



Vantage Health Plan

Formulary



Vantage Health Plan, Inc.

2019 Commercial and Marketplace Formulary

This document includes a list of the drugs (formulary) for Vantage's Commercial and Marketplace plans which is current as of August 1, 2020. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the back-cover page.

What is the Vantage Commercial and Marketplace Formulary?

A formulary is a list of covered drugs selected by our plan in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Our plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a plan network pharmacy, and other plan rules are followed. For more information on Vantage's coverage of your prescriptions, please review your Certificate of Coverage.

Vantage utilizes a Pharmacy and Therapeutics Committee (P & T Committee), made up of practicing physicians and pharmacists to help ensure that our formulary is medically sound and that it supports patient health. This committee reviews and evaluates medications on the formulary based on a regular basis and will make annual formulary updates to drug coverage for safety and efficacy to help maintain clinical integrity in all therapeutic categories.

Can the Formulary (drug list) change?

Generally, if you are taking a drug on our 2019 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2019 coverage year except when new adverse information about the safety or effectiveness of a drug is released. If the Food and Drug Administration (FDA) deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and our Pharmacy Benefit Manager (PBM) will provide notice to members who take the drug and their providers. In the event of a mid-year non-maintenance formulary change, the printed and web-based versions of the formulary will be updated as of the effective date of the formulary change. The updated versions of the printed formulary will be available upon request. To get updated information about the drugs covered by our plan, please contact us at (318) 361-0900 or (888) 823-1910

How do I use the Formulary?

There are several ways to find your drug within the formulary. The Alphabetical Index begins on page 1 and the Category/Class listing begins on page 97. Drugs requiring Prior Authorizations, Step Therapy and Quantity Limits are also noted in the formulary.

What are generic drugs?

Our plan covers both brand-name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand-name drug. Generally, generic drugs generally cost less than brand-name drugs. Generic drug coverage has two tiers and includes Preferred Generics and Non-Preferred Generics, neither of which are subject to any deductible.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Our plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from us before you fill your prescriptions. If you do not get approval, our plan may not cover the drug.
- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, our plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, our plan will then cover Drug B.
- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 2 tablets per day for Eliquis. This may be in addition to a standard one-month or three-month supply.

You can find out if your drug has any additional requirements or limits by looking in the formulary. You can also get more information about the restrictions applied to specific covered drugs by visiting our website listed on the back cover.

Pharmacies cannot substitute a preferred brand-name drug without the prescriber's approval. Therefore, a pharmacist may contact the prescriber to obtain authorization to dispense an alternative preferred product when a non-preferred product is prescribed.

What if my drug is not on the Formulary?

If your drug is not included in this list formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by our plan.
- You can ask our plan to make an exception and cover your drug.

For more information

For more detailed information about your Vantage prescription drug coverage, please review your Certificate of Coverage and other plan materials.

If you have questions about our plan, please contact us. Our contact information appears on the back-cover page.

Formulary Disclaimer: Coverage for some drugs may be limited to specific dosage forms and/or strengths. The benefit design determines what is covered and the applicable cost share. The medications listed on this formulary are subject to change pursuant to the formulary management activities of Vantage. The presence of a medication on this formulary list does not guarantee coverage. To see the most up-to-date formulary, please visit www.VantageHealthPlan.com. You may also call Member Services at (318) 361-0900 or toll-free at (888) 823-1910 to request a copy be mailed to you.

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Please refer to the Certificate of Coverage and/or Cost Share Schedule for the applicable Prescription Drug Deductible and Co-payment amounts or Co-insurance percentages related to each Tier listed below and referenced in this formulary. Tier 6 relates to preventive drugs and is covered at 100%.

Tiers:

- 1 = Tier 1
- 2 = Tier 2
- 3 = Tier 3
- 4 = Tier 4
- 5 = Tier 5
- 6 = Tier 6

The information in the Special Code column tells you if our plan has any special requirements for coverage of your drug. The formulary includes listings of drugs that require Prior Authorization (PA) or Step Therapy (ST), or have Quantity Limits (QL).

Requirements/Limits:

- PA = Prior Authorization
- ST = Step Therapy
- QL = Quantity Limits

Drugs:

- UPPERCASE = Brand name drugs (e.g., COUMADIN TAB)
- Lower case italics = Generic drugs (e.g., warfarin)

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Search Tip:

This is a large document, but you can search quickly and easily by clicking on the binocular icon on your toolbar. It will then display a search box for you to type in the name of the drug you want to locate. If you do not know the correct spelling, you can start your search by entering just the first few letters of the name.

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Alphabetical Index
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Drug Name	Special Code	Tier	Category
8-MOP CAP	-	4	DERMATOLOGICALS
abacavir soln (ZIAGEN equiv)	-	2	ANTIVIRALS
abacavir tab (ZIAGEN equiv)	-	2	ANTIVIRALS
abacavir/lamivudine tab (EPZICOM equiv)	-	5	ANTIVIRALS
abacavir/lamivudine/zidovudine tab (TRIZIVIR equiv) (QL= 2 tabs/day)	QL	2	ANTIVIRALS
ABELCET INJ	M	M	ANTIFUNGALS
ABILIFY DISCMELT (QL= 2 tabs/day)	QL	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY INJ	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY MAINTENA	-	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY MYCITE TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY SOLN (QL= 900ml/30 days)	QL	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
abiraterone tab 250mg (ZYTIGA equiv) (QL= 4 tabs/day)	LPSP-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ABRAXANE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ABSORICA CAP	-	4	DERMATOLOGICALS
ABSORICA LD CAP	-	NC	DERMATOLOGICALS
ABSTRAL SL TAB (QL= 120 tabs/30 days)	PA-QL	4	ANALGESICS - OPIOID
acamprosate calcium DR tab (CAMPRAL equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
acarbose tab (PRECOSE equiv)	PA	2	ANTIDIABETICS
acebutolol cap (SECTRAL equiv)	-	2	BETA BLOCKERS
acetaminophen/caffeine/dihydrocodeine tab	-	2	ANALGESICS - OPIOID
acetaminophen/codeine soln	-	2	ANALGESICS - OPIOID
acetaminophen/codeine tab (TYLENOL/CODEINE equiv)	-	2	ANALGESICS - OPIOID
ACETAMINOPHEN/ISOMETHEPTENE/DICHLORAL CAP	-	NC	MIGRAINE PRODUCTS
acetaminophen/isometheptene/dichloral cap (MIDRIN equiv)	-	NC	MIGRAINE PRODUCTS
ACETASOL HC OTIC SOLN	-	2	OTIC AGENTS
acetazolamide ER cap (DIAMOX SEQUEL equiv)	-	2	DIURETICS
acetazolamide inj	M	M	DIURETICS
acetazolamide tab	-	3	DIURETICS
acetic acid otic soln (VOSOL equiv)	-	2	OTIC AGENTS
acetic acid solution	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
acetic acid/hydrocortisone otic soln (VOSOL HC equiv)	-	2	OTIC AGENTS
acetylcysteine cap	-	2	NUTRIENTS
acetylcysteine inj	M	M	ANTIDOTES
acetylcysteine soln (MUCOMYST equiv)	-	2	COUGH/COLD/ALLERGY
ACIPHEX SPRINKLE CAP 10MG, RABEPRAZOLE SPRINKLE CAP 10MG	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
acitretin cap (SORIATANE equiv)	-	5	DERMATOLOGICALS
ACTEMRA ACTPEN INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ACTEMRA IV INJ	M	M	ANALGESICS - ANTI-INFLAMMATORY
ACTEMRA SC INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY

EXC	NC =Not Covered Plan Exclusion	LD	generic =small letters Limited Distribution	LPSP	BRANDS =CAPITAL LETTERS Lumicera Preferred Specialty Pharmacy
M	Medical Benefit	OTC	Over-the-Counter	PA	Prior Authorization
PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

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Drug Name	Special Code	Tier	Category
ACTHAR HP INJ	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
ACTHIB INJ	VAC	6	VACCINES
ACTICLATE TAB 75MG, 150MG	-	NC	TETRACYCLINES
ACTIMMUNE INJ (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTINEOPLASTICS
ACTOPLUS MET XR TAB	-	4	ANTIDIABETICS
ACUVAIL OPHTH SOLN	-	3	OPHTHALMIC AGENTS
acyclovir cap (ZOVIRAX equiv)	-	1	ANTIVIRALS
acyclovir cream (ZOVIRAX equiv)	-	2	DERMATOLOGICALS
acyclovir inj	M	M	ANTIVIRALS
acyclovir oint (ZOVIRAX equiv)	-	2	DERMATOLOGICALS
acyclovir susp (ZOVIRAX equiv)	-	2	ANTIVIRALS
acyclovir tab (ZOVIRAX equiv)	-	2	ANTIVIRALS
ACZONE GEL 5%	-	NC	DERMATOLOGICALS
ACZONE GEL, DAPSONE GEL 7.5%	-	NC	DERMATOLOGICALS
ADACEL/BOOSTRIX INJ	VAC	6	TOXOIDS
ADAGEN INJ	M	M	BIOLOGICALS MISC
adapalene cream (DIFFERIN equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
adapalene gel (DIFFERIN equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
ADAPALENE LOTION (Acne Only – members age 35 or older require Prior Authorization)	PA	3	DERMATOLOGICALS
adapalene/benzoyl peroxide gel 0.1-2.5% (EPIDUO equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
ADAZIN CREAM	-	NC	DERMATOLOGICALS
ADCETRIS INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ADCIRCA TAB	LPSP-PA	5	CARDIOVASCULAR AGENTS - MISC.
ADDYI TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
adefovir dipivoxil tab (HEPSERA equiv)	LPSP-PA	5	ANTIVIRALS
ADEMPAS TAB (Only available through Accredo 888-773-7376)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
adenosine inj (ADENOCARD equiv)	M	M	ANTIARRHYTHMICS
ADLYXIN INJ	-	NC	ANTIDIABETICS
ADMELOG INJ, INSULIN LISPRO INJ (Step Therapy requires trial of NOVOLO or INSULIN ASPART)	ST	4	ANTIDIABETICS
ADMELOG SOLOSTAR INJ, INSULIN LISPRO KWIKPEN INJ (JUNIOR) (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
ADRENALIN INJ, EPINEPHRINE INJ	-	NC	VASOPRESSORS
ADRENALIN INJ	-	NC	VASOPRESSORS
adrucil inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ADVAIR DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ADVAIR HFA INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ADVATE INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
ADVATE INJ 4000UNIT	M	M	HEMATOLOGICAL AGENTS - MISC.
ADZENYS ER SUSP, AMPHETAMINE ER SUSP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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ADZENYS XR TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
AEMCOLO TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
AEROCHAMBER	-	2	MEDICAL DEVICES AND SUPPLIES
AFINITOR DISPERZ	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AFINITOR TAB 10MG	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AFINITOR TAB 2.5MG, 5MG, 7.5MG	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AFLURIA INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
AFLURIA INJ, FLUZONE INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
AFSTYLA KIT	-	NC	HEMATOLOGICAL AGENTS - MISC.
AGGRASTAT INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
AGGRENOX CAP	-	NC	HEMATOLOGICAL AGENTS - MISC.
AIMOVIJ INJ (QL= 1 pack/28 days)	PA-QL	3	MIGRAINE PRODUCTS
AIRDUO RESPICLICK	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AJOVY INJ	-	NC	MIGRAINE PRODUCTS
AKLIEF CREAM	-	NC	DERMATOLOGICALS
AKYNZEO CAP (QL= 1 tab/fill)	PA-QL	3	ANTIEMETICS
ALA SCALP LOTION	-	3	DERMATOLOGICALS
ALAMAST OPHTH SOLN	-	4	OPHTHALMIC AGENTS
ALBATUSIN LIQUID	-	4	COUGH/COLD/ALLERGY
albendazole tab (ALBENZA equiv)	-	2	ANTHELMINTICS
ALBENZA TAB	-	3	ANTHELMINTICS
albuminar-5 inj	M	M	HEMATOLOGICAL AGENTS - MISC.
albuterol neb soln 0.083% (PROVENTIL equiv) (QL= 3 boxes/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol neb soln 0.5% (VENTOLIN equiv) (QL= 5 boxes/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol neb soln 0.63mg (ACCUNEB equiv) (QL= 5 boxes/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol neb soln 1.25mg (ACCUNEB equiv) (QL= 5 boxes/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol sulfate ER tab (VOSPIRE ER equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol sulfate syrup	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol sulfate tab	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ALBUTEROL TAB ER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol/ipratropium neb soln (DUONEB equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
alclometasone cream (ACLOVATE equiv)	-	2	DERMATOLOGICALS
alclometasone oint (ACLOVATE OINT equiv)	-	2	DERMATOLOGICALS
ALCOHOL INJ	M	M	NUTRIENTS
ALCOHOL SWABS	-	3	MEDICAL DEVICES AND SUPPLIES
ALCORTIN A GEL	-	NC	DERMATOLOGICALS

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ALDURAZYME INJ	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALECENSA CAP	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
alendronate tab (FOSAMAX equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALENDRONATE TAB 40MG	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALEVICYN SOLN DERMAL	-	NC	DERMATOLOGICALS
alfentanil inj	M	M	ANALGESICS - OPIOID
ALFERON-N INJ	LPSP-PA	5	ANTINEOPLASTICS
alfuzosin SR tab (UROXATRAL equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
ALIMTA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALINIA SUSP (QL= 60ml/3 days)	PA-QL	3	ANTI-INFECTIVE AGENTS - MISC.
ALINIA TAB (QL= 6 tabs/3 days)	PA-QL	3	ANTI-INFECTIVE AGENTS - MISC.
aliskiren tab (TEKTURNA equiv)	¢	2	ANTIHYPERTENSIVES
ALKERAN TAB	-	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALLEGRA ODT	OTC	NC	ANTIHISTAMINES
allopurinol inj	M	M	GOUT AGENTS
allopurinol tab (ZYLOPRIM equiv)	-	1	GOUT AGENTS
ALLZITAL TAB	-	2	ANALGESICS - NONNARCOTIC
ALLZITAL TAB, BUPAP TAB	-	2	ANALGESICS - NONNARCOTIC
almotriptan tab (AXERT equiv) (QL= 12 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
ALOCRILOPHTH SOLN	-	4	OPHTHALMIC AGENTS
ALODOX KIT	-	4	TETRACYCLINES
ALOGLIPTIN TAB, NESINA TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN/METFORMIN TAB, KAZANO TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB	-	NC	ANTIDIABETICS
ALOMIDE OPHTH SOLN	-	4	OPHTHALMIC AGENTS
ALOQUIN GEL	-	NC	DERMATOLOGICALS
ALORA PATCH	-	4	ESTROGENS
alosetron tab (LOTROXEX equiv)	PA	5	GASTROINTESTINAL AGENTS - MISC.
ALOXI INJ	M	M	ANTIEMETICS
ALPHAGAN P OPHTH SOLN 0.1%	-	3	OPHTHALMIC AGENTS
alprazolam ER tab (XANAX XR equiv)	-	2	ANTIAXIETY AGENTS
alprazolam ODT (NIRAVAM equiv)	-	2	ANTIAXIETY AGENTS
alprazolam tab (XANAX equiv)	-	2	ANTIAXIETY AGENTS
alprostadil inj	M	M	ASSORTED CLASSES
ALREX OPHTH SUSP	-	3	OPHTHALMIC AGENTS
ALSUMA INJ (QL= 10 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
ALTABAX OINT	-	4	DERMATOLOGICALS
ALTOPREV TAB	-	4	ANTIHYPERLIPIDEMICS
ALTRENO LOTION	-	NC	DERMATOLOGICALS
aluminum chloride soln (DRYSOL equiv)	-	2	DERMATOLOGICALS
ALUNBRIG PAK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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ALUNBRIG TAB 30MG (QL= 4 tabs/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALUNBRIG TAB 90MG, 180MG (QL= 1 tab/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALVESCO INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ALZAIR NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
amantadine cap (SYMMETREL equiv)	-	2	ANTIPARKINSON AGENTS
amantadine syrup (SYMMETREL equiv)	-	2	ANTIPARKINSON AGENTS
amantadine tab	-	2	ANTIPARKINSON AGENTS
AMBIEN TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
AMBISOME INJ	M	M	ANTIFUNGALS
ambrisentan tab (LETAIRIS equiv) (Only available through Lumicera 855-847-3553 or Walgreens 888-347-3416)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
AMCINONIDE CREAM 0.1%	-	NC	DERMATOLOGICALS
AMCINONIDE LOTION	-	NC	DERMATOLOGICALS
AMCINONIDE OINT	PA	4	DERMATOLOGICALS
a-methapred inj (SOLU-MEDROL equiv)	M	M	CORTICOSTEROIDS
amethyst tab (LYBREL equiv)	-	6	CONTRACEPTIVES
AMICAR SOLN	-	3	HEMOSTATICS
AMICAR SYRUP	-	NC	HEMOSTATICS
AMICAR TAB	-	3	HEMOSTATICS
amifostine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AMIKACIN INJ	M	M	AMINOGLYCOSIDES
amiloride tab (MIDAMOR equiv)	-	1	DIURETICS
amiloride/hydrochlorothiazide tab (MODURETIC equiv)	-	1	DIURETICS
aminoac acid solution	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
aminocaproic acid inj	M	M	HEMOSTATICS
aminocaproic acid soln (AMICAR equiv)	-	2	HEMOSTATICS
aminocaproic acid syrup (AMICAR equiv)	-	2	HEMOSTATICS
aminocaproic acid tab (AMICAR equiv)	-	2	HEMOSTATICS
AMINOHIPPURATE INJ	M	M	DIAGNOSTIC PRODUCTS
aminophylline inj	M	M	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
aminophylline tab	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
aminosyn II inj	M	M	NUTRIENTS
AMINOSYN INJ	M	M	NUTRIENTS
amiodarone inj (CORDARONE equiv)	M	M	ANTIARRHYTHMICS
amiodarone tab (CORDARONE equiv)	-	2	ANTIARRHYTHMICS
AMITIZA CAP	PA	4	GASTROINTESTINAL AGENTS - MISC.
amitriptyline tab (ELAVIL equiv)	-	1	ANTIDEPRESSANTS
amlodipine tab (NORVASC equiv)	-	1	CALCIUM CHANNEL BLOCKERS
amlodipine/atorvastatin tab (CADUET equiv)	-	2	CARDIOVASCULAR AGENTS - MISC.
amlodipine/benazepril cap (LOTREL equiv)	-	2	ANTIHYPERTENSIVES
amlodipine/olmesartan tab (AZOR TAB equiv)	-	NC	ANTIHYPERTENSIVES
amlodipine/valsartan tab (EXFORGE equiv)	¢	2	ANTIHYPERTENSIVES

EXC	NC =Not Covered	LD	generic =small letters	LPSP	BRANDS =CAPITAL LETTERS
M	Plan Exclusion	OTC	Limited Distribution	PA	Lumicera Preferred Specialty Pharmacy
PSP	Medical Benefit	QL	Over-the-Counter	RS	Prior Authorization
SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
ST	Limited to two 15 day fills per month for first 3 months	VAC	Smoking Cessation	¢	Available through Specialty Pharmacy Program
	Step Therapy		Vaccine Program		RxCENTS

