC)	
men's 50 plus multivitamin oral tablet 400-20-370 mcg	$0 (OTC)	
men's daily formula oral tablet 400-20-300 mcg	$0 (OTC)	
men's daily oral capsule 0.4-600 mg-mcg	$0 (OTC)	
men's multivitamin oral tablet 200-60-600 mcg	$0 (OTC)	
men's one daily oral tablet 400-20-300 mcg	$0 (OTC)	
milltrium senior oral tablet	$0 (OTC)	
m-natal plus tablet 27 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
multi complete with iron oral tablet 18-400 mg-mcg	$0 (OTC)	
multi for her oral tablet 18 mg iron-600 mcg-80 mcg	$0 (OTC)	
multi vitamin oral liquid 9 mg iron/15 ml	$0 (OTC)	
multiple vitamin-minerals oral tablet	$0 (OTC)	
multiple vitamins oral tablet	$0 (OTC)	
multivit with min-folic acid oral tablet 0.4 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
multivit,calc,min-fa-k1-lycop oral tablet 240 mcg-30 mcg- 300 mcg	$0 (OTC)	
multivitamin 50 plus oral tablet	$0 (OTC)	
multi-vitamin hp/minerals oral capsule	$0 (OTC)	
multivitamin oral tablet	$0 (OTC)	
multivitamin with iron oral tablet	$0 (OTC)	
multivitamin with minerals oral liquid 9 mg iron/15 ml	$0 (OTC)	
multivitamin women 50 plus oral tablet 8 mg iron-400 mcg-50 mcg	$0 (OTC)	
multi-vite oral liquid 9 mg iron/15 ml	$0 (OTC)	
multivit-min-ferrous gluconate oral liquid 9 mg iron/ 15 ml (15 ml), 9 mg iron/15 ml	$0 (OTC)	
multivit-min-iron fum-folic ac oral tablet 7.5 mg iron-400 mcg	$0 (OTC)	
myferon 150 forte oral capsule 150-25-1 mg-mcg-mg	$0 (OTC)	
myferon 150 oral capsule 150 mg iron	$0 (OTC)	
mynatal capsule 65 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mynatal plus captab 65 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mynatal-z captab 65 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
mynephrocaps oral capsule 1 mg	$0 (OTC)	
mynephron oral capsule 1 mg	$0 (OTC)	
my-vitalife oral capsule	$0 (OTC)	
nephplex rx oral tablet 1-60-300-12.5 mg-mg-mcg-mg	$0 (OTC)	
nephro vitamins oral tablet 0.8 mg	$0 (OTC)	
nephronex oral liquid 900 mcg/5 ml	$0 (OTC)	
nephro-vite oral tablet 0.8 mg	$0 (OTC)	
newgen tablet 32-1,000 mg-mcg	$0/$1.60/$5.10 (Tier 1-Generic)	
novaferrum all good oral capsule 50 mg iron	$0 (OTC)	
nu-iron oral capsule 150 mg iron	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
obstetrix dha combo pack 29 mg iron- 1,700 mcg dfe	$0/$1.60/$5.10 (Tier 1-Generic)	
ocutabs oral tablet	$0 (OTC)	
ocuvite lutein and zeaxanthin oral capsule 60 mg-13.5 mg- 15 mg-2 mg-6 mg	$0 (OTC)	
onccor oral tablet 200-10-10 mcg	$0 (OTC)	
oncovite oral tablet	$0 (OTC)	
one daily energy oral tablet , 9 mg iron-400 mcg-200 mg	$0 (OTC)	
one daily essential oral tablet , 0.4 mg, 400 mcg	$0 (OTC)	
one daily for men 50 plus adv oral tablet 400-600-120 mcg-mcg-mg	$0 (OTC)	
one daily for men oral tablet 0.4-600 mg-mcg	$0 (OTC)	
one daily for women oral tablet 18-0.4 mg	$0 (OTC)	
one daily healthy weight oral tablet 200-18-0.4 mg	$0 (OTC)	
one daily maximum oral tablet 18-0.4 mg	$0 (OTC)	
one daily men's 50 plus memory oral tablet 400-600-120 mcg-mcg-mg	$0 (OTC)	
one daily men's 50 plus w-d3 oral tablet 400-20-370 mcg	$0 (OTC)	
one daily men's health oral tablet 240 mcg-30 mcg- 300 mcg	$0 (OTC)	
one daily multi-vit w-mineral oral tablet 4.5 mg iron	$0 (OTC)	
one daily multivitamin oral tablet , 400 mcg	$0 (OTC)	
one daily multivit-iron(folic) oral tablet 18-400 mg-mcg	$0 (OTC)	
one daily oral tablet 0.4-600 mg-mcg	$0 (OTC)	
one daily plus iron oral tablet 18-400 mg-mcg	$0 (OTC)	
one daily plus minerals oral tablet	$0 (OTC)	
one daily women 50 plus oral tablet 400-120 mcg-mg	$0 (OTC)	