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amlodipine/valsartan/hydrochlorothiazide tab (EXFORGE HCT equiv)	-	2	ANTIHYPERTENSIVES
AMMONIUM CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
ammonium lactate cream (LAC-HYDRIN equiv)	-	2	DERMATOLOGICALS
ammonium lactate lotion (LAC-HYDRIN equiv)	-	2	DERMATOLOGICALS
AMMONIUM MOLYBDATE INJ	M	M	MINERALS & ELECTROLYTES
amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap	-	2	DERMATOLOGICALS
amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap (ACCUTANE equiv)	-	2	DERMATOLOGICALS
AMOXAPINE TAB	-	2	ANTIDEPRESSANTS
amoxicillin cap (TRIMOX equiv)	-	2	PENICILLINS
AMOXICILLIN CHEW TAB	-	2	PENICILLINS
amoxicillin susp (TRIMOX equiv)	-	2	PENICILLINS
amoxicillin tab (AMOXIL equiv)	-	2	PENICILLINS
AMOXICILLIN/CLAVULANATE CHEW TAB	-	2	PENICILLINS
amoxicillin/clavulanate chew tab (AUGMENTIN equiv)	-	2	PENICILLINS
AMOXICILLIN/CLAVULANATE ER TAB	-	2	PENICILLINS
amoxicillin/clavulanate ER tab (AUGMENTIN XR equiv)	-	2	PENICILLINS
amoxicillin/clavulanate susp (AUGMENTIN ES equiv)	-	2	PENICILLINS
amoxicillin/clavulanate tab (AUGMENTIN equiv)	-	2	PENICILLINS
amphetamine tab (EVEKEO equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
amphetamine/dextroamphetamine ER cap (ADDERALL XR equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
amphetamine/dextroamphetamine tab (ADDERALL equiv) (QL= 2 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
AMPHOTEC INJ	M	M	ANTIFUNGALS
AMPHOTERICIN INJ	M	M	ANTIFUNGALS
AMPICILLIN CAP	-	2	PENICILLINS
ampicillin cap (PRINCIPEN equiv)	-	2	PENICILLINS
AMPICILLIN INJ	M	M	PENICILLINS
ampicillin susp (PRINCIPEN equiv)	-	2	PENICILLINS
ampicillin-sulbactam inj (UNASYN equiv)	M	M	PENICILLINS
AMPYRA TAB	PSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AMRIX CAP	-	NC	MUSCULOSKELETAL THERAPY AGENTS
AMTURNIDE TAB	-	3	ANTIHYPERTENSIVES
AMYL NITRITE INH	-	2	ANTIANGINAL AGENTS
AMZEEQ FOAM	-	NC	DERMATOLOGICALS
ANADROL-50 TAB	-	4	ANDROGENS-ANABOLIC
anagrelide cap (AGRYLIN equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
ANALPRAM-E KIT	-	4	ANORECTAL AGENTS
ANALPRAM-HC CREAM	-	NC	ANORECTAL AGENTS
ANALPRAM-HC LOTION	-	3	ANORECTAL AGENTS
ANASTIA LOTION	-	NC	DERMATOLOGICALS
anastrozole tab (ARIMIDEX equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ANDRODERM PATCH (Step therapy requires trial of ANDROGEL equiv)	ST	4	ANDROGENS-ANABOLIC
ANDROGEL 1% 25MG	-	NC	ANDROGENS-ANABOLIC
ANDROGEL 1% 50MG	-	NC	ANDROGENS-ANABOLIC
ANDROGEL 1.62% 1.25GM	-	4	ANDROGENS-ANABOLIC

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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ANDROGEL 1.62% 2.5GM	-	4	ANDROGENS-ANABOLIC
ANDROGEL PUMP 1.62%	-	4	ANDROGENS-ANABOLIC
ANDROXY TAB	-	3	ANDROGENS-ANABOLIC
ANNOVERA RING	-	NC	CONTRACEPTIVES
ANORO ELLIPTA INHALER	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ANTARA CAP	-	4	ANTIHYPERLIPIDEMICS
antipyrine/benzocaine otic soln (AURALGAN equiv)	-	NC	OTIC AGENTS
ANTIVENIN KIT LAT MACT	M	M	PASSIVE IMMUNIZING AGENTS
ANTIVENIN MI KIT	M	M	PASSIVE IMMUNIZING AGENTS
ANZEMET INJ	M	M	ANTIEMETICS
ANZEMET TAB (QL= 5 tabs/30 days)	QL	3	ANTIEMETICS
APADAZ TAB	-	NC	ANALGESICS - OPIOID
APEXICON E CREAM (PSORCON E equiv)	-	NC	DERMATOLOGICALS
APHTHASOL PASTE	-	4	MOUTH/THROAT/DENTAL AGENTS
APIDRA INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
APIDRA SOLOSTAR INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
APLENZIN TAB (QL= 1 tab/day)	QL	4	ANTIDEPRESSANTS
APOKYN INJ (Only available through CVS Specialty 800-237-2767)	LD-PA	5	ANTIPARKINSON AGENTS
apraclonidine ophth soln (IOPIDINE equiv)	-	2	OPHTHALMIC AGENTS
aprepitant cap (EMEND equiv) (QL= 3 caps/fill)	PA-QL	2	ANTIEMETICS
aprepitant pak (EMEND equiv) (QL= 3 caps/fill)	PA-QL	2	ANTIEMETICS
APRISO CAP	-	3	GASTROINTESTINAL AGENTS - MISC.
APRIZIO PAK KIT	-	NC	DERMATOLOGICALS
APTIVUS CAP	-	5	ANTIVIRALS
APTIVUS SOLN	-	5	ANTIVIRALS
ARAKODA TAB	-	NC	ANTIMALARIALS
ARALAST/PROLASTIN/ZEMAIRA INJ	M	M	RESPIRATORY AGENTS - MISC.
aranelle tab (TRI-NORINYL equiv)	-	6	CONTRACEPTIVES
ARANESP INJ (Step Therapy requires trial of EPOGEN or PROCREDIT)	LPSP-ST	5	HEMATOPOIETIC AGENTS
ARAZLO LOTION	-	NC	DERMATOLOGICALS
ARCALYST INJ	M	M	ANALGESICS - ANTI-INFLAMMATORY
ARCAPTA NEOHALER (QL= 1 inhaler/30 days)	QL	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
argatroban inj	M	M	ANTICOAGULANTS
ARIKAYCE SUSP (QL= 1 vial/day; Only available through Maxor Pharmacy 800-658-6046)	LD-PA-QL	5	AMINOGLYCOSIDES
aripiprazole ODT (ABILIFY equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole soln (ABILIFY equiv) (QL= 900ml/30 days)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole tab (ABILIFY equiv) (QL= 1 tab/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole tab 2mg (ABILIFY equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole tab 5mg (ABILIFY equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
armodafinil tab (NUVIGIL equiv) (QL= 1 tab/day)	PA-QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
ARMONAIR RESPICLICK	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ARMOUR THYROID TAB, NATURE THROID TAB	-	2	THYROID AGENTS
ARNUIITY ELLIPTA INHALER	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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ARRANON INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
arsenic trio inj 10/10ml (TRISENOX equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ARYMO ER TAB	-	NC	ANALGESICS - OPIOID
ARZERRA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ASACOL HD TAB	-	4	GASTROINTESTINAL AGENTS - MISC.
ASACOL HD TAB, MESALAMINE TAB	-	4	GASTROINTESTINAL AGENTS - MISC.
ASCORBIC ACID INJ	M	M	VITAMINS
ASMANEX HFA INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ASMANEX INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
aspirin chew tab 81mg (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6	ANALGESICS - NONNARCOTIC
aspirin ec tab 325mg (Covered for males age 45-79 and females age 55-79)	OTC	6	ANALGESICS - NONNARCOTIC
aspirin ec tab 81mg (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6	ANALGESICS - NONNARCOTIC
aspirin effer tab (MEDI-SELTZER equiv) (Covered for males age 45-79 years and women age 55-79 years)	OTC	6	ANALGESICS - NONNARCOTIC
aspirin tab (Covered for males age 45-79 years and women age 55-79 years.)	OTC	6	ANALGESICS - NONNARCOTIC
aspirin tab 325mg (Covered for males age 45-79 and females age 55-79)	OTC	6	ANALGESICS - NONNARCOTIC
ASPIRIN TAB 81MG (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6	ANALGESICS - NONNARCOTIC
aspirin/codeine tab	-	2	ANALGESICS - OPIOID
aspirin/dipyridamole cap (AGGRENOX equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
ASPIRIN/OMEPRAZOLE ER TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
ASTAGRAF XL CAP	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
ASTAMED MYO CAP	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
atazanavir cap (REYATAZ equiv)	-	5	ANTIVIRALS
atenolol tab (TENORMIN equiv)	-	1	BETA BLOCKERS
atenolol/chlorthalidone tab (TENORETIC equiv)	-	1	ANTIHYPERTENSIVES
ATGAM INJ	M	M	ASSORTED CLASSES
atomoxetine cap (STRATTERA equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
atorvastatin tab 10mg (LIPITOR equiv)	-	1	ANTIHYPERLIPIDEMICS
atorvastatin tab 20mg (LIPITOR equiv)	-	1	ANTIHYPERLIPIDEMICS
atorvastatin tab 40mg (LIPITOR equiv)	-	1	ANTIHYPERLIPIDEMICS
atorvastatin tab 80mg (LIPITOR equiv)	-	1	ANTIHYPERLIPIDEMICS
atovaquone susp (MEPRON equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
atovaquone/proguanil tab (MALARONE equiv)	-	2	ANTIMALARIALS
atracurium inj	M	M	NEUROMUSCULAR AGENTS
ATRIPLA TAB (QL= 1 tab/day)	QL	5	ANTIVIRALS
ATROPEN INJ	M	M	ULCER DRUGS
atropine ophth oint	-	2	OPHTHALMIC AGENTS
atropine ophth soln (ISOPTO ATROPINE equiv)	-	2	OPHTHALMIC AGENTS
ATROPINE SUL INJ	M	M	ULCER DRUGS
atropine sul inj (ATROPINE equiv)	M	M	ULCER DRUGS

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atropine sulfate inj	M	M	ULCER DRUGS
ATROVENT HFA INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AUBAGIO TAB	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUGMENTIN SUSP	-	3	PENICILLINS
AURYXIA TAB	-	4	GASTROINTESTINAL AGENTS - MISC.
AUSTEDO TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUVI-Q INJ	-	NC	VASOPRESSORS
AVAGE CREAM	-	3	DERMATOLOGICALS
AVANDIA TAB	-	4	ANTIDIABETICS
AVASTIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AVC VAGINAL CREAM	-	3	VAGINAL PRODUCTS
AVELOX INJ	M	M	FLUOROQUINOLONES
aviane tab (ALESSE equiv)	-	6	CONTRACEPTIVES
AVODART CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
AVONEX INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AXERT TAB	-	NC	MIGRAINE PRODUCTS
AXIRON SOLN (Step therapy requires trial of ANDROGEL equiv)	ST	4	ANDROGENS-ANABOLIC
AYVAKIT TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AZACTAM/DEX INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
azactidine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AZASAN TAB	-	3	ASSORTED CLASSES
AZASITE SOLN	-	4	OPHTHALMIC AGENTS
AZATHIOPRINE INJ	M	M	ASSORTED CLASSES
azathioprine tab (IMURAN equiv)	-	2	ASSORTED CLASSES
azelaic acid gel (FINACEA equiv)	-	2	DERMATOLOGICALS
azelastine nasal spray 0.1% (ASTELIN equiv) (QL= 2 bottles/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
azelastine nasal spray 0.15% (ASTEPRO equiv) (QL= 2 bottles/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
azelastine ophth soln (OPTIVAR equiv)	-	2	OPHTHALMIC AGENTS
azelastine/fluticasone nasal spray (DYMISTA equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
AZELEX CREAM (Acne Only – members age 35 or older require Prior Authorization)	PA	3	DERMATOLOGICALS
AZENASE PAK	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
AZESCO TAB	-	NC	MULTIVITAMINS
AZILECT TAB	-	NC	ANTIPARKINSON AGENTS
azithromycin inj	M	M	MACROLIDES
azithromycin susp (ZITHROMAX equiv)	-	2	MACROLIDES
azithromycin tab (ZITHROMAX equiv)	-	2	MACROLIDES
AZOPT OPHTH SUSP	-	3	OPHTHALMIC AGENTS
AZOR TAB	-	NC	ANTIHYPERTENSIVES
aztreonam inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
B6 FOLIC ACD CAP	-	2	HEMATOPOIETIC AGENTS
bacitracin inj	M	M	ANTI-INFECTIVE AGENTS - MISC.

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BACITRACIN OPHTH OINT	-	2	OPHTHALMIC AGENTS
bacitracin/neomycin/polymyxin b ophth oint (NEOSPORIN equiv)	-	2	OPHTHALMIC AGENTS
bacitracin/polymyxin b ophth oint (POLYSPORIN equiv)	-	2	OPHTHALMIC AGENTS
bacitracin/polymyxin/neomycin/hydrocortisone ophth oint (CORTISPORIN equiv)	-	2	OPHTHALMIC AGENTS
baclofen inj (LIORESAL INT equiv)	M	M	MUSCULOSKELETAL THERAPY AGENTS
baclofen tab 10mg, 20mg	-	1	MUSCULOSKELETAL THERAPY AGENTS
BACLOFEN TAB 5MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
BACMIN TAB	-	4	MULTIVITAMINS
BACTOCILL/DEXTROSE INJ	M	M	PENICILLINS
BACTROBAN NASAL OINT	-	4	NASAL AGENTS - SYSTEMIC AND TOPICAL
balanced salt soln	-	2	OPHTHALMIC AGENTS
BALCOLTRA TAB	-	NC	CONTRACEPTIVES
balsalazide cap (COLAZAL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
BALVERSA TAB 3MG (QL= 3 tabs/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BALVERSA TAB 4MG (QL= 2 tabs/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BALVERSA TAB 5MG (QL= 1 tab/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BANZEL SUSP	-	4	ANTICONVULSANTS
BANZEL TAB	-	3	ANTICONVULSANTS
BAQSIMI NASAL POWDER (QL= 2 inhalations/fill)	QL	3	ANTIDIABETICS
BARACLUDE SOLN	PA-SP	5	ANTIVIRALS
BASAGLAR INJ	-	NC	ANTIDIABETICS
BAXDELA TAB (QL= 2 tabs/day; Restricted to Infectious Disease Specialist)	QL-RS	3	FLUOROQUINOLONES
B-D INSULIN SYRINGE	--OTC	3	MEDICAL DEVICES AND SUPPLIES
B-D PEN NEEDLE	OTC	3	MEDICAL DEVICES AND SUPPLIES
b-donna tab (DONNATAL equiv)	-	2	ULCER DRUGS
BECONASE AQ NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4	NASAL AGENTS - SYSTEMIC AND TOPICAL
BELBUCA FILM	-	NC	ANALGESICS - OPIOID
BELLADONNA ALKALOID/OPIUM SUPP	-	2	ULCER DRUGS
belladonna/phenobarbital tab (DONNATAL equiv)	-	2	ULCER DRUGS
BELSOMRA TAB	-	NC	HYPNOTICS
BELVIQ XR TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
benazepril tab (LOTENSIN equiv)	-	1	ANTIHYPERTENSIVES
benazepril/hydrochlorothiazide tab (LOTENSIN HCT equiv)	-	2	ANTIHYPERTENSIVES
BENEFIX INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
BENICAR HCT TAB	-	NC	ANTIHYPERTENSIVES
BENICAR TAB	-	NC	ANTIHYPERTENSIVES
BENLYSTA AUTO-INJECTOR	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
BENLYSTA INJ	M	M	ASSORTED CLASSES
BENLYSTA INJ	M--	NC	MISCELLANEOUS THERAPEUTIC CLASSES
BENZAFLIN KIT CARE	-	4	DERMATOLOGICALS
BENZALKONIUM SOLN	-	2	ANTISEPTICS & DISINFECTANTS
BENZAMYCIN GEL PACK	-	4	DERMATOLOGICALS
BENZNIDAZOLE TAB	PA	3	ANTHELMINTICS
BENZOCAINE/LIDOCAINE/TETRACAINE OINT	-	NC	DERMATOLOGICALS

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benzonatate cap (TESSALON equiv)	-	2	COUGH/COLD/ALLERGY
benzonatate cap 150mg (ZONATUSS equiv)	-	NC	COUGH/COLD/ALLERGY
benzoyl peroxide gel	-	2	DERMATOLOGICALS
benzoyl peroxide kit	-	2	DERMATOLOGICALS
benzoyl peroxide liquid	-	2	DERMATOLOGICALS
BENZOYL PEROXIDE LOTION	-	2	DERMATOLOGICALS
benzoyl peroxide pad	-	2	DERMATOLOGICALS
BENZOYL PEROXIDE WASH	-	2	DERMATOLOGICALS
BENZOYL PEROXIDE/HYDROCORTISONE LOTION	-	NC	DERMATOLOGICALS
benzoyl peroxide/hydrocortisone lotion (VANOXIDE-HC equiv)	-	NC	DERMATOLOGICALS
benzphetamine tab	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
benztropine inj	M	M	ANTIPARKINSON AGENTS
benztropine tab	-	1	ANTIPARKINSON AGENTS
BEPREVE OPHTH SOLN	-	4	OPHTHALMIC AGENTS
BERINERT INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
BESER KIT 0.05%	-	NC	DERMATOLOGICALS
BESIVANCE OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
betamethasone augmented cream (DIPROLENE AF CREAM equiv)	-	2	DERMATOLOGICALS
betamethasone augmented gel	-	2	DERMATOLOGICALS
betamethasone augmented lotion (DIPROLENE LOTION equiv)	-	2	DERMATOLOGICALS
betamethasone augmented oint (DIPROLENE OINT equiv)	-	2	DERMATOLOGICALS
betamethasone dipropionate cream (DIPROSONE CREAM equiv)	-	2	DERMATOLOGICALS
betamethasone dipropionate lotion	-	2	DERMATOLOGICALS
betamethasone dipropionate oint (DIPROSONE OINT equiv)	-	2	DERMATOLOGICALS
betamethasone sodium phosphate inj (CELESTONE-SOLUSPAN equiv)	M	M	CORTICOSTEROIDS
betamethasone valerate cream	-	2	DERMATOLOGICALS
betamethasone valerate foam (LUXIQ FOAM equiv)	-	NC	DERMATOLOGICALS
betamethasone valerate lotion	-	2	DERMATOLOGICALS
betamethasone valerate oint	-	2	DERMATOLOGICALS
BETASERON INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
betaxolol ophth soln (BETOPTIC-S equiv)	-	2	OPHTHALMIC AGENTS
betaxolol tab (KERLONE equiv)	-	2	BETA BLOCKERS
bethanechol tab (URECHOLINE equiv)	-	2	URINARY ANTISPASMODICS
BETIMOL OPHTH SOLN	-	4	OPHTHALMIC AGENTS
BETOPTIC-S OPHTH SOLN	-	3	OPHTHALMIC AGENTS
BEVESPI AEROSPHERE INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BEVYXXA CAP	-	NC	ANTICOAGULANTS
bexarotene cap (TARGRETIN equiv)	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BEXSERO INJ	VAC	6	VACCINES
BEXXAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BEYAZ TAB	-	NC	CONTRACEPTIVES
bicalutamide tab (CASODEX equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BICILLIN C-R INJ	M	M	PENICILLINS
BICILLIN L-A INJ	M	M	PENICILLINS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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BICNU INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BIDIL TAB	-	3	CARDIOVASCULAR AGENTS - MISC.
BIJUVA CAP	-	NC	ESTROGENS
BIKTARVY TAB	-	5	ANTIVIRALS
BILTRICIDE TAB	-	3	ANTHELMINTICS
bimatoprost ophth soln (QL= 2.5ml/30 days)	QL	2	OPHTHALMIC AGENTS
BINOSTO TAB (QL= 4 tabs/ 28 days)	QL	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
BIOTHRAX INJ	VAC	6	VACCINES
bisoprolol tab (ZEBETA equiv)	-	2	BETA BLOCKERS
bisoprolol/hydrochlorothiazide tab (ZIAC equiv)	-	1	ANTIHYPERTENSIVES
bleomycin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BLEPHAMIDE S.O.P. OPHTH OINT	-	3	OPHTHALMIC AGENTS
bosentan tab (TRACLEER equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
BOSULIF TAB	PA-PSP-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BOTOX COSMET INJ	M	M	DERMATOLOGICALS
BOTOX INJ	M	M	NEUROMUSCULAR AGENTS
BP VIT 3 CAP	-	2	HEMATOPOIETIC AGENTS
BRAFTOVI CAP 75MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BREO ELLIPTA INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BRILINTA TAB	-	4	HEMATOLOGICAL AGENTS - MISC.
brimonidine ophth soln 0.15% (ALPHAGAN P 0.15% equiv)	-	2	OPHTHALMIC AGENTS
brimonidine ophth soln 0.2%	-	2	OPHTHALMIC AGENTS
BRISDELLE CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
BRIVIACT INJ 50MG/5ML	-	NC	ANTICONVULSANTS
BRIVIACT SOLN 10MG/ML	-	NC	ANTICONVULSANTS
BRIVIACT TAB	-	NC	ANTICONVULSANTS
bromfenac ophth soln (BROMDAY equiv)	-	2	OPHTHALMIC AGENTS
BROMFENAC OPHTH SOLN 0.09% (TWICE DAILY)	-	2	OPHTHALMIC AGENTS
bromocriptine cap (PARLODEL equiv)	-	2	ANTIPARKINSON AGENTS
bromocriptine tab (PARLODEL equiv)	-	2	ANTIPARKINSON AGENTS
brompheniramine soln	-	3	ANTIHISTAMINES
brompheniramine/pseudoephedrine liquid	-	3	COUGH/COLD/ALLERGY
BROMSITE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
BRONCOPECTOL SYRUP	-	4	COUGH/COLD/ALLERGY
BROVANA NEB SOLN (QL= 2 nebs/day)	QL	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BROVEX PEB LIQUID	OTC	NC	COUGH/COLD/ALLERGY
BRUKINSA CAP (QL= 4 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BRYHALI LOTION	-	NC	DERMATOLOGICALS
B-SERENE PAD	-	NC	HEMATOPOIETIC AGENTS
BSS OPHTH SOLN	-	2	OPHTHALMIC AGENTS
budesonide ER tab (UCERIS equiv)	-	NC	CORTICOSTEROIDS

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budesonide inh susp (PULMICORT equiv) (QL= 2 nebs/day)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
budesonide nasal spray (RHINOCORT AQUA equiv) (QL= 1 bottle/30 days)	OTC-QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
budesonide SR cap (ENTOCORT EC equiv)	-	2	CORTICOSTEROIDS
BUDESONIDE/FORMOTEROL INHALER, SYMBICORT INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
bumetanide inj (BUMEX equiv)	M	M	DIURETICS
bumetanide tab (BUMEX equiv)	-	2	DIURETICS
BUNAVAIL FILM	-	3	ANALGESICS - OPIOID
BUPHENYL TAB	-	3	ENDOCRINE AND METABOLIC AGENTS - MISC.
bupivacaine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
bupivacaine/epinephrine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
buprenorphine inj	M	M	ANALGESICS - OPIOID
buprenorphine patch (BUTRANS equiv)	-	2	ANALGESICS - OPIOID
buprenorphine SL tab (SUBUTEX equiv)	-	2	ANALGESICS - OPIOID
buprenorphine/naloxone sl film (SUBOXONE equiv)	-	2	ANALGESICS - OPIOID
buprenorphine/naloxone SL tab (SUBOXONE equiv)	-	2	ANALGESICS - OPIOID
bupropion ER tab (WELLBUTRIN equiv) (QL= 2 tabs/day)	QL	2	ANTIDEPRESSANTS
bupropion SR tab (ZYBAN equiv) (Limited to 180 days/calendar year)	QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
bupropion SR tab 150mg (WELLBUTRIN equiv) (QL= 2 tabs/day)	QL	6	ANTIDEPRESSANTS
bupropion tab (WELLBUTRIN equiv)	-	2	ANTIDEPRESSANTS
bupropion XL tab (WELLBUTRIN XL equiv) (QL= 1 tab/day)	QL	2	ANTIDEPRESSANTS
buspirone tab (BUSPAR equiv)	-	1	ANTIANKXIETY AGENTS
busulfan inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BUSULFEX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BUSULFEX INJ	M--	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
butalbital/acetaminophen cap	-	NC	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen tab (PHRENILIN equiv)	-	2	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen/caffeine cap (FIORICET equiv)	-	2	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen/caffeine soln	-	NC	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen/caffeine tab (FIORICET equiv)	-	2	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen/caffeine/codeine cap (FIORICET/CODEINE equiv)	-	2	ANALGESICS - OPIOID
butalbital/aspirin/caffeine cap (FIORINAL equiv)	-	2	ANALGESICS - NONNARCOTIC
BUTALBITAL/ASPIRIN/CAFFEINE TAB	-	2	ANALGESICS - NONNARCOTIC
butalbital/aspirin/caffeine/codeine cap (FIORINAL/CODEINE equiv)	-	2	ANALGESICS - OPIOID
butorphanol inj	M	M	ANALGESICS - OPIOID
butorphanol nasal spray (STADOL equiv) (QL= 2 bottles/30 days)	QL	2	ANALGESICS - OPIOID
BUTRANS PATCH 5 MCG/HR, 10 MCG/HR, 15 MCG/HR, 20 MCG/HR	-	4	ANALGESICS - OPIOID
BYDUREON BCISE AUTO INJ	-	3	ANTIDIABETICS
BYDUREON INJ	-	3	ANTIDIABETICS
BYDUREON PEN INJ	-	3	ANTIDIABETICS
BYETTA INJ (QL= 1 pen/30 days)	QL	4	ANTIDIABETICS
BYNFEZIA PEN INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
BYSTOLIC TAB	¢	3	BETA BLOCKERS

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BYVALSON TAB	-	NC	ANTIHYPERTENSIVES
cabergoline tab (DOSTINEX equiv)	SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
CABLIVI INJ KIT	-	NC	HEMATOLOGICAL AGENTS - MISC.
CABOMETYX TAB (QL= 1 tab/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CA-DTPA SOLN	-	2	ANTIDOTES
caffeine citrate inj (CAFCIT equiv)	M	M	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
caffeine citrate soln (CAFCIT equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
CAFFEINE/SODIUM BENZOATE INJ	M	M	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
calcipotriene cream (DOVONEX CREAM equiv)	-	2	DERMATOLOGICALS
CALCIPOTRIENE FOAM	-	NC	DERMATOLOGICALS
calcipotriene oint	-	2	DERMATOLOGICALS
calcipotriene soln (DOVONEX SOLN equiv)	-	2	DERMATOLOGICALS
calcipotriene/betamethasone dipropionate susp	-	2	DERMATOLOGICALS
calcipotriene/betamethasone oint (TACLONEX equiv)	-	1	DERMATOLOGICALS
CALCIPOTRIENE/BETAMETHASONE SUSP	-	3	DERMATOLOGICALS
calcitonin nasal spray (MIACALCIN equiv) (QL= 1 bottle/30 days)	QL	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
calcitriol cap (ROCALTROL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
CALCITRIOL INJ	LPSP	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
CALCITRIOL OINT	-	4	DERMATOLOGICALS
calcitriol soln (ROCALTROL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
calcium acetate cap (PHOSLO equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
calcium acetate tab (ELIPHOS equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
calcium chloride inj	M	M	MINERALS & ELECTROLYTES
CALCIUM DISODIUM INJ	M	M	ANTIDOTES
CALCIUM FOLINATE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
calcium gluconate inj	M	M	MINERALS & ELECTROLYTES
CALIBRATION LIQUID	OTC	NC	MEDICAL DEVICES AND SUPPLIES
CALOMIST NASAL SPRAY	-	NC	HEMATOPOIETIC AGENTS
CALQUENCE CAP (QL= 2 caps/day; Only available through Lumicera Pharmacy 855-847-3553)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CAMPATH INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CAMPRAL TAB	-	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
CANCIDAS INJ	M	M	ANTIFUNGALS
candesartan tab (ATACAND equiv)	-	2	ANTIHYPERTENSIVES
candesartan/hydrochlorothiazide tab (ATACAND HCT equiv)	-	2	ANTIHYPERTENSIVES
CANTIL TAB	-	4	ULCER DRUGS
CAPASTAT SULFATE INJ	M	M	ANTIMYCOBACTERIAL AGENTS
capecitabine tab (XELODA equiv)	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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CAPEX SHAMPOO	-	3	DERMATOLOGICALS
CAPLYTA CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CAPRELSA TAB (Only available through Biologics 800-850-4306)	LD-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
captopril tab (CAPOTEN equiv)	-	1	ANTIHYPERTENSIVES
CAPTOPRIL/HYDROCHLOROTHIAZIDE TAB	-	1	ANTIHYPERTENSIVES
CARAC CREAM	-	NC	DERMATOLOGICALS
CARAFATE SUSP	-	3	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEFCS
CARBAGLU TAB (Only available through Accredo 888-773-7376)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
carbamazepine chew tab (TEGRETOL equiv)	-	2	ANTICONVULSANTS
carbamazepine ER cap (CARBATROL equiv)	-	2	ANTICONVULSANTS
carbamazepine ER tab (TEGRETOL XR equiv)	-	2	ANTICONVULSANTS
carbamazepine susp (TEGRETOL equiv)	-	2	ANTICONVULSANTS
carbamazepine tab (TEGRETOL equiv)	-	2	ANTICONVULSANTS
carbidopa tab (LODOSYN equiv)	-	2	ANTIPARKINSON AGENTS
carbidopa/levodopa ER tab (SINEMET CR equiv)	-	2	ANTIPARKINSON AGENTS
carbidopa/levodopa ODT (PARCOPA equiv)	-	2	ANTIPARKINSON AGENTS
carbidopa/levodopa tab (SINEMET equiv)	-	2	ANTIPARKINSON AGENTS
CARBIDOPA/LEVODOPA/ENTACAPONE TAB (STALEVO equiv)	-	2	ANTIPARKINSON AGENTS
CARBINOXAMINE SOLN	-	2	ANTIHISTAMINES
carbinoxamine soln (PALGIC equiv)	-	2	ANTIHISTAMINES
CARBINOXAMINE TAB	-	2	ANTIHISTAMINES
carbinoxamine tab (PALGIC equiv)	-	2	ANTIHISTAMINES
carboplatin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CARDENE INJ	M	M	CALCIUM CHANNEL BLOCKERS
CARDIZEM LA TAB	-	3	CALCIUM CHANNEL BLOCKERS
CARDURA XL TAB	-	4	GENITOURINARY AGENTS - MISCELLANEOUS
CARIMUNE INJ 3GM	M	M	PASSIVE IMMUNIZING AGENTS
carisoprodol tab (SOMA equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
CARISOPRODOL/ASPIRIN TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
carisoprodol/aspirin tab (SOMA COMPOUND equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
CARISOPRODOL/ASPIRIN/CODEINE TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
carisoprodol/aspirin/codeine tab (SOMA COMPOUND/CODEINE equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
carmustine inj (BICNU equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CARNITOR INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CAROSPIR SUSP	-	NC	DIURETICS
CARTEOLOL OPHTH SOLN	-	2	OPHTHALMIC AGENTS
carteolol ophth soln (OCUPRESS equiv)	-	2	OPHTHALMIC AGENTS
carvedilol phosphate ER cap (COREG CR equiv)	-	2	BETA BLOCKERS
carvedilol tab (COREG equiv)	-	1	BETA BLOCKERS
CATAPRES-TTS PATCH	-	NC	ANTIHYPERTENSIVES
CAYSTON INH SOLN (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTI-INFECTIVE AGENTS - MISC.
CEDAX CAP	-	4	CEPHALOSPORINS

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CEDAX SUSP	-	4	CEPHALOSPORINS
cefaclor cap (CECLOR equiv)	-	2	CEPHALOSPORINS
CEFACTOR ER TAB	-	2	CEPHALOSPORINS
CEFACTOR SUSP	-	2	CEPHALOSPORINS
cefaclor susp (CECLOR equiv)	-	2	CEPHALOSPORINS
cefadroxil cap (DURICEF equiv)	-	2	CEPHALOSPORINS
cefadroxil susp (DURICEF equiv)	-	2	CEPHALOSPORINS
cefadroxil tab (DURICEF equiv)	-	2	CEPHALOSPORINS
CEFAZOL/DEX SOL	M	M	CEPHALOSPORINS
cefazolin inj	M	M	CEPHALOSPORINS
CEFAZOLIN INJ	M	M	CEPHALOSPORINS
cefdinir cap (OMNICEF equiv)	-	2	CEPHALOSPORINS
cefdinir susp (OMNICEF equiv)	-	2	CEPHALOSPORINS
CEFDITOREN TAB	-	2	CEPHALOSPORINS
cefepime inj	M	M	CEPHALOSPORINS
cefixime cap (SUPRAX equiv)	-	4	CEPHALOSPORINS
cefixime susp (SUPRAX equiv)	-	2	CEPHALOSPORINS
cefotaxime inj	M	M	CEPHALOSPORINS
cefotetan inj	M	M	CEPHALOSPORINS
cefotetan inj (CEFOTAN equiv)	M	M	CEPHALOSPORINS
cefotetan/dextrose inj	M	M	CEPHALOSPORINS
cefoxitin inj	M	M	CEPHALOSPORINS
cefpodoxime proxetil susp (VANTIN equiv)	-	2	CEPHALOSPORINS
cefpodoxime proxetil tab (VANTIN equiv)	-	2	CEPHALOSPORINS
cefprozil susp (CEFZIL equiv)	-	2	CEPHALOSPORINS
cefprozil tab (CEFZIL equiv)	-	2	CEPHALOSPORINS
ceftazidime inj	M	M	CEPHALOSPORINS
ceftazidime/dextrose inj	M	M	CEPHALOSPORINS
CEFTIN SUSP	-	3	CEPHALOSPORINS
ceftriaxone inj	M	M	CEPHALOSPORINS
ceftriaxone/dextrose inj	M	M	CEPHALOSPORINS
cefuroxime inj	M	M	CEPHALOSPORINS
cefuroxime susp (CEFTIN equiv)	-	2	CEPHALOSPORINS
cefuroxime tab (CEFTIN equiv)	-	2	CEPHALOSPORINS
cefuroxime/dextrose inj	M	M	CEPHALOSPORINS
celecoxib cap (CELEBREX equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
CELONTIN CAP	-	3	ANTICONSULTANTS
CENESTIN TAB	-	4	ESTROGENS
CENTANY OINT	-	2	DERMATOLOGICALS
cephalexin cap (KEFLEX equiv)	-	2	CEPHALOSPORINS
cephalexin cap 750mg (KEFLEX equiv)	-	2	CEPHALOSPORINS
cephalexin susp (KEFLEX equiv)	-	2	CEPHALOSPORINS
CEPHALEXIN TAB	-	NC	CEPHALOSPORINS
CEPROTIN INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
CEQUA (PF) OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
CEREZYME INJ	M	M	HEMATOPOIETIC AGENTS
CERVARIX INJ	VAC	6	VACCINES
CERVICAL CAP	-	6	MEDICAL DEVICES AND SUPPLIES
CESAMET CAP	-	4	ANTIEMETICS
cesia tab (CYCLESSA equiv)	-	6	CONTRACEPTIVES

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cetirizine syrup (ZYRTEC equiv)	-	2	ANTIHISTAMINES
cetirizine tab (ZYRTEC equiv)	-	1	ANTIHISTAMINES
cetirizine/pseudoephedrine 12-hour tab (ZYRTEC equiv)	-	NC	COUGH/COLD/ALLERGY
CETYLEV TAB	-	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
cevimeline cap (EVOXAC equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
CHANTIX (Limited to 180 days/calendar year)	QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
CHEMET CAP	-	3	ANTIDOTES
chloramphenicol inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
chlordiazepoxide cap (LIBRIUM equiv)	-	2	ANTI-ANXIETY AGENTS
CHLORDIAZEPOXIDE/AMITRIPTYLINE TAB	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
chlordiazepoxide/clidinium cap (LIBRAX equiv)	-	NC	ULCER DRUGS
CHLORHEX GLU SOLN	-	1	ANTISEPTICS & DISINFECTANTS
chlorhexidine gluconate soln (DYNA-HEX 2 SOLN equiv)	-	1	ANTISEPTICS & DISINFECTANTS
chlorhexidine gluconate soln (PERIDEX equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
chlorprocaine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
CHLOROQUINE TAB	-	2	ANTIMALARIALS
chloroquine tab (ARALEN equiv)	-	2	ANTIMALARIALS
chlorothiazide inj (DIURIL equiv)	M	M	DIURETICS
CHLOROTHIAZIDE TAB	-	1	DIURETICS
chlorothiazide tab (DIURIL equiv)	-	1	DIURETICS
chlorpheniramine ER cap	-	2	ANTIHISTAMINES
CHLORPROMAZINE INJ	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
chlorpromazine tab (THORAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CHLORPROPAMIDE TAB	-	2	ANTIDIABETICS
chlorpropamide tab (DIABINESE equiv)	-	2	ANTIDIABETICS
CHLORTHALIDONE TAB	-	2	DIURETICS
chlorzoxazone tab	-	2	MUSCULOSKELETAL THERAPY AGENTS
CHLORZOAZONE TAB 250MG	-	2	MUSCULOSKELETAL THERAPY AGENTS
CHLORZOAZONE TAB 250MG, LORZONE TAB	-	2	MUSCULOSKELETAL THERAPY AGENTS
chlorzoxazone tab 500mg	-	2	MUSCULOSKELETAL THERAPY AGENTS
CHO MAG TRIS LIQUID	-	2	ANALGESICS - NONNARCOTIC
cholecalciferol cap 50000 unit	OTC	1	VITAMINS
cholestyramine lite powder (QUESTRAN LITE equiv)	-	2	ANTIHYPERLIPIDEMICS
cholestyramine lite powder pack (QUESTRAN LITE equiv)	-	2	ANTIHYPERLIPIDEMICS
CHOLINE MAGNESIUM TRISALICYLATE TAB	-	2	ANALGESICS - NONNARCOTIC
choline magnesium trisalicylate tab (TRILISATE equiv)	-	2	ANALGESICS - NONNARCOTIC
choline/magnesium liquid	-	2	ANALGESICS - NONNARCOTIC
CHROMIUM CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
CIALIS TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
CIALIS TAB 2.5MG, 5MG	PA	4	CARDIOVASCULAR AGENTS - MISC.
cicatrace kit (REXASIL equiv)	-	NC	DERMATOLOGICALS
ciclopirox cream (LOPROX CREAM equiv)	-	2	DERMATOLOGICALS
ciclopirox gel (LOPROX GEL equiv)	-	2	DERMATOLOGICALS
ciclopirox nail soln (PENLAC equiv)	-	2	DERMATOLOGICALS
ciclopirox shampoo (LOPROX SHAMPOO equiv)	-	2	DERMATOLOGICALS
ciclopirox topical susp (LOPROX SUSP equiv)	-	2	DERMATOLOGICALS
cidofovir inj	M	M	ANTIVIRALS
cilostazol tab (PLETAL equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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CILOXAN OPTH OINT	-	3	OPHTHALMIC AGENTS
CIMDUO TAB	-	3	ANTIVIRALS
CIMETIDINE SOLN	-	2	ULCER DRUGS
cimetidine tab (TAGAMET equiv)	-	1	ULCER DRUGS
CIMZIA INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	GASTROINTESTINAL AGENTS - MISC.
CIMZIA STARTER INJ KIT (QL= 1 kit/plan year)	LPSP-PA-QL	5	GASTROINTESTINAL AGENTS - MISC.
cinacalcet tab (SENSIPAR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
CINRYZE INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
CIPRO HC OTIC SUSP	-	4	OTIC AGENTS
CIPRO SUSP 5%	-	NC	FLUOROQUINOLONES
CIPRODEX OTIC SUSP	-	3	OTIC AGENTS
CIPROFLOXACIN 100MG TAB	-	4	FLUOROQUINOLONES
CIPROFLOXACIN ER TAB	-	2	FLUOROQUINOLONES
ciprofloxacin inj	M	M	FLUOROQUINOLONES
ciprofloxacin ophth soln (CILOXAN equiv)	-	2	OPHTHALMIC AGENTS
CIPROFLOXACIN OTIC SOLN	-	2	OTIC AGENTS
ciprofloxacin susp (CIPRO equiv)	-	2	FLUOROQUINOLONES
ciprofloxacin tab (CIPRO equiv)	-	2	FLUOROQUINOLONES
cisatracurium inj	M	M	NEUROMUSCULAR AGENTS
cisplatin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
citalopram soln (CELEXA equiv) (QL= 600ml/30 days)	QL	2	ANTIDEPRESSANTS
citalopram tab (CELEXA equiv) (QL= 1 tab/day)	QL	1	ANTIDEPRESSANTS
CITRANATAL CAP MEDLEY	-	NC	MULTIVITAMINS
cladribine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CLAFORAN INJ	M	M	CEPHALOSPORINS
CLARINEX SYRUP	-	3	ANTIHISTAMINES
CLARINEX-D TAB	-	3	COUGH/COLD/ALLERGY
clarithromycin ER tab (BIAXIN XL equiv) (QL= 28 tabs/30 days)	QL	2	MACROLIDES
CLARITHROMYCIN SUSP	-	2	MACROLIDES
clarithromycin susp (BIAXIN equiv)	-	2	MACROLIDES
clarithromycin tab (BIAXIN equiv)	-	2	MACROLIDES
CLARITIN CAP	OTC	NC	ANTIHISTAMINES
CLARITIN CHEW TAB	-	1	ANTIHISTAMINES
CLARITIN REDITAB	-	NC	ANTIHISTAMINES
CLEMASTINE SYRUP	-	2	ANTIHISTAMINES
CLEMASTINE TAB	-	2	ANTIHISTAMINES
clemastine tab (TAVIST equiv)	-	2	ANTIHISTAMINES
CLENPIQ SOLN	-	3	LAXATIVES
CLEOCIN CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
CLEOCIN VAGINAL SUPP	-	4	VAGINAL PRODUCTS
CLINDAGEL	-	NC	DERMATOLOGICALS
clindamycin cap (CLEOCIN equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
clindamycin foam (EVOCLIN equiv)	-	2	DERMATOLOGICALS
clindamycin gel (CLEOCIN GEL equiv)	-	2	DERMATOLOGICALS
clindamycin inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
clindamycin lotion (CLEOCIN- T equiv)	-	2	DERMATOLOGICALS
clindamycin pad (CLEOCIN-T equiv)	-	2	DERMATOLOGICALS