one daily women 50 plus(vit k) oral tablet 400 mcg-500 mg calcium-20 mcg	$0 (OTC)	
one daily womens 50 plus oral tablet 0.4 mg	$0 (OTC)	
one daily women's health oral tablet 18 mg iron-400 mcg-450 mg ca	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
one daily women's metabolism oral tablet 300-18-400-50 mg-mg-mcg-mg	$0 (OTC)	
one daily women's oral tablet 18 mg iron-400 mcg-450 mg ca	$0 (OTC)	
one-a-day cholesterol plus oral tablet 0.4 mg	$0 (OTC)	
one-a-day essential oral tablet	$0 (OTC)	
one-a-day maximum formula oral tablet	$0 (OTC)	
one-a-day men's multivitamin oral tablet 400-20-300 mcg	$0 (OTC)	
one-a-day teen advantage oral tablet 18-400 mg-mcg, 9 mg iron-400 mcg	$0 (OTC)	
one-a-day womens formula oral tablet 18 mg iron-400 mcg-500 mg ca	$0 (OTC)	
one-daily multi oral capsule 800 mcg-1 mg- 500 mcg-500 mcg	$0 (OTC)	
onevite daily multivitamin oral tablet 400 mcg	$0 (OTC)	
onevite ferrous sulfate oral tablet 325 mg (65 mg iron)	$0 (OTC)	
optimal d3 m oral capsule 350 mcg (14,000 unit)	$0 (OTC)	
pedia tri-vite oral drops 250 mcg-50 mg- 10 mcg/ml	$0 (OTC)	
pediatric tri-vite oral drops 750 unit-35 mg -400 unit/ml	$0 (OTC)	
phytonadione (vitamin k1) oral tablet 100 mcg	$0 (OTC)	
pnv prenatal plus multivit tab gluten-free (rx) 27 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pnv-omega softgel 28-1-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
poly-iron 150 forte oral capsule 150-25-1 mg-mcg-mg	$0 (OTC)	
polysaccharide iron complex oral capsule 150 mg iron	$0 (OTC)	
pr natal 400 combo pack 29-1-400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pr natal 400 ec combo pack 29-1-400 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pr natal 430 combo pack 29 mg iron-1 mg -430 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
pr natal 430 ec combo pack 29-1-430 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
prenatabs fa tablet 29-1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prenatal 19 (with docusate) oral tablet 29 mg iron- 1 mg-25 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prenatal 19 chewable tablet 29 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prenatal plus iron tablet (rx) 29 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
prenatal-u capsule 106.5-1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
preservision areds-2 oral capsule 250-90-40-1 mg	$0 (OTC)	
preservision lutein oral capsule 226-90-0.8-5 mg	$0 (OTC)	
prevent oral capsule	$0 (OTC)	
prosight oral tablet 1,500 mcg-60 mg -13.5 mg	$0 (OTC)	
purevita vitamin c oral drops 100 mg/ml	$0 (OTC)	
purevita vitamin c oral tablet,chewable 125 mg	$0 (OTC)	
pyridoxine (vitamin b6) oral tablet 10 mg, 100 mg, 250 mg, 50 mg	$0 (OTC)	
pyridoxine (vitamin b6) oral tablet extended release 200 mg	$0 (OTC)	
quintabs-m iron free oral tablet 0.4 mg	$0 (OTC)	
renal caps oral capsule 1 mg	$0 (OTC)	
renal vitamin oral tablet 0.8 mg	$0 (OTC)	
renal-vite oral tablet 0.8 mg	$0 (OTC)	
rena-vite oral tablet 0.8 mg	$0 (OTC)	
rena-vite rx oral tablet 1-60-300 mg-mg-mcg	$0 (OTC)	
reno caps oral capsule 1 mg	$0 (OTC)	
riboflavin (vitamin b2) oral capsule 100 mg	$0 (OTC)	
riboflavin (vitamin b2) oral tablet 50 mg	$0 (OTC)	
r-natal ob softgel 20 mg iron- 1 mg-320 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
scooby-doo one a day oral tablet,chewable	$0 (OTC)	
select-ob chewable caplet 29 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
se-natal 19 chewable tablet 29 mg iron- 1 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