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	Step Therapy		Vaccine Program		RxCENTS

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clindamycin soln (CLEOCIN equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
clindamycin topical soln (CLEOCIN-T equiv)	-	2	DERMATOLOGICALS
clindamycin vaginal cream (CLEOCIN equiv)	-	2	VAGINAL PRODUCTS
clindamycin/benzoyl peroxide gel (BENZACLIN equiv)	-	2	DERMATOLOGICALS
clindamycin/benzoyl peroxide gel (DUAC GEL equiv)	-	2	DERMATOLOGICALS
clindamycin/tretinoin gel (ZIANA equiv)	-	2	DERMATOLOGICALS
CLINDAREACH KIT	-	2	DERMATOLOGICALS
CLINDESSE VAGINAL CREAM	-	4	VAGINAL PRODUCTS
CLINIMIX E INJ 4.25/D25	M	M	NUTRIENTS
CLINIMIX INJ 4.25/D20	M	M	NUTRIENTS
CLINIMIX INJ 4.25/D25	M	M	NUTRIENTS
CLINIMIX/D10W INJ	M	M	NUTRIENTS
clobazam susp (ONFI equiv)	-	NC	ANTICONVULSANTS
clobazam tab (ONFI equiv)	PA	2	ANTICONVULSANTS
clobetasol foam (OLUX FOAM equiv)	PA	4	DERMATOLOGICALS
clobetasol lotion (CLOBEX LOTION equiv)	PA	4	DERMATOLOGICALS
clobetasol propionate cream (TEMOVATE CREAM equiv)	-	2	DERMATOLOGICALS
clobetasol propionate emollient cream (TEMOVATE E equiv)	-	2	DERMATOLOGICALS
clobetasol propionate gel (TEMOVATE GEL equiv)	-	2	DERMATOLOGICALS
clobetasol propionate oint (TEMOVATE OINT equiv)	-	2	DERMATOLOGICALS
clobetasol propionate soln (TEMOVATE SOLN equiv)	-	2	DERMATOLOGICALS
clobetasol shampoo (CLOBEX SHAMPOO equiv)	PA	4	DERMATOLOGICALS
clobetasol spray (CLOBEX SPRAY equiv)	-	4	DERMATOLOGICALS
CLOBEX LOTION	-	NC	DERMATOLOGICALS
CLOCORTOLONE CREAM	-	4	DERMATOLOGICALS
CLODERM CREAM	-	4	DERMATOLOGICALS
clofarabine inj (CLOLAR equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CLOLAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
clomipramine cap (ANAFRANIL equiv)	-	2	ANTIDEPRESSANTS
clonazepam ODT (KLONOPIN equiv)	-	2	ANTICONVULSANTS
clonazepam tab (KLONOPIN equiv)	-	2	ANTICONVULSANTS
clonidine ER tab (KAPVAY equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
clonidine inj	M	M	ANALGESICS - NONNARCOTIC
clonidine patch (CATAPRES-TTS equiv)	-	2	ANTIHYPERTENSIVES
clonidine tab (CATAPRES equiv)	-	1	ANTIHYPERTENSIVES
clopidogrel tab (PLAVIX equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
CLOPIDOGREL THERAPY PACK	-	NC	HEMATOLOGICAL AGENTS - MISC.
clorazepate tab (TRANXENE-T equiv)	-	2	ANTIANKXIETY AGENTS
clotrimazole cream (LOTRIMINE AF equiv)	-	2	DERMATOLOGICALS
clotrimazole soln	-	2	DERMATOLOGICALS
clotrimazole troches (MYCELEX TROCHES equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
clotrimazole/betamethasone cream (LORTRISONE CREAM equiv)	-	2	DERMATOLOGICALS
clotrimazole/betamethasone lotion (LORTRISONE LOTION equiv)	-	2	DERMATOLOGICALS
CLOZAPINE ODT	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CLOZAPINE ODT 12.5MG	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
clozapine ODT 25mg, 100mg (CLOZAPINE, FAZACLO equiv)	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
clozapine tab (QL= 4 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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Drug Name	Special Code	Tier	Category
clozapine tab (QL= 6 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
clozapine tab (QL= 9 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
COAL TAR SOLN	-	2	DERMATOLOGICALS
COARTEM TAB	-	3	ANTIMALARIALS
COCAINE HCL SOL	-	2	DERMATOLOGICALS
CODEINE PHOSPHATE INJ	M	M	ANALGESICS - OPIOID
CODEINE SULFATE SOLN	-	2	ANALGESICS - OPIOID
CODEINE SULFATE TAB	-	2	ANALGESICS - OPIOID
COLCHICINE CAP	-	NC	GOUT AGENTS
colchicine tab (COLCRYS equiv)	-	NC	GOUT AGENTS
colchicine/probenecid tab (COL-BENEMID equiv)	-	2	GOUT AGENTS
COLCRYS TAB	-	NC	GOUT AGENTS
colesevelam pack (WELCHOL equiv)	-	2	ANTIHYPERLIPIDEMICS
colesevelam tab (WELCHOL equiv)	-	2	ANTIHYPERLIPIDEMICS
colestipol granule (COLESTID equiv)	-	2	ANTIHYPERLIPIDEMICS
colestipol powder packet (COLESTID equiv)	-	2	ANTIHYPERLIPIDEMICS
colestipol tab (COLESTID equiv)	-	2	ANTIHYPERLIPIDEMICS
colistimethate inj (COLY-MYCIN M equiv)	LPSP-M	M	ANTI-INFECTIVE AGENTS - MISC.
COLY-MYCIN S OTIC SUSP	-	4	OTIC AGENTS
COLYTE SOLN	-	3	LAXATIVES
COMBIGAN OPHTH SOLN	-	3	OPHTHALMIC AGENTS
COMBIPATCH	-	4	ESTROGENS
COMBIVENT INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
COMBIVENT RESPIMAT INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
COMETRIQ KIT (Only available through Diplomat Pharmacy 877-977-9118)	LD-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COMPLERA TAB (QL= 1 tab/day)	QL	3	ANTIVIRALS
compound 347 liquid	-	2	GENERAL ANESTHETICS
COMVAX INJ	VAC	6	VACCINES
CONCEPT DHA CAP	-	4	MULTIVITAMINS
CONCEPTROL GEL	OTC	NC	VAGINAL PRODUCTS
CONDYLOX GEL	-	3	DERMATOLOGICALS
CONSENSI TAB	-	NC	CALCIUM CHANNEL BLOCKERS
CONTRACEPTIVE FILM	OTC	6	VAGINAL PRODUCTS
CONTRACEPTIVE FOAM	OTC	6	VAGINAL PRODUCTS
CONTRACEPTIVE GEL	OTC	6	VAGINAL PRODUCTS
CONTRACEPTIVE SUPP	OTC	6	VAGINAL PRODUCTS
COPAXONE INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
COPIKTRA CAP (QL= 2 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COPPER SULFATE INJ	M	M	MINERALS & ELECTROLYTES
CORDRAN CREAM 0.025%	-	4	DERMATOLOGICALS
CORDRAN LOTION	-	NC	DERMATOLOGICALS
CORDRAN OINT	-	NC	DERMATOLOGICALS
CORDRAN TAPE	-	3	DERMATOLOGICALS
CORIFACT KIT	M	M	HEMATOLOGICAL AGENTS - MISC.
CORLANOR SOLN	PA	4	CARDIOVASCULAR AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
CORLANOR TAB	PA	4	CARDIOVASCULAR AGENTS - MISC.
CORLOPAM INJ	-	NC	ANTIHYPERTENSIVES
CORTALO GEL	-	2	DERMATOLOGICALS
CORTANE-B AQUEOUS OTIC SOLN	-	NC	OTIC AGENTS
CORTIFOAM	-	3	ANORECTAL AGENTS
CORTISONE ACETATE TAB	-	3	CORTICOSTEROIDS
CORTISPORIN CREAM	-	4	DERMATOLOGICALS
CORTISPORIN OINT	-	4	DERMATOLOGICALS
CORZIDE TAB 80-5MG	-	4	ANTIHYPERTENSIVES
COSENTYX INJ (1-PACK) (QL= 1 inj/28 days)	LPSP-PA-QL	5	DERMATOLOGICALS
COSENTYX INJ (2-PACK) (QL= 2 inj/28 days)	LPSP-PA-QL	5	DERMATOLOGICALS
cosyntropin inj	M	M	DIAGNOSTIC PRODUCTS
cosyntropin inj (CORTROSYN equiv)	M	M	DIAGNOSTIC PRODUCTS
COTELLIC TAB (QL= 3 tabs/day)	PA-PSP-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COTEMPLA XR ODT	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
COUMADIN TAB	-	4	ANTICOAGULANTS
CREON CAP	-	3	DIGESTIVE AIDS
CRESEMBA CAP	-	NC	ANTIFUNGALS
CRESTOR TAB	-	NC	ANTIHYPERLIPIDEMICS
CRINONE GEL	-	5	VAGINAL PRODUCTS
CRIVAN CAP	-	3	ANTIVIRALS
cromolyn conc (GASTROCROM equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
cromolyn neb soln (INTAL equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
cromolyn ophth soln (CROLOM equiv)	-	2	OPHTHALMIC AGENTS
CROTAN LOTION	-	2	DERMATOLOGICALS
cryselle tab	-	6	CONTRACEPTIVES
CUBICIN INJ	-	NC	ANTI-INFECTIVE AGENTS - MISC.
CUPRIC CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
CUPRIMINE CAP	-	3	MISCELLANEOUS THERAPEUTIC CLASSES
CUTAQUIG INJ	-	NC	PASSIVE IMMUNIZING AND TREATMENT AGENTS
CUTIVATE LOTION	-	NC	DERMATOLOGICALS
CUVITRU INJ	PA-PSP	5	PASSIVE IMMUNIZING AGENTS
CUVPOSA SOLN	-	4	ULCER DRUGS
CYANIDE ANTIDOTE KIT	-	2	ANTIDOTES
cyanocobalamin inj	-	2	HEMATOPOIETIC AGENTS
CYCLOBENZAPRINE COMPOUND KIT	-	2	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine ER cap (AMRIX equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine tab (FLEXERIL equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
cyclopentolate ophth soln (CYCLOGYL equiv)	-	2	OPHTHALMIC AGENTS
cyclophosphamide cap	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
cyclophosphamide inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
cyclophosphamide tab (CYTOXAN equiv)	PA	2	ANTINEOPLASTICS
cycloserine cap (CYCLOSERINE equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
CYCLOSET TAB	-	4	ANTIDIABETICS

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cyclosporine cap (SANDIMMUNE equiv)	-	2	ASSORTED CLASSES
cyclosporine inj	M	M	ASSORTED CLASSES
cyclosporine modified cap (NEORAL equiv)	-	2	ASSORTED CLASSES
cyclosporine modified soln (NEORAL equiv)	-	2	ASSORTED CLASSES
CYCLOSPORINE OPHTH EMULSION	-	NC	OPHTHALMIC AGENTS
cyproheptadine syrup	-	2	ANTIHISTAMINES
cyproheptadine tab	-	2	ANTIHISTAMINES
CYSTADANE POWDER	PA-SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
CYSTAGON CAP (Only available through CVS Specialty 800-238-7828)	LD	5	GENITOURINARY AGENTS - MISCELLANEOUS
CYSTARAN OPHTH SOLN	-	4	OPHTHALMIC AGENTS
cysteine hcl inj	M	M	NUTRIENTS
cytarabine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CYTOGAM INJ	M	M	PASSIVE IMMUNIZING AGENTS
CYTRA-3 SYRUP	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
dacarbazine inj (DACARBAZINE equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dactinomycin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAKLINZA TAB	-	NC	ANTIVIRALS
dalfampridine ER tab (AMPYRA equiv)	LPSP	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DALIRESP TAB	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
danazol cap (DANOCRINE equiv)	-	2	ANDROGENS-ANABOLIC
dantrolene cap (DANTRIUM equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
dapsone gel (ACZONE equiv)	-	NC	DERMATOLOGICALS
dapsone tab	-	2	ANTI-INFECTIVE AGENTS - MISC.
daptomycin inj (CUBICIN equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
DARAPRIM TAB (QL= 3 tabs/day; Only available through Walgreens 888-347-3416)	LD-PA-QL	5	ANTIMALARIALS
darifenacin SR tab (ENABLEX equiv)	-	2	URINARY ANTISPASMODICS
DAUNORUBICIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAUNOXOME INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAURISMO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAXBIA CAP	-	NC	CEPHALOSPORINS
DAYTRANA PATCH (QL= 1 patch/day)	QL	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
DAYVIGO TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
DDAVP NASAL SOLN	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
DEBACTEROL SOLN	-	NC	MOUTH/THROAT/DENTAL AGENTS
decitabine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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DECON-A LIQUID	OTC	NC	COUGH/COLD/ALLERGY
deferasirox tab (EXJADE equiv)	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferasirox tab 180mg (JADENU equiv)	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferasirox tab 90mg, 360mg (JADENU equiv)	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferoxamine inj	M	M	ANTIDOTES
DELSTRIGO TAB	-	4	ANTIVIRALS
DELZICOL CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
demeclocycline tab (DECLOMYCIN equiv)	-	4	TETRACYCLINES
DEMEROL INJ	M	M	ANALGESICS - OPIOID
DENAVIR CREAM	-	4	DERMATOLOGICALS
DEPAKENE CAP	-	4	ANTICONVULSANTS
DEPAKENE SYRUP	-	4	ANTICONVULSANTS
DEPAKOTE ER TAB	-	4	ANTICONVULSANTS
DEPAKOTE SPRINKLE CAP	-	4	ANTICONVULSANTS
DEPAKOTE TAB	-	4	ANTICONVULSANTS
DEPEN TITRATAB	-	4	MISCELLANEOUS THERAPEUTIC CLASSES
DEPOCYT INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DEPODUR INJ	M	M	ANALGESICS - OPIOID
DEPO-ESTRADIOL INJ	-	2	ESTROGENS
DEPO-MEDROL INJ	M	M	CORTICOSTEROIDS
DEPO-PROVERA INJ 400/ML	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DEPO-PROVERA SC INJ 104MG (QL= 1 inj/90 days)	QL	6	CONTRACEPTIVES
DESCOVY TAB	-	5	ANTIVIRALS
desipramine tab (NORPRAMIN equiv)	-	2	ANTIDEPRESSANTS
DESLORATADINE ODT	-	2	ANTIHISTAMINES
desloratadine tab (CLARINEX equiv)	-	2	ANTIHISTAMINES
desmopressin acetate inj (DDAVP equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
desmopressin acetate nasal spray (DDAVP equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
desmopressin acetate tab (DDAVP equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
desmopressin nasal soln (DDAVP equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
DESONATE GEL	-	4	DERMATOLOGICALS
desonide cream (DESOWEN equiv)	-	2	DERMATOLOGICALS
desonide gel	-	NC	DERMATOLOGICALS
desonide lotion	-	NC	DERMATOLOGICALS
desonide oint	-	2	DERMATOLOGICALS
DESOWEN CREAM KIT	-	4	DERMATOLOGICALS
DESOWEN LOTION KIT	-	4	DERMATOLOGICALS
DESOWEN OINT KIT	-	4	DERMATOLOGICALS
desoximetasone cream (TOPICORT CREAM equiv)	-	2	DERMATOLOGICALS
desoximetasone gel (TOPICORT equiv)	-	2	DERMATOLOGICALS
desoximetasone oint (TOPICORT equiv)	-	2	DERMATOLOGICALS
desvenlafaxine ER tab (PRISTIQ equiv) (QL= 4 tabs/day)	QL	2	ANTIDEPRESSANTS
DEXAMETH PHOS INJ	M	M	CORTICOSTEROIDS
DEXAMETHASONE CONC	-	4	CORTICOSTEROIDS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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dexamethasone elixir	-	2	CORTICOSTEROIDS
dexamethasone ophth soln	-	2	OPHTHALMIC AGENTS
DEXAMETHASONE PAK	-	2	CORTICOSTEROIDS
dexamethasone pak (DEXPAK equiv)	-	2	CORTICOSTEROIDS
dexamethasone sodium phosphate inj	M	M	CORTICOSTEROIDS
DEXAMETHASONE SOLN	-	2	CORTICOSTEROIDS
DEXAMETHASONE TAB	-	2	CORTICOSTEROIDS
dexamethasone tab (DECADRON equiv)	-	2	CORTICOSTEROIDS
DEXCOM G6 RECEIVER	-	NC	MEDICAL DEVICES AND SUPPLIES
DEXCOM G6 SENSOR	-	NC	MEDICAL DEVICES AND SUPPLIES
DEXCOM G6 TRANSMITTER	-	NC	MEDICAL DEVICES AND SUPPLIES
DEXFERRUM INJ	M	M	HEMATOPOIETIC AGENTS
DEXILANT CAP	-	NC	ULCER DRUGS
dexmethylphenidate ER cap (FOCALIN XR equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dexmethylphenidate tab (FOCALIN equiv) (QL= 2 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
DEXPAK TAB	-	4	CORTICOSTEROIDS
DEXPANTHENOL INJ	M	M	GASTROINTESTINAL AGENTS - MISC.
dexrazoxane inj (TOTECT equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DEXTENZA OPHTH INSERT	-	NC	OPHTHALMIC AGENTS
DEXTRAN 40/D5W INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
DEXTRAN 70 INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
dextroamphetamine ER cap 10mg (DEXEDRINE CR equiv) (QL= 6 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dextroamphetamine ER cap 15mg (DEXEDRINE CR equiv) (QL= 4 caps/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dextroamphetamine ER cap 5mg (DEXEDRINE CR equiv) (QL= 3 caps/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dextroamphetamine soln (PROCENTRA equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dextroamphetamine tab (DEXEDRINE equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
dextrose inj	M	M	NUTRIENTS
dextrose inj 5%, 10%	M	M	NUTRIENTS
DEXTROSE/ELECTROLYTES INJ	M	M	MINERALS & ELECTROLYTES
dextrose/lactated ringers inj	M	M	MINERALS & ELECTROLYTES
DEXTROSE/NACL INJ	M	M	MINERALS & ELECTROLYTES
dextrose/ringers inj	M	M	MINERALS & ELECTROLYTES
dextrose/sodium chloride inj	M	M	MINERALS & ELECTROLYTES
DIABETIC METER	-	NC	MEDICAL DEVICES AND SUPPLIES
DIACOMIT CAP	-	NC	ANTICONVULSANTS
DIACOMIT POWDER PACK	-	NC	ANTICONVULSANTS
DIAPHRAGM	-	6	MEDICAL DEVICES AND SUPPLIES
DIASTAT PEDIATRIC RECTAL GEL	-	2	ANTICONVULSANTS
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL (QL= 2 packs/fill)	QL	4	ANTICONVULSANTS
diazepam conc (VALIUM equiv)	-	2	ANTIANKXIETY AGENTS
DIAZEPAM INJ	M	M	ANTIANKXIETY AGENTS
DIAZEPAM SOLN	-	2	ANTIANKXIETY AGENTS

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diazepam tab (VALIUM equiv)	-	2	ANTIANKXIETY AGENTS
diazoxide susp (PROGLYCEM equiv)	-	2	ANTIDIABETICS
DICLEGIS TAB	-	NC	ANTIEMETICS
diclofenac gel (SOLARAZE equiv) (QL= 300gm/30 days)	PA-QL	4	DERMATOLOGICALS
diclofenac gel 1% (VOLTAREN equiv)	-	2	DERMATOLOGICALS
DICLOFENAC PATCH, FLECTOR PATCH	-	3	DERMATOLOGICALS
diclofenac potassium tab (CATAFLAM equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
diclofenac sodium EC tab (VOLTAREN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
diclofenac sodium ophth soln (VOLTAREN equiv)	-	2	OPHTHALMIC AGENTS
diclofenac sodium XR tab (VOLTAREN XR equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
diclofenac soln 1.5% (PENNSAID equiv) (QL= 3 bottles/fill)	QL	2	DERMATOLOGICALS
diclofenac/misoprostol DR tab (ARTHROTEC equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
dicloxacillin cap (DYNAPEN equiv)	-	2	PENICILLINS
dicyclomine cap (BENTYL equiv)	-	1	ULCER DRUGS
dicyclomine inj (BENTYL equiv)	M	M	ULCER DRUGS
dicyclomine soln (BENTYL equiv)	-	2	ULCER DRUGS
dicyclomine tab (BENTYL equiv)	-	1	ULCER DRUGS
didanosine DR cap (VIDEX EC equiv)	-	2	ANTIVIRALS
DIDANOSINE DR CAP, VIDEX EC CAP	-	2	ANTIVIRALS
DIFFERIN LOTION	PA	3	DERMATOLOGICALS
DIFFERIN OTC GEL 0.1% (Acne Only – members age 35 or older require Prior Authorization)	OTC-PA	2	DERMATOLOGICALS
DIFICID TAB (QL= 20 tabs/30 days; Step Therapy requires trial of vancomycin cap, vancomycin soln, or FIRVANQ SOLN)	QL-ST	3	MACROLIDES
difil-g forte liquid (BRONDIL equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
DIFLORASONE CREAM	-	NC	DERMATOLOGICALS
diflunisal tab (DOLOBID equiv)	-	2	ANALGESICS - NONNARCOTIC
digoxin inj (LANOXIN equiv)	M	M	CARDIOTONICS
DIGOXIN SOLN	-	2	CARDIOTONICS
digoxin soln (LANOXIN equiv)	-	2	CARDIOTONICS
digoxin tab (LANOXIN equiv)	-	1	CARDIOTONICS
dihydroergotamine mesylate inj (D.H.E. equiv)	-	NC	MIGRAINE PRODUCTS
dihydroergotamine mesylate nasal spray (MIGRANAL equiv) (QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2	MIGRAINE PRODUCTS
DILANTIN CAP 100MG	-	4	ANTICONVULSANTS
DILANTIN CAP 30MG	-	3	ANTICONVULSANTS
DILANTIN INFATABS	-	4	ANTICONVULSANTS
DILANTIN SUSP	-	4	ANTICONVULSANTS
DILATRATE SR CAP	-	3	ANTIANGINAL AGENTS
DILTIAZEM CAP	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (CARDIZEM CD equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (CARDIZEM SR equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (DILACOR XR equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (TIAZAC equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER tab (CARDIZEM LA equiv)	-	2	CALCIUM CHANNEL BLOCKERS
DILTIAZEM INJ	M	M	CALCIUM CHANNEL BLOCKERS
diltiazem inj (CARDIZEM equiv)	M	M	CALCIUM CHANNEL BLOCKERS
diltiazem tab (CARDIZEM equiv)	-	2	CALCIUM CHANNEL BLOCKERS

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DIMENHYDRINATE INJ	M	M	ANTIEMETICS
DIPENTUM CAP	-	4	GASTROINTESTINAL AGENTS - MISC.
diphenhydramine cap 50mg (BENADRYL equiv) (Only 50mg covered)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
diphenhydramine elixer (BENADRYL equiv)	-	2	ANTIHISTAMINES
diphenhydramine inj (BENADRYL equiv)	-	2	ANTIHISTAMINES
DIPHENOXYLATE/ATROPINE LIQUID	-	2	ANTIIDIARRHEAL/PROBIOTIC AGENTS
diphenoxylate/atropine tab (LOMOTIL equiv)	-	2	ANTIIDIARRHEALS
DIPHThERIA-TETANUS PED INJ	-	6	TOXOIDS
dipyridamole inj	M	M	DIAGNOSTIC PRODUCTS
dipyridamole tab (PERSANTINE equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
disopyramide cap (NORPACE equiv)	-	2	ANTIARRHYTHMICS
disopyramide ER cap (NORPACE CR equiv)	-	2	ANTIARRHYTHMICS
disulfiram tab (ANTABUSE equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
divalproex ER tab (DEPAKOTE ER equiv)	-	2	ANTICONVULSANTS
divalproex sodium DR tab (DEPAKOTE equiv)	-	2	ANTICONVULSANTS
divalproex sprinkle cap (DEPAKOTE equiv)	-	2	ANTICONVULSANTS
DIVIGEL GEL, ELESTRIN GEL	-	4	ESTROGENS
dobutamine inj	M	M	VASOPRESSORS
dobutamine/d5w inj	M	M	VASOPRESSORS
DOCEFREZ INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DOCETAXEL INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dofetilide cap (TIKOSYN equiv)	-	2	ANTIARRHYTHMICS
DOJOLVI ORAL LIQUID	-	NC	NUTRIENTS
DOMETUSS-DMX LIQ	-	NC	COUGH/COLD/ALLERGY
donepezil ODT (ARICEPT equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
donepezil tab (ARICEPT equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
donepezil tab 23mg (ARICEPT equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DONNATAL ELIXIR	-	NC	ULCER DRUGS
DONNATAL EXTENTABS	-	NC	ULCER DRUGS
DONNATAL TAB	-	NC	ULCER DRUGS
DOPAMINE INJ	M	M	VASOPRESSORS
dopamine inj (DOPAMINE equiv)	M	M	VASOPRESSORS
dopamine/d5w inj	M	M	VASOPRESSORS
DOPTELET TAB (QL= 2 tabs/day; Only available through PantherRx Pharmacy 855-726-8479)	LD-PA-QL	5	HEMATOPOIETIC AGENTS
DORIBAX INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
DORIPENEM INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
DORYX MPC TAB	-	NC	TETRACYCLINES
dorzolamide ophth soln (TRUSOPT equiv)	-	2	OPHTHALMIC AGENTS
dorzolamide/timolol (pf) ophth soln (COSOPT equiv)	-	2	OPHTHALMIC AGENTS
DOVATO TAB	-	NC	ANTIVIRALS
doxapram inj	M	M	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS

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doxazosin tab (CARDURA equiv)	-	1	ANTIHYPERTENSIVES
DOXEPIN CAP	-	2	ANTIDEPRESSANTS
doxepin cap (SINEQUAN equiv)	-	2	ANTIDEPRESSANTS
doxepin conc (SINEQUAN equiv)	-	2	ANTIDEPRESSANTS
DOXEPIN CREAM, PRUDOXIN CREAM, ZONALON CREAM	-	4	DERMATOLOGICALS
doxepin tab (SILENOR equiv) (QL= 1 tab/day)	QL	3	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
doxercalciferol cap (HECTOROL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
doxercalciferol inj (HECTOROL equiv)	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
DOXORUBICIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DOXYCYCLINE CAP, ORACEA CAP	-	3	DERMATOLOGICALS
doxycycline hyclate cap (VIBRAMYCIN equiv)	-	2	TETRACYCLINES
DOXYCYCLINE HYCLATE DR CAP	-	2	TETRACYCLINES
doxycycline hyclate DR tab (DORYX equiv)	-	2	TETRACYCLINES
doxycycline hyclate DR tab 200mg (DORYX equiv)	-	NC	TETRACYCLINES
doxycycline hyclate inj	M	M	TETRACYCLINES
doxycycline hyclate tab (VIBRATAB equiv)	-	2	TETRACYCLINES
doxycycline hyclate tab 75mg, 150mg (ACTICLATE equiv)	-	NC	TETRACYCLINES
doxycycline monohydrate cap (MONODOX equiv)	-	2	TETRACYCLINES
doxycycline monohydrate tab (ADOXA equiv)	-	2	TETRACYCLINES
doxycycline monohydrate tab 150mg (ADOXA equiv)	-	2	TETRACYCLINES
doxycycline susp (VIBRAMYCIN equiv)	-	2	TETRACYCLINES
doxylamine/pyridoxine dr tab (DICLEGIS equiv)	-	NC	ANTIEMETICS
D-PENAMINE TAB	-	4	ASSORTED CLASSES
DRITHO-SCALP CREAM	-	2	DERMATOLOGICALS
DRITHO-SCALP CREAM	-	3	DERMATOLOGICALS
DRIZALMA DR CAP	-	NC	ANTIDEPRESSANTS
dronabinol cap (MARINOL equiv)	-	2	ANTIEMETICS
droperidol inj	M	M	ANTIAXIETY AGENTS
drosiprenone/ethinyl estradiol/levomefolate tab (BEYAZ equiv)	-	6	CONTRACEPTIVES
drosiprenone/ethinyl estradiol/levomefolate tab (SAFYRAL equiv)	-	6	CONTRACEPTIVES
DROXIA CAP	SP	5	HEMATOPOIETIC AGENTS
DRYSOL SOLN	-	2	DERMATOLOGICALS
DST PLUS PAK KIT	-	NC	DERMATOLOGICALS
DSUVIA SL TAB	-	NC	ANALGESICS - OPIOID
DUAKLIR INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
DUEXIS TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
DULERA INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
duloxetine cap 40mg (IRENKA equiv)	-	NC	ANTIDEPRESSANTS
duloxetine EC cap	-	2	ANTIDEPRESSANTS
duloxetine EC cap (CYMBALTA equiv)	-	2	ANTIDEPRESSANTS
DUOBRII LOTION	-	NC	DERMATOLOGICALS
DUOPA ENTERAL SUSP	-	NC	ANTIPARKINSON AGENTS
DUPIXENT INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	DERMATOLOGICALS
DUPIXENT PEN INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	DERMATOLOGICALS

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DURAXIN CAP	-	2	ANALGESICS - NONNARCOTIC
DUREZOL OPHTH EMULSION	-	3	OPHTHALMIC AGENTS
dutasteride cap (AVODART equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
dutasteride/tamsulosin cap (JALYN equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
DUTOPROL TAB	-	NC	ANTIHYPERTENSIVES
DUZALLO TAB	-	NC	GOUT AGENTS
DVORAH TAB, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE TAB	-	2	ANALGESICS - OPIOID
DXEVO 11-DAY PAK	-	NC	CORTICOSTEROIDS
DYMISTA SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
dyphylline-gg tab (LUFYLLIN-GG equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
DYRENIUM CAP	-	4	DIURETICS
DYSPORT INJ	M	M	NEUROMUSCULAR AGENTS
ECONASIL KIT	-	NC	DERMATOLOGICALS
econazole cream (SPECTAZOLE equiv)	-	2	DERMATOLOGICALS
EDARBI TAB (Step Therapy requires trial of telmisartan, irbesartan, candesartan, losartan or valsartan)	ST	4	ANTIHYPERTENSIVES
EDARBYCLOR TAB (Step Therapy requires trial of telmisartan/hct, irbesartan/hct, candesartan/hct, losartan/hct or valsartan/hct)	ST	4	ANTIHYPERTENSIVES
EDECRIN TAB	-	NC	DIURETICS
ed-flex cap	-	2	ANALGESICS - NONNARCOTIC
EDLUAR SL TAB (QL= 1 tab/day)	QL	4	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
EDURANT TAB	-	5	ANTIVIRALS
efavirenz cap (SUSTIVA equiv)	-	5	ANTIVIRALS
efavirenz tab (SUSTIVA equiv)	-	5	ANTIVIRALS
EFFER-K TAB	-	3	MINERALS & ELECTROLYTES
EGATEN TAB	-	NC	ANTHELMINTICS
EGRIFTA INJ	PA-SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
ELAPRASE INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
ELELYSO INJ	M	M	HEMATOPOIETIC AGENTS
eletriptan tab (RELPAX equiv) (QL= 9 tabs/30 days)	QL	2	MIGRAINE PRODUCTS
ELIDEL CREAM (Covered for members 2 years or older)	-	3	DERMATOLOGICALS
ELIQUIS TAB, ELIQUIS STARTER PACK (QL= 2 tabs/day)	QL	3	ANTICOAGULANTS
ELITEK INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ELIXOPHYLLIN ELIXIR	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ELLA TAB (QL= 2 tabs/365 days)	QL	6	CONTRACEPTIVES
ELMIRON CAP	-	3	GENITOURINARY AGENTS - MISCELLANEOUS
ELSPAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
eluryng vaginal ring (NUVARING equiv)	-	NC	CONTRACEPTIVES
EMADINE OPHTH SOLN	-	4	OPHTHALMIC AGENTS
EMBEDA CAP	-	4	ANALGESICS - OPIOID

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EMCYT CAP	SP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EMEND PAK	-	NC	ANTIEMETICS
EMEND SOLN	-	4	ANTIEMETICS
EMEND SUSP	-	NC	ANTIEMETICS
EMFLAZA SUSP	-	NC	CORTICOSTEROIDS
EMFLAZA TAB	-	NC	CORTICOSTEROIDS
EMGALITY INJ (QL= 1 inj/28 days)	PA-QL	3	MIGRAINE PRODUCTS
EMGALITY INJ 100MG/ML (QL= 3 inj/fill, 6 fills/year)	PA-QL	3	MIGRAINE PRODUCTS
EMSAM PATCH	-	4	ANTIDEPRESSANTS
EMTRIVA CAP	-	5	ANTIVIRALS
EMTRIVA SOLN	-	5	ANTIVIRALS
EMVERM TAB	-	NC	ANTHELMINTICS
enalapril tab (VASOTEC equiv)	-	1	ANTIHYPERTENSIVES
enalapril/hydrochlorothiazide tab (VASERETIC equiv)	-	1	ANTIHYPERTENSIVES
enalaprilat inj	M	M	ANTIHYPERTENSIVES
ENBREL INJ 25MG (QL= 8 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ENBREL INJ 50MG (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ENBREL MINI INJ (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ENBREL SURECLICK INJ 50MG (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ENDARI POWDER PACK	-	NC	HEMATOPOIETIC AGENTS
ENDOMETRIN INSERT	-	3	VAGINAL PRODUCTS
ENGERIX-B INJ	VAC	6	VACCINES
ENGERIX-B INJ, RECOMBIVAX-HB INJ	VAC	6	VACCINES
ENJUVA TAB	-	4	ESTROGENS
enoxaparin inj (LOVENOX equiv) (Limited to 35 day supply/180 days)	QL	2	ANTICOAGULANTS
enpresse tab (TRI-LEVELLEN equiv)	-	6	CONTRACEPTIVES
ENSTILAR FOAM	-	NC	DERMATOLOGICALS
entacapone tab (COMTAN equiv)	-	2	ANTIPARKINSON AGENTS
entecavir tab (BARACLUDE equiv)	LPSP-PA	2	ANTIVIRALS
ENTOCORT EC CAP	-	NC	CORTICOSTEROIDS
ENTRE-B SUSP	OTC	2	COUGH/COLD/ALLERGY
entre-b susp (VAZOBID equiv)	OTC--	2	COUGH/COLD/ALLERGY
ENTRESTO TAB (QL= 2 tabs/day)	QL	3	CARDIOVASCULAR AGENTS - MISC.
ENVARUS XR TAB	-	NC	ASSORTED CLASSES
EPANED PREMIXED SOLN	PA	4	ANTIHYPERTENSIVES
EPANED SOLN	PA	4	ANTIHYPERTENSIVES
EPCLUSA TAB (QL= 1 tab/ day)	LPSP-PA-QL	5	ANTIVIRALS
EPHEDRINE SULFATE INJ	M	M	VASOPRESSORS
EPICERAM EMULSION	-	NC	DERMATOLOGICALS
EPIDIOLEX SOLN (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTICONVULSANTS
EPIDUO FORTE GEL (Acne Only – members age 35 or older require Prior Authorization)	PA	3	DERMATOLOGICALS
epinastine ophth soln (ELESTAT equiv)	-	2	OPHTHALMIC AGENTS
epinephrine inj (ADRENALIN equiv)	M	M	VASOPRESSORS
EPINEPHRINE INJ 0.15MG (QL= 2 inj/fill)	QL	3	VASOPRESSORS
EPINEPHRINE INJ 0.3MG (QL= 2 inj/fill)	QL	3	VASOPRESSORS
epinephrine pen inj 0.15mg, 0.3mg (EPIPEN (JR) equiv) (QL= 2 inj/fill)	QL	2	VASOPRESSORS
EPIPEN (JR) INJ	-	NC	VASOPRESSORS

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epirubicin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EPIVIR HBV SOLN	-	5	ANTIVIRALS
eplerenone tab (INSPRA equiv)	-	2	ANTIHYPERTENSIVES
EPOGEN INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
epoprostenol inj (FLOLAN equiv)	M	M	CARDIOVASCULAR AGENTS - MISC.
eptifibatide inj (INTEGRILIN equiv)	M	M	HEMATOLOGICAL AGENTS - MISC.
EPZICOM TAB	-	NC	ANTIVIRALS
ERAXIS INJ	M	M	ANTIFUNGALS
ERBITUX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERGOCAL CAP	-	NC	VITAMINS
ergoloid mesylates tab (HYDERGINE equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ERGOLOID MESYLATES TAB	-	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ERGOMAR SUB	-	3	MIGRAINE PRODUCTS
ergotamine tartrate/caffeine tab (CAFERGOT equiv)	-	3	MIGRAINE PRODUCTS
ERIVEDGE CAP	PA-PSP-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERLEADA TAB (QL= 4 tabs/day)	LPSP-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
erlotinib tab (TARCEVA equiv)	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERTACZO CREAM	-	4	DERMATOLOGICALS
ertapenem inj (INVANZ equiv)	M	M	ANTI-INFECTIVE AGENTS - MISC.
ERWINAZE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERY PAD	-	2	DERMATOLOGICALS
ERYPED SUSP	-	NC	MACROLIDES
ERYTHROCIN INJ	M	M	MACROLIDES
erythromycin DR cap (ERYC equiv)	-	2	MACROLIDES
ERYTHROMYCIN EC CAP	-	2	MACROLIDES
erythromycin ethylsuccinate susp	-	2	MACROLIDES
erythromycin ethylsuccinate susp (ERYPED equiv)	-	NC	MACROLIDES
ERYTHROMYCIN ETHYLSUCCINATE TAB	-	2	MACROLIDES
erythromycin gel	-	2	DERMATOLOGICALS
erythromycin ophth oint	-	2	OPHTHALMIC AGENTS
erythromycin pad	-	2	DERMATOLOGICALS
erythromycin soln	-	2	DERMATOLOGICALS
erythromycin stearate tab	-	2	MACROLIDES
erythromycin tab (ERY-TAB equiv)	-	2	MACROLIDES
erythromycin tab (ERYTHROMYCIN equiv) (all forms except PCE)	-	2	MACROLIDES
erythromycin/benzoyl peroxide gel	-	2	DERMATOLOGICALS
erythromycin/sulfisoxazole susp (PEDIAZOLE equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
ESBRIET CAP (QL= 9 tabs/day)	LPSP-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
ESBRIET TAB 267MG (QL= 9 tabs/day)	LPSP-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
ESBRIET TAB 801MG (QL= 3 tabs/day)	LPSP-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
ESCAVITE CHEW TAB	-	4	MULTIVITAMINS
escitalopram soln (LEXAPRO equiv) (QL= 600ml/30 days)	QL	2	ANTIDEPRESSANTS

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escitalopram tab (LEXAPRO equiv) (QL= 1 tab/day)	QL	1	ANTIDEPRESSANTS
escitalopram tab 10mg (QL= 1.5 tabs/day)	QL	1	ANTIDEPRESSANTS
ESKATA SOLN	-	NC	DERMATOLOGICALS
esmolol inj (BREVIBLOC equiv)	M	M	BETA BLOCKERS
esomeprazole cap (NEXIUM equiv) (QL= 1 cap/day)	QL	2	ULCER DRUGS
esomeprazole DR granule pack (NEXIUM equiv) (Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	ST	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
ESOMEPRAZOLE STRONTIUM CAP	-	NC	ULCER DRUGS
estazolam tab (PROSOM equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
esterified estrogens/methyltestosterone tab (ESTRATEST equiv)	-	NC	ESTROGENS
estradiol cream (ESTRACE equiv)	-	2	VAGINAL PRODUCTS
estradiol patch (CLIMARA equiv)	-	2	ESTROGENS
estradiol patch (VIVELLE-DOT equiv)	-	2	ESTROGENS
estradiol tab (ESTRACE equiv)	-	1	ESTROGENS
estradiol vaginal tab, yuvaferm vaginal tab (VAGIFEM equiv) (QL= 8 tabs/28 days (18 tabs on first fill))	QL	2	VAGINAL PRODUCTS
estradiol/norethindrone tab (ACTIVEVELLA equiv)	-	2	ESTROGENS
estradoil valerate inj (DELESTROGEN equiv)	-	2	ESTROGENS
ESTRASORB EMULSION	-	4	ESTROGENS
ESTRING (QL= 1 ring/90 days)	QL	3	VAGINAL PRODUCTS
ESTROPIPATE TAB	-	2	ESTROGENS
estropipate tab (OGEN equiv)	-	2	ESTROGENS
eszopiclone tab (LUNESTA equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ethacrynate inj (SODIUM EDECRIN equiv)	M	M	DIURETICS
ethacrynic tab (EDECRIN equiv)	-	4	DIURETICS
ethambutol tab (MYAMBUTOL equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
ethosuximide cap (ZARONTIN equiv)	-	2	ANTICONVULSANTS
ethosuximide soln (ZARONTIN equiv)	-	2	ANTICONVULSANTS
ETHYL CHLOR AER MIST	-	2	DERMATOLOGICALS
ETIDRONATE DISODIUM TAB 400MG	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
etodolac cap (LODINE equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
etodolac ER tab (LODINE XL equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
etodolac tab	-	2	ANALGESICS - ANTI-INFLAMMATORY
etomidate inj	M	M	GENERAL ANESTHETICS
ETOPOPHOS INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ETOPOSIDE CAP	LPSP-PA	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EUCRISA OINT	-	NC	DERMATOLOGICALS
EUFLEXXA INJ	M	M	MUSCULOSKELETAL THERAPY AGENTS
EURAX CREAM	-	3	DERMATOLOGICALS
EURAX LOTION	-	3	DERMATOLOGICALS
EVAMIST SPRAY	-	4	ESTROGENS
EVEKEO ODT	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
EVEKEO TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS

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everolimus tab (AFINITOR equiv)	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
everolimus tab 0.25mg, 0.5mg, 0.75mg (ZORTRESS equiv)	-	2	MISCELLANEOUS THERAPEUTIC CLASSES
EVIVO LIQUID	-	NC	ANTIDIARRHEALS
EVOTAZ TAB	-	5	ANTIVIRALS
exactacain aer	-	2	DERMATOLOGICALS
EXELDERM CREAM, SULCONAZOLE CREAM	-	3	DERMATOLOGICALS
EXELDERM SOLN	-	3	DERMATOLOGICALS
EXELDERM SOLN, SULCONAZOLE SOLN	-	3	DERMATOLOGICALS
exemestane tab (AROMASIN equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EXJADE TAB	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
EXODERM LOTION	-	2	DERMATOLOGICALS
EXTAVIA INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
EYLEA INJ	M	M	OPHTHALMIC AGENTS
EZALLOR SPRINKLE CAP	-	NC	ANTIHYPERLIPIDEMICS
ezetimibe tab (ZETIA equiv)	-	2	ANTIHYPERLIPIDEMICS
ezetimibe/simvastatin tab (VYTORIN equiv) (QL= 1 tab/day (10-80mg is Not Covered))	-	2	ANTIHYPERLIPIDEMICS
ezetimibe/simvastatin tab 10-80mg (VYTORIN equiv)	-	NC	ANTIHYPERLIPIDEMICS
FABRAZYME INJ	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
FACTIVE TAB	-	4	FLUOROQUINOLONES
famciclovir tab 125mg (FAMVIR equiv) (QL= 1 tab/day)	QL	2	ANTIVIRALS
famciclovir tab 250mg (FAMVIR equiv) (QL= 2 tabs/day)	QL	2	ANTIVIRALS
famciclovir tab 500mg (FAMVIR equiv) (QL= 21 tabs/30 days)	QL	2	ANTIVIRALS
famotidine inj (PEPCID equiv)	M	M	ULCER DRUGS
FAMOTIDINE PREMIXED INJ	M	M	ULCER DRUGS
famotidine susp (PEPCID equiv)	-	2	ULCER DRUGS
famotidine tab (PEPCID equiv)	-	1	ULCER DRUGS
FANAPT TAB (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FARESTON TAB	-	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FARXIGA TAB	-	3	ANTIDIABETICS
FARYDAK CAP (QL= 6 caps/21 days)	PA-PSP-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FASENRA PEN INJ (QL= 1 inj/56 days)	LPSP-PA-QL	5	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FASLODEX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FAZACLO ODT 12.5MG, 25MG, 100MG	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
febuxostat tab (ULORIC equiv)	¢	2	GOUT AGENTS
FEIBA VH INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
felbamate susp (FELBATOL equiv)	-	2	ANTICONVULSANTS
felbamate tab (FELBATOL equiv)	-	2	ANTICONVULSANTS
felodipine ER tab (PLENDIL equiv)	-	2	CALCIUM CHANNEL BLOCKERS
FEM PH GEL	-	NC	VAGINAL PRODUCTS
FEMALE CONDOMS	OTC	6	MEDICAL DEVICES AND SUPPLIES
fenofibrate cap 43mg, 130mg (ANTARA equiv)	-	NC	ANTIHYPERLIPIDEMICS

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fenofibrate cap 67mg, 134mg, 200mg (LOFIBRA equiv)	-	1	ANTIHYPERTENSIVES
FENOFIBRATE CAP, LIPOFEN CAP 50MG, 150MG	-	2	ANTIHYPERTENSIVES
fenofibrate tab 40mg, 120mg (FENOGLIDE equiv)	-	NC	ANTIHYPERTENSIVES
fenofibrate tab 48mg, 54mg, 145mg, 160mg (TRICOR equiv)	-	1	ANTIHYPERTENSIVES
fenofibric acid DR cap (TRILIPIX equiv)	-	2	ANTIHYPERTENSIVES
FENOFIBRIC TAB 105MG	-	2	ANTIHYPERTENSIVES
FENOFIBRIC TAB 35MG	-	2	ANTIHYPERTENSIVES
fenoldopam inj (CORLOPAM equiv)	M	M	ANTIHYPERTENSIVES
fenopropfen calcium tab	-	2	ANALGESICS - ANTI-INFLAMMATORY
FENOPROFEN CAP	-	4	ANALGESICS - ANTI-INFLAMMATORY
FENOPROFEN TAB	-	2	ANALGESICS - ANTI-INFLAMMATORY
FENSOLVI INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
fentanyl cit inj	M	M	ANALGESICS - OPIOID
FENTANYL CITRATE INJ	M	M	ANALGESICS - OPIOID
fentanyl citrate lollipop (ACTIQ equiv)	PA	2	ANALGESICS - OPIOID
fentanyl patch (DURAGESIC equiv) (QL= 10 patches/30 days)	QL	2	ANALGESICS - OPIOID
fentanyl patch 37.5mcg, 62.5mcg, 87.5mcg (FENTANYL equiv)	-	NC	ANALGESICS - OPIOID
FENTORA TAB, FENTANYL BUCCAL TAB	-	3	ANALGESICS - OPIOID
FERRAPLUS 90 TAB	-	2	HEMATOPOIETIC AGENTS
FERRETTES IPS SOLN	-	6	HEMATOPOIETIC AGENTS
ferretts tab	-	6	HEMATOPOIETIC AGENTS
ferrex 150 cap	-	6	HEMATOPOIETIC AGENTS
ferrex 150 forte cap	-	2	HEMATOPOIETIC AGENTS
FERRIMIN 150 TAB	-	6	HEMATOPOIETIC AGENTS
FERRIPROX SOLN (Only available through Ferriprox Total Care 866-758-7071)	LD-PA	5	ANTIDOTES
FERRIPROX TAB (Only available through Ferriprox Total Care 866-758-7071)	LD-PA	5	ANTIDOTES
FERRLECIT INJ	-	NC	HEMATOPOIETIC AGENTS
ferrogels fo cap forte	-	2	HEMATOPOIETIC AGENTS
ferrous gluconate tab	-	6	HEMATOPOIETIC AGENTS
ferrous sulfate CR tab	-	6	HEMATOPOIETIC AGENTS
ferrous sulfate EC tab	OTC	6	HEMATOPOIETIC AGENTS
ferrous sulfate elixir (Covered for members 1 year or younger)	OTC	6	HEMATOPOIETIC AGENTS
FERROUS SULFATE LIQUID (Covered for members 1 year or younger)	OTC	6	HEMATOPOIETIC AGENTS
ferrous sulfate soln (Covered for members 1 year or younger)	OTC	6	HEMATOPOIETIC AGENTS
FERROUS SULFATE SYRUP (Covered for members 1 year or younger)	OTC	6	HEMATOPOIETIC AGENTS
ferrous sulfate tab	-	6	HEMATOPOIETIC AGENTS
FETZIMA CAP (QL= 1 cap/day)	PA-QL	4	ANTIDEPRESSANTS
FETZIMA TITRATION PACK (QL= 1 cap/day)	PA-QL	4	ANTIDEPRESSANTS
fexofenadine tab (ALLEGRA equiv)	-	2	ANTIHISTAMINES
FIASP FLEXTOUCH INJ	-	3	ANTIDIABETICS
FIASP INJ	-	3	ANTIDIABETICS
FIASP PENFILL INJ	-	3	ANTIDIABETICS
FIBRICOR TAB	-	4	ANTIHYPERTENSIVES
FIBRIK CAP	-	NC	MULTIVITAMINS
FINACEA FOAM	-	3	DERMATOLOGICALS
FINACEA GEL	-	3	DERMATOLOGICALS
finasteride tab (PROSCAR equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS

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finasteride tab (PROPECIA equiv)	-	NC	DERMATOLOGICALS
FINTEPLA SOLN	-	NC	ANTICONVULSANTS
FIRAZYR INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
FIRDAPSE TAB	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
FIRMAGON INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FIRST ATENOLOL SOLN	-	NC	BETA BLOCKERS
FIRST BACLOFEN SUSP KIT	-	NC	MUSCULOSKELETAL THERAPY AGENTS
FIRST METOPROLOL ORAL SOLN	-	NC	BETA BLOCKERS
FIRST METRONIDAZOLE SUSP	-	4	ANTI-INFECTIVE AGENTS - MISC.
FIRST-VANCOMYCIN SOLN	-	2	ANTI-INFECTIVE AGENTS - MISC.
FIRVANQ SOLN	-	2	ANTI-INFECTIVE AGENTS - MISC.
FLAGYL ER TAB	-	4	ANTI-INFECTIVE AGENTS - MISC.
FLAREX OPHTH SUSP	-	4	OPHTHALMIC AGENTS
flavoxate tab (URISPAS equiv)	-	2	URINARY ANTISPASMODICS
FLEBOGAMMA INJ	M	M	PASSIVE IMMUNIZING AGENTS
flecainide tab (TAMBOCOR equiv)	-	2	ANTIARRHYTHMICS
FLOLIPID SUSP	-	NC	ANTIHYPERLIPIDEMICS
FLORIVA CHEW TAB	-	NC	MULTIVITAMINS
FLORIVA PLUS DROPS	-	2	MULTIVITAMINS
FLOVENT DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLOVENT HFA INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
floxuridine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FLUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUAD QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUBLOK INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUBLOK QUAD PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUCELVAX INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUCELVAX QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
fluconazole susp (DIFLUCAN equiv)	-	2	ANTIFUNGALS
fluconazole tab (DIFLUCAN equiv)	-	2	ANTIFUNGALS
fluconazole tab 150mg (DIFLUCAN equiv)	-	2	ANTIFUNGALS
fluconazole/nacl inj	M	M	ANTIFUNGALS
flucytosine cap (ANCOBON equiv)	-	2	ANTIFUNGALS
fludarabine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
fludrocortisone tab (FLORINEF equiv)	-	2	CORTICOSTEROIDS
FLULAVAL QUAD INJ, FLUZONE QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
flumazenil inj	M	M	ANTIDOTES
FLUMIST QUADRIVALENT NASAL SUSP (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUNISOLIDE NASAL SPRAY (NASAREL equiv) (QL= 2 bottles/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
fluocinolone acetonide cream	-	2	DERMATOLOGICALS
fluocinolone acetonide oil	-	2	DERMATOLOGICALS
fluocinolone acetonide oint	-	2	DERMATOLOGICALS
fluocinolone acetonide soln	-	2	DERMATOLOGICALS
fluocinolone otic oil (DERMOTIC equiv)	-	2	OTIC AGENTS
fluocinonide cream 0.05% (LIDEX equiv)	-	2	DERMATOLOGICALS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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fluocinonide cream 0.1% (VANOS CREAM equiv)	-	NC	DERMATOLOGICALS
fluocinonide emollient cream	-	2	DERMATOLOGICALS
fluocinonide gel	-	2	DERMATOLOGICALS
fluocinonide oint	-	2	DERMATOLOGICALS
fluocinonide soln	-	2	DERMATOLOGICALS
FLUOPAR KIT	-	NC	DERMATOLOGICALS
FLUORABON SOLN (Covered at \$0 for members 5 years or younger; All other members covered at preferred brand copay)	-	6	MINERALS & ELECTROLYTES
FLUORAC CREAM	-	4	DERMATOLOGICALS
FLUOR-A-DAY CHEW TAB	-	3	MINERALS & ELECTROLYTES
fluorescein w/proparacaine ophth soln (FLUORACAINE equiv)	-	2	OPHTHALMIC AGENTS
fluorometholone ophth soln (FML LIQUIFILM equiv)	-	2	OPHTHALMIC AGENTS
FLUOROPLEX CREAM	-	4	DERMATOLOGICALS
fluorouracil cream (EFUDEX CREAM equiv)	-	2	DERMATOLOGICALS
FLUOROURACIL CREAM 0.5%	-	3	DERMATOLOGICALS
FLUOROURACIL SOLN	-	2	DERMATOLOGICALS
FLUOVIX PAK	-	NC	DERMATOLOGICALS
fluoxetine (pmdd) tab (SARAFEM equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
FLUOXETINE CAP (PMDD)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
fluoxetine cap 10mg (PROZAC equiv) (QL= 1 cap/day)	QL	1	ANTIDEPRESSANTS
fluoxetine cap 20mg (PROZAC equiv) (QL= 3 caps/day)	QL	1	ANTIDEPRESSANTS
fluoxetine cap 40mg (PROZAC equiv) (QL= 2 caps/day)	QL	1	ANTIDEPRESSANTS
fluoxetine soln (PROZAC equiv) (QL= 600ml/30 days)	QL	2	ANTIDEPRESSANTS
fluoxetine tab 10mg (PROZAC equiv) (QL= 1 tab/day)	QL	2	ANTIDEPRESSANTS
fluoxetine tab 20mg (PROZAC equiv) (QL= 3 tabs/day)	QL	2	ANTIDEPRESSANTS
FLUOXETINE TAB 60MG (QL= 1 tab/day)	QL	2	ANTIDEPRESSANTS
fluoxetine weekly cap (PROZAC equiv) (QL= 4 caps/28 days)	QL	2	ANTIDEPRESSANTS
fluphenazine decanoate inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FLUPHENAZINE ELIXIR	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
fluphenazine inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FLUPHENAZINE ORAL CONC	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
fluphenazine tab (PROLIXIN equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
flurandrenolide Cream (CORDRAN equiv)	-	4	DERMATOLOGICALS
flurandrenolide lotion (CORDRAN equiv)	-	2	DERMATOLOGICALS
flurandrenolide oint (CORDRAN equiv)	-	2	DERMATOLOGICALS
FLURAZEPAM CAP	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
FLURBIPROFEN OPHTH SOLN	-	2	OPHTHALMIC AGENTS
flurbiprofen ophth soln (OCUFEN equiv)	-	2	OPHTHALMIC AGENTS
flurbiprofen tab (ANSAID equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
flutamide cap (EULEXIN equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
fluticasone nasal spray (FLONASE equiv) (QL= 1 bottle/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
fluticasone propionate cream (CUTIVATE equiv)	-	2	DERMATOLOGICALS
fluticasone propionate lotion (CUTIVATE equiv)	-	NC	DERMATOLOGICALS
fluticasone propionate oint (CUTIVATE equiv)	-	2	DERMATOLOGICALS
FLUTICASONE/SALMETEROL INHALER	-	2	ASTHMA AND BRONCHODILATOR AGENTS

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fluticasone/salmeterol inhaler (ADVAIR equiv)	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
fluvastatin cap (LESCOL equiv)	-	2	ANTIHYPERLIPIDEMICS
fluvastatin ER tab (LESCOL XL equiv)	-	NC	ANTIHYPERLIPIDEMICS
FLUVIRIN INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUVIRIN PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
fluvoxamine tab 100mg (LUVOX equiv) (QL= 3 tabs/day)	QL	2	ANTIDEPRESSANTS
fluvoxamine tab 25mg, 50mg (LUVOX equiv) (QL= 2 tabs/day)	QL	2	ANTIDEPRESSANTS
FLUZONE HD PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUZONE HIGH DOSE PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUZONE INTRADERMAL INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUZONE QUADRIVALENT INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUZONE SPLIT QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FLUZONE/FLUARIX QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6	VACCINES
FML S.O.P. OPHTH OINT	-	3	OPHTHALMIC AGENTS
folbee tab	-	2	HEMATOPOIETIC AGENTS
folbee tab (FOLGARD RX equiv)	-	2	HEMATOPOIETIC AGENTS
folic acid cap 800mcg	OTC	NC	HEMATOPOIETIC AGENTS
folic acid inj (FOLIC ACID equiv)	M	M	HEMATOPOIETIC AGENTS
folic acid tab 1mg (Covered at \$0 for females only; All other members covered at generic copay)	-	6	HEMATOPOIETIC AGENTS
folic acid tab 400mcg (Covered for females only)	OTC	6	HEMATOPOIETIC AGENTS
folic acid tab 800mcg (Covered for females only)	OTC	6	HEMATOPOIETIC AGENTS
FOLIKA-V TAB	-	NC	MULTIVITAMINS
FOLITE TAB	-	NC	HEMATOPOIETIC AGENTS
FOLOTYN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FOLTRATE TAB	-	3	HEMATOPOIETIC AGENTS
folvite-d tab (GENICIN equiv)	-	NC	HEMATOPOIETIC AGENTS
FOLVITE-FE TAB	-	NC	HEMATOPOIETIC AGENTS
fomepizole inj	M	M	ANTIDOTES
fondaparinux inj (ARIXTRA equiv)	-	2	ANTICOAGULANTS
FORFIVO XL TAB (QL= 1 tab/day)	QL	4	ANTIDEPRESSANTS
formaldehyde soln	-	2	ANTISEPTICS & DISINFECTANTS
FORTAZ INJ	M	M	CEPHALOSPORINS
FORTEO INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
FORTESTA GEL 2% (Step therapy requires trial of ANDROGEL equiv)	ST	4	ANDROGENS-ANABOLIC
FORTICAL NASAL SPRAY (QL= 1 bottle/30 days)	QL	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
FOSAMAX+D TAB	-	3	ENDOCRINE AND METABOLIC AGENTS - MISC.
fosamprenavir tab (LEXIVA equiv)	-	5	ANTIVIRALS
fosaprepitant dimeglumine soln (EMEND equiv)	-	2	ANTIEMETICS
FOSCARNET INJ	M	M	ANTIVIRALS
fosinopril tab (MONOPRIL equiv)	-	2	ANTIHYPERTENSIVES
fosinopril/hydrochlorothiazide tab (MONOPRIL HCT equiv)	-	2	ANTIHYPERTENSIVES
fosphenytoin sodium inj	M	M	ANTICONVULSANTS
FOSRENOL POWDER PACK	-	3	GASTROINTESTINAL AGENTS - MISC.
FRAGMIN INJ (Limited to 35 day supply/180 days)	QL	4	ANTICOAGULANTS