senior tabs oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
sentry oral tablet 18-400 mg-mcg	$0 (OTC)	
sentry senior oral tablet 0.4 mg-300 mcg- 250 mcg, 500-300-250 mcg	$0 (OTC)	
siderol oral tablet	$0 (OTC)	
slow release iron oral tablet extended release 140 mg (45 mg iron), 142 mg (45 mg iron), 144 mg (45 mg iron), 168 mg (50 mg iron), 250 mg (50 mg iron)	$0 (OTC)	
soothing pureway-c oral tablet 500 mg	$0 (OTC)	
spectravite adult 50 plus oral tablet 0.4 mg-300 mcg-250 mcg	$0 (OTC)	
spectravite adult oral tablet 18-400 mg-mcg	$0 (OTC)	
spectravite advanced formula oral tablet 18-400 mg-mcg	$0 (OTC)	
spectravite men 50 plus oral tablet 300-60-600-300 mcg	$0 (OTC)	
spectravite men's oral tablet 8 mg iron- 200 mcg-600 mcg	$0 (OTC)	
spectravite women 50 plus oral tablet 8 mg iron-400 mcg-50 mcg	$0 (OTC)	
spectravite women oral tablet 18-400 mg-mcg	$0 (OTC)	
stress b with zinc oral tablet	$0 (OTC)	
stress formula oral tablet	$0 (OTC)	
stress formula with iron oral tablet 500 mg-400 mcg- 18 mg iron	$0 (OTC)	
stress formula with iron(sulf) oral tablet 500 mg-400 mcg- 27 mg iron	$0 (OTC)	
stress formula with zinc oral tablet	$0 (OTC)	
strovite forte oral tablet 10-1 mg	$0 (OTC)	
super multivitamin oral tablet	$0 (OTC)	
super quints b-50 oral tablet	$0 (OTC)	
super quints oral tablet 0.4 mg	$0 (OTC)	
super thera vite m oral tablet	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
support oral liquid	$0 (OTC)	
tab-a-vite multivitamin w-iron oral tablet 18-400 mg-mcg	$0 (OTC)	
tab-a-vite oral tablet 400 mcg	$0 (OTC)	
taron-c dha capsule 35-1-200 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
thera oral tablet 400 mcg	$0 (OTC)	
thera-d oral tablet 50 mcg (2,000 unit)	$0 (OTC)	
theragran-m premier 50 plus oral tablet 400-250-375 mcg	$0 (OTC)	
theralogix companion oral tablet 0.4 mg	$0 (OTC)	
thera-m (with vitamin k) oral tablet 9 mg iron- 400 mcg-28 mcg	$0 (OTC)	
thera-m oral tablet 19 mg iron- 400 mcg	$0 (OTC)	
thera-m oral tablet 27-0.4 mg	$0 (OTC)	
therapeutic liquid oral liquid	$0 (OTC)	
therapeutic-m oral tablet 19 mg iron- 400 mcg, 9 mg iron-400 mcg	$0 (OTC)	
thera-tabs oral tablet	$0 (OTC)	
theratrum complete 50 plus/lut oral tablet	$0 (OTC)	
theratrum complete 50 plus-lyc oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
theratrum complete with lutein oral tablet	$0 (OTC)	
thera-vite max-m oral tablet 9 mg iron-400 mcg	$0 (OTC)	
therems multivitamin oral tablet 400 mcg	$0 (OTC)	
thiamine hcl (vitamin b1) injection solution 100 mg/ml	$0 (OTC)	
thiamine hcl (vitamin b1) oral capsule 100 mg	$0 (OTC)	
thiamine hcl (vitamin b1) oral tablet 100 mg, 250 mg, 50 mg	$0 (OTC)	
thiamine mononitrate (vit b1) oral tablet 250 mg	$0 (OTC)	
triphrocaps oral capsule 1 mg	$0 (OTC)	
ultra b-100 complex (foodbase) oral tablet 400 mcg-100mcg- 100 mcg	$0 (OTC)	
ultra freeda oral tablet 6 mg iron-267 mcg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
v-c forte oral capsule 1 mg	$0 (OTC)	
vic-forte oral capsule 1 mg	$0 (OTC)	
vision formula (with lutein) oral tablet 300 mcg-200 mg-27 mg-2 mg	$0 (OTC)	
vision formula(a-c-e-zn-se-cu) oral tablet 1,000 unit-60 mg-30 unit	$0 (OTC)	
vision health oral capsule 250-90-40-2-5 mg	$0 (OTC)	
vision oral tablet	$0 (OTC)	
vision plus lutein oral tablet	$0 (OTC)	
vit a palmitate-vit c-vit d3 oral drops 250 mcg-50 mg-10 mcg/ml, 750 unit-35 mg -400 unit/ml	$0 (OTC)	
vita-c oral crystals	$0 (OTC)	
vitacel (with lutein) oral tablet 800-250-750 mcg	$0 (OTC)	