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FREAMINE III INJ	M	M	NUTRIENTS
FREESTYLE INSULIN SYRINGE	-	3	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE RECEIVER	-	NC	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE SENSOR (10-DAY)	-	NC	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE SENSOR (14-DAY)	-	NC	MEDICAL DEVICES AND SUPPLIES
FRENADOL TAB	-	2	ANALGESICS - NONNARCOTIC
FROVA TAB	-	NC	MIGRAINE PRODUCTS
frovatriptan tab (FROVA equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan, or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
FULPHILA INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
fulvestrant inj (FASLODEX equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
furosemide inj (LASIX equiv)	M	M	DIURETICS
FUROSEMIDE SOLN	-	2	DIURETICS
furosemide soln (LASIX equiv)	-	2	DIURETICS
furosemide tab (LASIX equiv)	-	1	DIURETICS
FUSILEV INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FUZEON INJ	LPSP	5	ANTIVIRALS
FYCOMPA TAB	PA	4	ANTICONVULSANTS
FYCOMPA SUSP	PA	4	ANTICONVULSANTS
gabapentin cap (NEURONTIN equiv)	-	2	ANTICONVULSANTS
gabapentin soln (NEURONTIN equiv)	-	2	ANTICONVULSANTS
gabapentin tab (NEURONTIN equiv)	-	2	ANTICONVULSANTS
GABAPENTIN/NAPROXEN CREAM COMPOUND KIT	-	NC	DERMATOLOGICALS
GALAFOLD CAP (QL= 15 caps/30 days; Only available through Walgreens 888-347-3416)	LD-PA-QL	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
galantamine ER cap (RAZADYNE ER equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GALANTAMINE SOLN	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
galantamine tab (RAZADYNE equiv)	¢	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GALZIN CAP	-	4	MINERALS & ELECTROLYTES
GAMASTAN S/D INJ	M	M	PASSIVE IMMUNIZING AGENTS
GAMMAGARD SD INJ	M	M	PASSIVE IMMUNIZING AGENTS
GAMMAKED INJ	M	M	PASSIVE IMMUNIZING AGENTS
ganciclovir inj	M	M	ANTIVIRALS
GANITE INJ	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
GARDASIL 9 INJ	VAC	6	VACCINES
GARDASIL INJ	VAC	6	VACCINES
gatifloxacin ophth soln (Zymaxid equiv)	-	2	OPHTHALMIC AGENTS
GATTEX KIT	PA	5	GASTROINTESTINAL AGENTS - MISC.
GAVILYTE-C SOLN (Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay)	QL	6	LAXATIVES
gavilyte-h kit	-	2	LAXATIVES
GELNIQUE	-	3	URINARY ANTISPASMODICS
GELNIQUE	-	4	URINARY ANTISPASMODICS
gemcitabine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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gemfibrozil tab (LOPID equiv)	-	2	ANTIHYPERTENSIVES
GEN7T LOTION	-	NC	DERMATOLOGICALS
GEN7T PLUS LOTION	-	NC	DERMATOLOGICALS
GEN7T PLUS PAD	-	NC	DERMATOLOGICALS
GENOTROPIN INJ, HUMATROPE INJ, ZOMACTON INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
GENTAK OPHTH OINT	-	2	OPHTHALMIC AGENTS
gentamicin inj	M	M	AMINOGLYCOSIDES
gentamicin ophth oint (GARAMYCIN equiv)	-	2	OPHTHALMIC AGENTS
gentamicin ophth soln (GARAMYCIN equiv)	-	2	OPHTHALMIC AGENTS
gentamicin sulfate cream	-	2	DERMATOLOGICALS
gentamicin sulfate oint	-	2	DERMATOLOGICALS
gentamycin/nacl inj	M	M	AMINOGLYCOSIDES
GENVOYA TAB	-	3	ANTIVIRALS
GEODON INJ	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
GIALAX KIT	-	NC	LAXATIVES
gianvi tab, ocella tab (YASMIN, YAZ equiv)	-	6	CONTRACEPTIVES
GIAZO TAB	-	4	GASTROINTESTINAL AGENTS - MISC.
GILENYA CAP	LPSP-QL	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GILOTRIF TAB (QL= 1 tab/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GILTUSS LIQUID	-	4	COUGH/COLD/ALLERGY
GILTUSS TR TAB	-	4	COUGH/COLD/ALLERGY
GLASSIA INJ	M	M	RESPIRATORY AGENTS - MISC.
glatiramer inj (COPAXONE equiv)	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GLEEVEC TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GLEOSTINE/LOMUSTINE CAP	LPSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GLIADEL WAFER	-	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
glimepiride tab (AMARYL equiv)	-	1	ANTIDIABETICS
glipizide ER tab (GLUCOTROL XL equiv)	-	1	ANTIDIABETICS
glipizide tab (GLUCOTROL equiv)	-	1	ANTIDIABETICS
glipizide/metformin tab (METAGLIP equiv)	-	2	ANTIDIABETICS
GLOPERBA SOLN	-	NC	GOUT AGENTS
GLUCAGEN HYPOKIT INJ	-	4	ANTIDIABETICS
GLUCAGEN INJ	-	4	DIAGNOSTIC PRODUCTS
GLUCAGON DIAGNOSTIC INJ	-	NC	DIAGNOSTIC PRODUCTS
GLUCAGON EMR INJ	-	NC	ANTIDIABETICS
GLUCAGON INJ KIT	-	3	ANTIDIABETICS
GLUCOCARD EXPRESSION CONTROL SOLUTION	OTC	1	MEDICAL DEVICES AND SUPPLIES
GLUCOCARD EXPRESSION METER	OTC	1	MEDICAL DEVICES AND SUPPLIES
GLUCOCARD EXPRESSION TEST STRIP	OTC	2	DIAGNOSTIC PRODUCTS
GLUCOCARD SHINE CONTROL SOLUTION	OTC	1	MEDICAL DEVICES AND SUPPLIES
GLUCOCARD SHINE METER	OTC	1	MEDICAL DEVICES AND SUPPLIES
GLUCOCARD SHINE TEST STRIP	OTC	2	DIAGNOSTIC PRODUCTS
glyburide micronized tab (GLYNASE equiv)	-	1	ANTIDIABETICS

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glyburide tab (MICRONASE equiv)	-	1	ANTIDIABETICS
glyburide/metformin tab (GLUCOVANCE equiv)	-	2	ANTIDIABETICS
GLYCATE TAB, GLYCOPYRROLATE TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
glycopyrrolate inj (ROBINUL equiv)	M	M	ULCER DRUGS
glycopyrrolate tab (ROBINUL equiv)	-	2	ULCER DRUGS
GLYGEST PAK	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
GLYSET TAB	-	NC	ANTIDIABETICS
GLYXAMBI TAB (QL= 1 tab/day)	QL	3	ANTIDIABETICS
GOCOVRI CAP	-	NC	ANTIPARKINSON AGENTS
GOLYTELY PACKET	-	3	LAXATIVES
GONITRO POWDER	-	NC	ANTIANGINAL AGENTS
GOPRELTO SOLN	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
GRALISE STARTER PACK	-	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GRALISE TAB	-	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GRANISETRON INJ	M	M	ANTIEMETICS
granisetron inj (KYTRIL equiv)	M	M	ANTIEMETICS
granisetron tab (KYTRIL equiv) (QL= 14 tabs/fill)	QL	2	ANTIEMETICS
GRANISOL SOLN (QL= 60ml/fill)	QL	4	ANTIEMETICS
GRANIX INJ	-	NC	HEMATOPOIETIC AGENTS
GRASTEK SL TAB	-	NC	BIOLOGICALS MISC
griseofulvin micro tab (GRIFULVIN V equiv)	-	2	ANTIFUNGALS
griseofulvin susp (GRIFULVIN equiv)	-	2	ANTIFUNGALS
griseofulvin tab (GRIS-PEG equiv)	-	2	ANTIFUNGALS
GUAIFENESIN/CODEINE SYRUP	OTC	2	COUGH/COLD/ALLERGY
guaifenesin/codeine syrup (TUSSI-ORGANIDIN-S equiv)	OTC	2	COUGH/COLD/ALLERGY
GUANABENZ TAB	-	1	ANTIHYPERTENSIVES
guanfacine ER tab (INTUNIV TAB equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
guanfacine IR tab (TENEX equiv)	-	1	ANTIHYPERTENSIVES
GUANIDINE TAB	-	1	ANTIMYASTHENIC/CHOLINERGIC AGENTS
GVOKE INJ (QL= 2 inj/fill)	QL	3	ANTIDIABETICS
GVOKE PFS INJ (QL= 2 inj/fill)	QL	3	ANTIDIABETICS
GYNAZOLE-1 CREAM	-	3	VAGINAL PRODUCTS
HAEGARDA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
HALAC KIT	-	3	DERMATOLOGICALS
HALAVEN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
halcinonide cream (HALOG equiv)	-	NC	DERMATOLOGICALS
HALFLYTELY BOWEL PREP KIT	-	3	LAXATIVES
halobetasol propionate cream (ULTRAVATE equiv)	-	2	DERMATOLOGICALS
halobetasol propionate oint (ULTRAVATE equiv)	-	2	DERMATOLOGICALS
HALOG CREAM	-	NC	DERMATOLOGICALS
HALOG OINT	-	NC	DERMATOLOGICALS
HALOG SOLN	-	NC	DERMATOLOGICALS
halonate pac kit (ULTRAVATE KIT equiv)	-	2	DERMATOLOGICALS

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haloperidol decanoate inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
haloperidol lactate conc (HALDOL equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
haloperidol lactate inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
haloperidol tab (HALDOL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
HARVONI PELLETT PAK	-	NC	ANTIVIRALS
HARVONI TAB (QL= 1 tab/ day)	LPSP-PA-QL	5	ANTIVIRALS
HAVRIX INJ, VAQTA INJ	VAC	6	VACCINES
HC-LIDOCAINE CREAM	-	NC	DERMATOLOGICALS
HELIDAC PACK	-	NC	ULCER DRUGS
HEMLIBRA INJ	LPSP-PA	5	HEMATOLOGICAL AGENTS - MISC.
HEMOPIL M INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
hemocyte-f tab	-	2	HEMATOPOIETIC AGENTS
heparin lock flush	M	M	ANTICOAGULANTS
heparin sodium inj	M	M	ANTICOAGULANTS
heparin sodium/nacl inj	M	M	ANTICOAGULANTS
HEPARIN/D5W INJ	M	M	ANTICOAGULANTS
heparin/d5w inj (HEPARIN/ D5W equiv)	M	M	ANTICOAGULANTS
HEPLISAV-B INJ	VAC	6	VACCINES
HERCEPTIN HYLECTA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HERCEPTIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
hetastarch inj	M	M	HEMATOLOGICAL AGENTS - MISC.
HEXALEN CAP	SP	5	ANTINEOPLASTICS
HIZENTRA INJ	PA-PSP	5	PASSIVE IMMUNIZING AGENTS
homatropine ophth soln (ISOPTO HOMATROPINE equiv)	-	2	OPHTHALMIC AGENTS
HONEY BEE INJ	M	M	BIOLOGICALS MISC
HORIZANT TAB	-	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
HUMALOG INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
HUMALOG KWIKPEN INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
HUMALOG MIX INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
HUMALOG MIX KWIKPEN INJ, INSULIN LISPRO PROTAMINE INJ (Step The requires trial of NOVOLOG or INSULIN ASPART)	ST	4	ANTIDIABETICS
HUMALOG PEN INJ (Step Therapy requires trial of NOVOLOG)	ST	4	ANTIDIABETICS
HUMATE-P INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
HUMIRA INJ 10MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ 20MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ 40MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK (QL= 1 pack/fill, fill/plan year)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK (QL= 1 pack/fill, 1 fill/plan year)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK (QL= 1 pack/fill, 1 fill/plan year)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA PEN INJ 40MG (QL= 2 pens/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
HUMULIN MIX INJ (Step Therapy requires trial of NOVOLIN)	ST	4	ANTIDIABETICS
HUMULIN MIX PEN INJ (Step Therapy requires trial of NOVOLIN)	ST	4	ANTIDIABETICS

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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HUMULIN N INJ	-	3	ANTIDIABETICS
HUMULIN N PEN INJ	-	3	ANTIDIABETICS
HUMULIN R INJ (Step Therapy requires trial of NOVOLIN)	ST	4	ANTIDIABETICS
HUMULIN R INJ U-500	-	3	ANTIDIABETICS
HUMULIN R U-500 KWIKPEN INJ	-	3	ANTIDIABETICS
HURRISEAL MIS SNAP	-	NC	MEDICAL DEVICES AND SUPPLIES
HYALGAN INJ	M	M	MUSCULOSKELETAL THERAPY AGENTS
HYALURONATE GEL	-	2	DERMATOLOGICALS
HYCANTIN CAP	LPSP-PA	5	ANTINEOPLASTICS
HYCLODEX SOLN	-	NC	DERMATOLOGICALS
HYCOFENIX SOLN	-	NC	COUGH/COLD/ALLERGY
hydralazine inj	M	M	ANTIHYPERTENSIVES
hydralazine tab (APRESOLINE equiv)	-	2	ANTIHYPERTENSIVES
hydrochlorothiazide cap (MICROZIDE equiv)	-	1	DIURETICS
hydrochlorothiazide tab (HYDRODIURIL equiv)	-	1	DIURETICS
hydrocodone bitartrate ER cap (ZOHYDRO equiv)	-	NC	ANALGESICS - OPIOID
hydrocodone/acetaminophen cap (LORCET equiv)	-	2	ANALGESICS - OPIOID
hydrocodone/acetaminophen soln (HYCET, LORTAB equiv)	-	2	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab	-	2	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab (LORTAB equiv)	-	2	ANALGESICS - OPIOID
hydrocodone/chlorpheniramine CR susp (TUSSIONEX equiv)	-	2	COUGH/COLD/ALLERGY
HYDROCODONE/CHLORPHENIRAMINE/PSEUDOEPHEDRINE LIQUID	-	2	COUGH/COLD/ALLERGY
hydrocodone/chlorpheniramine/pseudoephedrine liquid (ZUTRIPRO equiv)	-	2	COUGH/COLD/ALLERGY
hydrocodone/homatropine syrup (HYCODAN equiv)	-	2	COUGH/COLD/ALLERGY
hydrocodone/ibuprofen tab (VICOPROFEN equiv)	-	2	ANALGESICS - OPIOID
hydrocortisone butyrate cream (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone butyrate lipocream (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone butyrate oint (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone butyrate soln (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone cream (PROCTOCORT equiv)	-	2	DERMATOLOGICALS
hydrocortisone enema (CORTENEMA equiv)	-	2	ANORECTAL AGENTS
hydrocortisone lotion (LOCOID equiv)	-	2	DERMATOLOGICALS
hydrocortisone lotion (HYTONE equiv)	-	2	DERMATOLOGICALS
hydrocortisone oint	-	2	DERMATOLOGICALS
hydrocortisone supp (ANUSOL HC equiv)	-	NC	ANORECTAL AGENTS
hydrocortisone tab (CORTEF equiv)	-	2	CORTICOSTEROIDS
hydrocortisone valerate cream	-	NC	DERMATOLOGICALS
hydrocortisone valerate oint (WESTCORT equiv)	-	NC	DERMATOLOGICALS
hydrocortisone/aloe gel (NUZON equiv)	-	2	DERMATOLOGICALS
hydrocortisone/pramoxine cream 2.5-1% (PRAMOSONE equiv)	-	NC	DERMATOLOGICALS
hydrogen peroxide soln	-	2	ANTISEPTICS & DISINFECTANTS
hydromorphone ER tab (EXALGO equiv)	-	2	ANALGESICS - OPIOID
HYDROMORPHONE INJ	M	M	ANALGESICS - OPIOID
hydromorphone liquid	-	2	ANALGESICS - OPIOID
HYDROMORPHONE SUPP	-	2	ANALGESICS - OPIOID
hydromorphone tab (DILAUDID equiv)	-	2	ANALGESICS - OPIOID
hydroquinone cream (LUSTRA equiv)	-	2	DERMATOLOGICALS
hydroquinone gel	-	2	DERMATOLOGICALS
hydroquinone micro cream	-	2	DERMATOLOGICALS
hydroquinone/sunscreen cream	-	2	DERMATOLOGICALS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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HYDROXOCOBALAMIN INJ	M	M	HEMATOPOIETIC AGENTS
hydroxychloroquine tab (PLAQUENIL equiv)	-	2	ANTIMALARIALS
HYDROXYPROGESTERONE CAPROATE INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
hydroxyprogesterone inj (MAKENA equiv)	M	M	PROGESTINS
hydroxyurea cap (HYDREA equiv)	-	2	ANTINEOPLASTICS
hydroxyzine pamoate cap (VISTARIL equiv)	-	2	ANTIAXIETY AGENTS
HYDROXYZINE PAMOATE CAP 100MG	-	2	ANTIAXIETY AGENTS
hydroxyzine syrup (ATARAX equiv)	-	2	ANTIAXIETY AGENTS
hydroxyzine tab (ATARAX equiv)	-	2	ANTIAXIETY AGENTS
HYDXOZYLINE INJ	M	M	ANTIAXIETY AGENTS
HYLAMEND GEL FIRST AID	-	NC	ANTISEPTICS & DISINFECTANTS
HYLINATE LOTION	-	NC	DERMATOLOGICALS
hyophen tab (PROSED DS equiv)	-	2	URINARY ANTI-INFECTIVES
HYOPHEN TAB	-	NC	URINARY ANTI-INFECTIVES
hyoscyamine inj (LEVSIN equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
hyoscyamine sulfate CR tab (LEVBID equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate elixir (LEVSIN equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate ODT (ANASPAZ equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate SL tab (LEVSIN equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate soln (LEVSIN equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate SR cap (LEVSINEX equiv)	-	2	ULCER DRUGS
hyoscyamine sulfate tab (LEVSIN equiv)	-	2	ULCER DRUGS
hyoscyamine tab (LEVSIN equiv)	-	2	URINARY ANTISPASMODICS
HYPERHEP B INJ S/D	M	M	PASSIVE IMMUNIZING AGENTS
HYQVIA INJ	PA-PSP	5	PASSIVE IMMUNIZING AGENTS
HYSINGLA ER TAB	-	NC	ANALGESICS - OPIOID
ibandronate tab 150mg (BONIVA equiv) (QL= 1 tab/28 days)	QL	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
IBRANCE CAP (QL= 21 caps/28 days)	PA-PSP-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IBRANCE TAB (QL= 1 tabs/day)	PA-PSP-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IBU 600-EZS KIT	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen susp (Rx ONLY) (ADVIL, MOTRIN equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen tab	-	1	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen tab ((RX Only))	-	1	ANALGESICS - ANTI-INFLAMMATORY
ibutilide inj (CORVERT equiv)	M	M	ANTIARRHYTHMICS
icatibant inj (FIRAZYR equiv)	M	M	HEMATOLOGICAL AGENTS - MISC.
ICLUSIG TAB (Only available through AcariaHealth 800-511-5144)	LD-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
idarubicin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IDHIFA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IFEX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ifosfamide inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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IFOSFAMIDE/MESNA KIT	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ILARIS INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
imatinib tab (GLEEVEC equiv)	LPSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA CAP 140MG (QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA CAP 70MG (QL= 1 cap/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA TAB (QL= 1 tab/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
imipenem/cilastatin inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
imipramine pamoate cap (TOFRANIL PM equiv)	-	2	ANTIDEPRESSANTS
imipramine tab (TOFRANIL equiv)	-	2	ANTIDEPRESSANTS
imiquimod cream (ALDARA equiv)	-	2	DERMATOLOGICALS
IMITREX NASAL SPRAY, SUMATRIPTAN NASAL SPRAY	-	NC	MIGRAINE PRODUCTS
IMOGAM RABIES-HT INJ	M	M	PASSIVE IMMUNIZING AND TREATMENT AGENTS
IMOVAX RABIES INJ	VAC	6	VACCINES
IMPAVIDO CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
IMPLANON IMPLANT, NEXPLANON IMPLANT	-	6	CONTRACEPTIVES
IMPOYZ CREAM	-	NC	DERMATOLOGICALS
IMVEXXY SUPP	-	NC	VAGINAL PRODUCTS
INBRIJA INH POWDER	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
INCIVEK TAB	-	NC	ANTIVIRALS
INCRELEX INJ	PA-PSP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
INCRUSE ELLIPTA INHALER	-	3	ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS
indapamide tab (LOZOL equiv)	-	1	DIURETICS
INDERAL XL CAP, INNOPRAN XL CAP	-	4	BETA BLOCKERS
indomethacin cap (INDOCIN equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
INDOMETHACIN CAP, TIVORBEX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
indomethacin CR cap (INDOCIN SR equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
indomethacin inj	M	M	ANALGESICS - ANTI-INFLAMMATORY
INFLAMMA-K KIT	-	NC	DERMATOLOGICALS
INFLATHERM PAK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
INFLUENZA H1N1 INJ	VAC	6	VACCINES
INFUMORPH INJ	M	M	ANALGESICS - OPIOID
INFUVITE INJ	M	M	MULTIVITAMINS
INGREZZA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
INGREZZA PACK 40-80MG	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
INLYTA TAB	PA-PSP-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INREBIC CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INSULIN ASPART FLEXPEN INJ (NOVOLOG equiv)	-	3	ANTIDIABETICS
INSULIN ASPART INJ (NOVOLOG equiv)	-	3	ANTIDIABETICS

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PSP	Medical Benefit	QL	Over-the-Counter	RS	Prior Authorization
SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
ST	Limited to two 15 day fills per month for first 3 months	VAC	Smoking Cessation	¢	Available through Specialty Pharmacy Program
	Step Therapy		Vaccine Program		RxCENTS