vitafol gummies 3.33 mg iron- 0.33 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vitafol-ob+dha combo pack 65-1-250 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
vitajoy daily c oral tablet,chewable 125 mg	$0 (OTC)	
vitalets oral tablet,chewable	$0 (OTC)	
vitamin a oral capsule 2,400 mcg, 3,000 mcg (10,000 unit)	$0 (OTC)	
vitamin a palmitate oral capsule 7,500 mcg (25,000 unit)	$0 (OTC)	
vitamin a palmitate oral tablet 3,000 mcg (10,000 unit), 4,500 mcg (15,000 unit)	$0 (OTC)	
vitamin b complex oral tablet,disintegrating	$0 (OTC)	
vitamin b complex-electrolytes oral tablet 0.4 mg	$0 (OTC)	
vitamin b complex-folic acid oral tablet 0.4 mg	$0 (OTC)	
vitamin b-1 oral tablet 250 mg	$0 (OTC)	
vitamin b-12 oral tablet 250 mcg, 50 mcg	$0 (OTC)	
vitamin b-12 oral tablet extended release 1,000 mcg	$0 (OTC)	
vitamin b-12 sublingual tablet 2,500 mcg	$0 (OTC)	
vitamin b-2 oral tablet 100 mg, 25 mg, 50 mg	$0 (OTC)	
vitamin b-6 oral tablet 25 mg, 250 mg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
vitamin c drops oral lozenge 60 mg	$0 (OTC)	
vitamin c oral liquid 500 mg/15 ml	$0 (OTC)	
vitamin c oral tablet 100 mg, 500 mg	$0 (OTC)	
vitamin c oral tablet extended release 500 mg	$0 (OTC)	
vitamin c oral tablet,chewable 250 mg, 500 mg	$0 (OTC)	
vitamin c with rose hips oral tablet extended release 1,000 mg, 500 mg	$0 (OTC)	
vitamin c with rose hips oral tablet,chewable 500 mg	$0 (OTC)	
vitamin d3 oral capsule 10 mcg (400 unit)	$0 (OTC)	
vitamin d3 oral capsule 50 mcg (2,000 unit)	$0 (OTC)	
vitamin d3 oral tablet 10 mcg (400 unit)	$0 (OTC)	
vitamin e (dl, acetate) oral capsule 180 mg (400 unit), 45 mg (100 unit), 450 mg (1,000 unit), 90 mg (200 unit)	$0 (OTC)	
vitamin e (dl, acetate) oral drops 22.5 mg (50 unit)/ml, 45 mg/0.25ml 100 unit/0.25ml	$0 (OTC)	
vitamin e acetate oral capsule 134 mg (200 unit)	$0 (OTC)	
vitamin e oral capsule 268 mg (400 unit)	$0 (OTC)	
vitamin e oral drops 100 unit/0.25 ml	$0 (OTC)	
vitamins b complex oral tablet	$0 (OTC)	
vitamins for hair oral capsule 400-400 mcg	$0 (OTC)	
vitatrum oral tablet 18-500-300-250 mg-mcg-mcg-mcg	$0 (OTC)	
vitrum 50 plus oral tablet 0.4 mg-300 mcg- 250 mcg	$0 (OTC)	
vitrum senior oral tablet , 500-300-250 mcg	$0 (OTC)	
wee care oral suspension 15 mg/1.25 ml	$0 (OTC)	
wescaps oral capsule 1 mg	$0 (OTC)	
women's 50 plus daily formula oral tablet 400 mcg-500 mg calcium-20 mcg	$0 (OTC)	
women's 50 plus multivitamin oral tablet 400 mcg-500 mg calcium-20 mcg	$0 (OTC)	
women's daily formula oral tablet 18 mg iron-400 mcg-500 mg, 18 mg iron-400 mcg-500 mg ca, 27-0.4 mg	$0 (OTC)	
women's daily multivitamin oral tablet 18-400 mg-mcg	$0 (OTC)	

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

Name of Drug	What the drug will cost you (Tier level)	Necessary actions, restrictions, or limits on use
women's daily pack oral tablet 400 mcg-800 mg -10 mcg	$0 (OTC)	
women's multivitamin oral tablet 18 mg-400 mcg- 500 mg-50 mcg	$0 (OTC)	
women's one daily oral tablet 18 mg iron-400 mcg-500 mg, 18 mg iron-400 mcg-500 mg ca	$0 (OTC)	
yelets oral tablet 18-400 mg-mcg	$0 (OTC)	
zatean-pn dha capsule 27 mg iron-1 mg -300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
zatean-pn plus softgel 28-1-300 mg	$0/$1.60/$5.10 (Tier 1-Generic)	
zingiber tablet 1.2 mg-40 mg- 124.1 mg-100 mg	$0/$1.60/$5.10 (Tier 1-Generic)	

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

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

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