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INSULIN ASPART MIX FLEXPEN INJ (NOVOLOG equiv)	-	3	ANTIDIABETICS
INSULIN ASPART MIX INJ (NOVOLOG equiv)	-	3	ANTIDIABETICS
INSULIN ASPART PENFILL INJ (NOVOLOG equiv)	-	3	ANTIDIABETICS
INSULIN SYRINGE	-	NC	MEDICAL DEVICES AND SUPPLIES
INSULIN SYRINGE (all other brands)	-	NC	MEDICAL DEVICES AND SUPPLIES
INTELENCE TAB	-	5	ANTIVIRALS
INTRALIPID INJ	M	M	NUTRIENTS
INTRAROSA SUPP	-	NC	VAGINAL PRODUCTS
INTRON-A INJ	PA-PSP	5	ANTINEOPLASTICS
INTUNIV TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
INVANZ INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
INVEGA INJ	-	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
INVEGA TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
INVELTYS OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
INVIRASE CAP	-	5	ANTIVIRALS
INVIRASE TAB	-	5	ANTIVIRALS
INVOKAMET TAB	-	NC	ANTIDIABETICS
INVOKAMET XR TAB	-	NC	ANTIDIABETICS
INVOKANA TAB	-	NC	ANTIDIABETICS
iodine soln	-	2	ANTISEPTICS & DISINFECTANTS
IODINE STRONG SOLN	-	2	MINERALS & ELECTROLYTES
IODINE TINCTURE	-	2	ANTISEPTICS & DISINFECTANTS
iodoquinol/hydrocortisone cream 1% (VYTONA equiv)	-	NC	DERMATOLOGICALS
iodoquinol/hydrocortisone cream 1.9-1% (VYTONA equiv)	-	NC	DERMATOLOGICALS
iodoquinol/hydrocortisone/aloe polysaccharide gel (ALCORTIN A equiv)	-	NC	DERMATOLOGICALS
IOPIDINE OPHTH SOLN 1%	-	4	OPHTHALMIC AGENTS
IPOL INJ	VAC	6	VACCINES
ipratropium nasal spray (ATROVENT equiv) (QL= 60gm/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
ipratropium neb soln (ATROVENT equiv) (QL= 125 nebs/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
irbesartan tab (AVAPRO equiv)	-	1	ANTIHYPERTENSIVES
irbesartan/hydrochlorothiazide tab (AVALIDE equiv)	-	1	ANTIHYPERTENSIVES
IRESSA TAB (Only available through Lumicera Pharmacy 855-847-3553)	LD-PA	5	ANTINEOPLASTICS
irinotecan inj (CAMPTOSAR equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IRON SUSP (Covered for members 1 year or younger)	OTC	6	HEMATOPOIETIC AGENTS
ISENTRESS (HD) TAB	-	5	ANTIVIRALS
ISENTRESS CHEW TAB	-	5	ANTIVIRALS
isibloom tab, enskyce tab, apri tab (DESOGEN equiv)	-	6	CONTRACEPTIVES
isoflurane soln	-	2	GENERAL ANESTHETICS
isolyte-m inj	M	M	MINERALS & ELECTROLYTES
ISOLYTE-S INJ	M	M	MINERALS & ELECTROLYTES
ISOMETHEPTENE/CAFFEINE/ACETAMINOPHEN TAB	-	NC	MIGRAINE PRODUCTS
ISONIAZID INJ	M	M	ANTIMYCOBACTERIAL AGENTS
ISONIAZID SYRUP	-	2	ANTIMYCOBACTERIAL AGENTS
ISONIAZID TAB	-	2	ANTIMYCOBACTERIAL AGENTS
ISOPTO CARBACHOL OPHTH SOLN	-	3	OPHTHALMIC AGENTS
ISORDIL TAB 40MG	-	1	ANTIANGINAL AGENTS
ISOSORBIDE DINITRATE ER TAB	-	1	ANTIANGINAL AGENTS

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isosorbide dinitrate ER tab (ISOCHRON equiv)	-	1	ANTIANGINAL AGENTS
isosorbide dinitrate SL tab	-	1	ANTIANGINAL AGENTS
isosorbide dinitrate tab (ISORDIL equiv)	-	1	ANTIANGINAL AGENTS
isosorbide dinitrate tab 40mg (ISORDIL equiv)	-	1	ANTIANGINAL AGENTS
isosorbide mononitrate ER tab (IMDUR equiv)	-	1	ANTIANGINAL AGENTS
isosorbide mononitrate tab (MONOKET equiv)	-	1	ANTIANGINAL AGENTS
isosulfan inj (ISOSULFAN BLUE equiv)	M	M	DIAGNOSTIC PRODUCTS
isoxsuprine tab	-	2	CARDIOVASCULAR AGENTS - MISC.
isradipine cap (DYNACIRC equiv)	-	2	CALCIUM CHANNEL BLOCKERS
ISTODAX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ISTODAX OVR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ISTURISA TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
itraconazole cap (SPORANOX equiv)	-	2	ANTIFUNGALS
itraconazole soln (SPORANOX equiv)	-	3	ANTIFUNGALS
IVERMECTIN CREAM	-	NC	DERMATOLOGICALS
ivermectin cream (SOOLANTRA equiv)	-	NC	DERMATOLOGICALS
ivermectin tab (STROMEKTOL equiv)	-	2	ANTHELMINTICS
IXEMPRA KIT	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IXIARO INJ	VAC	6	VACCINES
JADENU SPRINKLE	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
JADENU TAB 180MG	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
JADENU TAB 90MG, 360MG	LPSP-PA	5	ANTIDOTES AND SPECIFIC ANTAGONISTS
JAKAFI TAB	PA-PSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JANUMET TAB	-	3	ANTIDIABETICS
JANUMET XR TAB	-	3	ANTIDIABETICS
JANUVIA TAB	¢	3	ANTIDIABETICS
JARDIANCE TAB	-	3	ANTIDIABETICS
JATENZO CAP	-	NC	ANDROGENS-ANABOLIC
JENTADUETO TAB (QL= 2 tabs/day)	QL	3	ANTIDIABETICS
JENTADUETO XR TAB (QL= 2 tabs/day)	QL	3	ANTIDIABETICS
JETREA INJ	M	M	OPHTHALMIC AGENTS
JE-VAX INJ	VAC	6	VACCINES
JEVTANA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
jinteli tab (FEMHRT equiv)	-	2	ESTROGENS
jolessa tab, amethia tab (SEASONALE, SEASONIQUE equiv)	-	6	CONTRACEPTIVES
JULUCA TAB	-	5	ANTIVIRALS
june1 FE tab (LOESTRIN FE equiv)	-	6	CONTRACEPTIVES
june1 tab (LOESTRIN equiv)	-	6	CONTRACEPTIVES
JYNARQUE PAK	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
JYNARQUE TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
KADCYLA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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KADIAN CAP (QL= 2 caps/day)	QL	4	ANALGESICS - OPIOID
KALBITOR INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
KALETRA SOLN	-	5	ANTIVIRALS
KALETRA TAB	-	5	ANTIVIRALS
KALYDECO PAK (QL= 2 packets/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
KALYDECO TAB (QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
KANAMYCIN INJ	M	M	AMINOGLYCOSIDES
KAPSPARGO CAP	-	NC	BETA BLOCKERS
KAPVAY DOSE PACK	-	4	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
KARBINAL ER SUSP	-	NC	ANTIHISTAMINES
KATERZIA SUSP	-	NC	CALCIUM CHANNEL BLOCKERS
kcl/d5w inj	M	M	MINERALS & ELECTROLYTES
KCL/D5W/LACTATED RINGERS INJ	M	M	MINERALS & ELECTROLYTES
KCL/D5W/NACL INJ	M	M	MINERALS & ELECTROLYTES
kcl/dextrose/sodium chloride inj	M	M	MINERALS & ELECTROLYTES
KEFLEX CAP 750MG	-	NC	CEPHALOSPORINS
kelnor tab (DEMULEN equiv)	-	6	CONTRACEPTIVES
KEPIVANCE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KEPPRA SOLN	-	4	ANTICONSULSANTS
KEPPRA TAB	-	4	ANTICONSULSANTS
KEPPRA XR TAB	-	4	ANTICONSULSANTS
KERAFOAM	-	4	DERMATOLOGICALS
KETAMINE HCL TROCHES	-	NC	GENERAL ANESTHETICS
ketamine inj	M	M	GENERAL ANESTHETICS
KETEK TAB	-	4	ANTI-INFECTIVE AGENTS - MISC.
ketoconazole cream (NIZORAL CREAM equiv)	-	2	DERMATOLOGICALS
ketoconazole shampoo (NIZORAL SHAMPOO equiv)	-	2	DERMATOLOGICALS
ketoconazole tab (NIZORAL equiv)	-	2	ANTIFUNGALS
ketodan foam	-	2	DERMATOLOGICALS
KETOPROFEN CAP	-	2	ANALGESICS - ANTI-INFLAMMATORY
ketoprofen cap (ORUDIS equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
KETOPROFEN ER CAP	-	2	ANALGESICS - ANTI-INFLAMMATORY
KETOROLAC INJ	M	M	ANALGESICS - ANTI-INFLAMMATORY
ketorolac inj (TORADOL equiv)	M	M	ANALGESICS - ANTI-INFLAMMATORY
ketorolac ophth soln (ACULAR (LS) equiv)	-	2	OPHTHALMIC AGENTS
ketorolac tab (TORADOL equiv) (QL= 20 tabs/30 days)	QL	2	ANALGESICS - ANTI-INFLAMMATORY
KETOROLAC TROMETHAMINE NASAL SPRAY, SPRIX NASAL SPRAY	-	NC	ANALGESICS - ANTI-INFLAMMATORY
KEVEYIS TAB	-	3	DIURETICS
KEVZARA INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
KINERET INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
KINRIX INJ	M	M	TOXOIDS
KISQALI PAK (QL= 91 tabs/28 days)	LPSP-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KISQALI TAB (QL= 63 tabs/28 days)	LPSP-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KITABIS PAK NEB SOLN	-	NC	AMINOGLYCOSIDES

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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KLARITY-B DROPS	-	NC	OPHTHALMIC AGENTS
KLARITY-L DROPS	-	NC	OPHTHALMIC AGENTS
KLOR-CON M15 TAB	-	4	MINERALS & ELECTROLYTES
KOGENATE FS INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
KOMBIGLYZE XR TAB	-	NC	ANTIDIABETICS
KORLYM TAB (Only available through Korlym SPARK program 855-4Korlym (855-456-7596))	LD-PA	5	ANTIDIABETICS
KOSELUGO CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KRINTAFEL TAB	-	3	ANTIMALARIALS
KRISTALOSE PACK	-	3	LAXATIVES
KRISTALOSE PACKET	-	3	LAXATIVES
KRYSTEXXA INJ	M	M	GOUT AGENTS
KUVAN POWDER PACK (Only available through Walgreens 888-347-3416)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
KUVAN TAB (Only available through Walgreens 888-347-3416)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
KYBELLA INJ	-	NC	DERMATOLOGICALS
KYNMOBI FILM	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
KYNMOBI TITRATION KIT	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
KYPROLIS INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
L.E.T. GEL	-	NC	DERMATOLOGICALS
labetalol inj (NORMODYNE equiv)	M	M	BETA BLOCKERS
labetalol tab (NORMODYNE equiv)	-	2	BETA BLOCKERS
LACRISERT OPHTH INSERT	-	3	OPHTHALMIC AGENTS
LACTATED RINGERS INJ	M	M	MINERALS & ELECTROLYTES
lactated ringers irrigation	-	2	ASSORTED CLASSES
lactic acid w/ vitamin E cream	-	2	DERMATOLOGICALS
LACTULOSE PACK	-	2	LAXATIVES
lactulose soln	-	2	GASTROINTESTINAL AGENTS - MISC.
LAMICTAL CHEW TAB 2MG	-	4	ANTICONVULSANTS
LAMICTAL ODT	-	3	ANTICONVULSANTS
LAMICTAL ODT KIT, LAMICTAL XR KIT	-	2	ANTICONVULSANTS
LAMICTAL STARTER KIT	-	NC	ANTICONVULSANTS
LAMISIL GRANULE	-	3	ANTIFUNGALS
lamivudine soln (EPIVIR equiv)	-	5	ANTIVIRALS
lamivudine tab (EPIVIR equiv)	-	2	ANTIVIRALS
lamivudine tab 100mg (EPIVIR HBV equiv)	-	2	ANTIVIRALS
lamivudine/zidovudine tab (COMBIVIR equiv)	-	2	ANTIVIRALS
lamotrigine chew tab (LAMICTAL equiv)	-	2	ANTICONVULSANTS
lamotrigine ER tab (LAMICTAL XR equiv)	-	2	ANTICONVULSANTS
lamotrigine ODT (LAMICTAL equiv)	-	2	ANTICONVULSANTS
lamotrigine ODT kit (LAMICTAL ODT KIT equiv)	-	2	ANTICONVULSANTS
lamotrigine tab (LAMICTAL equiv)	-	2	ANTICONVULSANTS
LANCET DEVICE	-	3	MEDICAL DEVICES AND SUPPLIES
LANCET KIT	-	3	MEDICAL DEVICES AND SUPPLIES
LANCETS	-	3	MEDICAL DEVICES AND SUPPLIES

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lansoprazole cap (PREVACID equiv) (Rx Only; QL= 2 caps/day)	QL	2	ULCER DRUGS
lansoprazole odt (PREVACID SOLUTAB equiv) (QL= 1 tab/day)	QL	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
LANSOPRAZOLE SUSP	-	4	ULCER DRUGS
lansoprazole/amoxicillin/clarithromycin kit (PREVPAC equiv)	-	2	ULCER DRUGS
lanthanum carbonate chew tab (FOSRENOL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
LANTUS INJ	-	3	ANTIDIABETICS
LANTUS SOLOSTAR INJ	-	3	ANTIDIABETICS
LASTACRAFT OPHTH SOLN (QL= 3ml/30 days)	QL	4	OPHTHALMIC AGENTS
latanoprost ophth soln (XALATAN equiv) (QL= 2.5ml/25 days)	QL	2	OPHTHALMIC AGENTS
latrix susp	-	2	DERMATOLOGICALS
LATUDA TAB (QL= 1 tab/day)	PA-QL-¢	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LATUDA TAB 80MG (QL= 2 tabs/day)	PA-QL-¢	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LAZANDA NASAL SPRAY (QL= 15 bottles/30 days)	PA-QL	4	ANALGESICS - OPIOID
lazerformaly soln	-	2	ANTISEPTICS & DISINFECTANTS
L-CYSTEINE INJ	M	M	NUTRIENTS
LEDIPASVIR/SOFOSBUVIR TAB (QL= 1 tab/ day)	LPSP-PA-QL	5	ANTIVIRALS
leflunomide tab (ARAVA equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
LENVIMA CAP (QL= 3 caps/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LESCOL XL TAB	-	NC	ANTHYPERLIPIDEMICS
LETAIRIS TAB (QL= 1 tab/day; Only available through Lumicera 855-847-3553 or Walgreens 888-347-3416)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
letrozole tab (FEMARA equiv) (QL= 1 tab/day)	QL	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
leucovorin calcium inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEUCOVORIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEUCOVORIN TAB	-	2	ANTINEOPLASTICS
LEUKERAN TAB	SP	5	ANTINEOPLASTICS
LEUKINE INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
LEVALBUTEROL INHALER, XOPENEX HFA INHALER (QL= 2 inhalers/30 day)	QL	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
levalbuterol neb soln (XOPENEX equiv) (QL= 6 nebs/day)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
LEVATOL TAB	-	4	BETA BLOCKERS
LEVEMIR FLEXTOUCH INJ (Step therapy requires trial of LANTUS)	ST	4	ANTIDIABETICS
LEVEMIR INJ (Step therapy requires trial of LANTUS)	ST	4	ANTIDIABETICS
levetiracetam ER tab (KEPPRA XR equiv)	-	2	ANTICONVULSANTS
levetiracetam inj	M	M	ANTICONVULSANTS
LEVETIRACETAM INJ	M--	NC	ANTICONVULSANTS
levetiracetam soln (KEPPRA equiv)	-	2	ANTICONVULSANTS
levetiracetam tab (KEPPRA equiv)	-	2	ANTICONVULSANTS
LEVITRA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
LEVOBUNOLOL OPHTH SOLN	-	2	OPHTHALMIC AGENTS
levobunolol ophth soln (BETAGAN equiv)	-	2	OPHTHALMIC AGENTS
levocarnitine inj (CARNITOR equiv)	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.

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levocarnitine soln (CARNITOR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
levocarnitine tab (CARNITOR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
levocetirizine soln (XYZAL equiv)	-	2	ANTIHISTAMINES
levocetirizine tab (XYZAL equiv)	-	2	ANTIHISTAMINES
levofloxacin inj	M	M	FLUOROQUINOLONES
levofloxacin ophth soln (QUIXIN equiv)	-	2	OPHTHALMIC AGENTS
levofloxacin tab (LEVAQUIN equiv)	-	2	FLUOROQUINOLONES
levofloxacin/d5w inj	M	M	FLUOROQUINOLONES
levoleucovorin inj (FUSILEV equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEVONORGESTREL TAB 0.75MG (QL= 4 tabs/365 days)	QL	6	CONTRACEPTIVES
levonorgestrel tab 0.75mg (PLAN B equiv) (QL= 4 tabs/365 days)	QL-OTC	6	CONTRACEPTIVES
levonorgestrel tab 1.5mg (PLAN B equiv) (QL= 2 tabs/365 days)	OTC-QL	6	CONTRACEPTIVES
LEVORPHANOL TAB	-	NC	ANALGESICS - OPIOID
levorphanol tab (LEVORPHANOL equiv)	-	NC	ANALGESICS - OPIOID
LEVOTHYROXINE INJ	M	M	THYROID AGENTS
levothyroxine inj (LEVOTHYROXINE equiv)	M	M	THYROID AGENTS
levothyroxine tab (SYNTHROID equiv)	-	NC	THYROID AGENTS
LEXETTE FOAM	-	NC	DERMATOLOGICALS
LEXIVA SUSP	-	5	ANTIVIRALS
LIALDA TAB	-	2	GASTROINTESTINAL AGENTS - MISC.
LICART PATCH	-	NC	DERMATOLOGICALS
lidocaine cream 3% (LIDAMANTLE equiv)	-	2	DERMATOLOGICALS
lidocaine cream 3.88% (LIDOTRAL equiv)	-	NC	DERMATOLOGICALS
LIDOCAINE GEL	-	2	DERMATOLOGICALS
lidocaine gel (GLYDO equiv)	-	2	DERMATOLOGICALS
lidocaine gel (XYLOCAINE equiv)	-	2	DERMATOLOGICALS
lidocaine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
lidocaine inj (XYLOCAINE equiv)	M	M	ANTIARRHYTHMICS
LIDOCAINE INJ 4%	M	M	LOCAL ANESTHETICS-PARENTERAL
lidocaine oint	-	NC	DERMATOLOGICALS
LIDOCAINE ORAL SOLN 4%	-	3	MOUTH/THROAT/DENTAL AGENTS
lidocaine patch	-	2	DERMATOLOGICALS
lidocaine soln (XYLOCAINE equiv)	-	2	DERMATOLOGICALS
lidocaine viscous soln	-	2	MOUTH/THROAT/DENTAL AGENTS
lidocaine/d5w inj	M	M	ANTIARRHYTHMICS
LIDOCAINE/DEXTROSE INJ	M	M	LOCAL ANESTHETICS-PARENTERAL
lidocaine/epinephrine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
lidocaine/hydrocortisone cream (ANAMANTLE equiv)	-	2	ANORECTAL AGENTS
lidocaine/hydrocortisone kit (ANALPRAM equiv)	-	2	ANORECTAL AGENTS
LIDOCAINE/HYDROCORTISONE RECTAL CREAM KIT	-	2	ANORECTAL AGENTS
lidocaine/prilocaine cream (EMLA equiv)	PA	2	DERMATOLOGICALS
LIDOCAINE/TETRACAINE CREAM	-	NC	DERMATOLOGICALS
LIDOCIN GEL	-	NC	DERMATOLOGICALS
LIDO-HYDRO GEL	-	2	ANORECTAL AGENTS
LIDOSTREAM KIT	-	NC	DERMATOLOGICALS
LIDOTIN PAK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

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LIDOTRAL CREAM	-	NC	DERMATOLOGICALS
LIDOTREX GEL	-	NC	DERMATOLOGICALS
lincomycin inj (LINCOCIN equiv)	M	M	ANTI-INFECTIVE AGENTS - MISC.
lindane lotion	-	2	DERMATOLOGICALS
lindane shampoo	-	2	DERMATOLOGICALS
linezolid soln (ZYVOX equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
linezolid susp (ZYVOX equiv) (QL= 600ml/28 days)	PA-QL	2	ANTI-INFECTIVE AGENTS - MISC.
linezolid tab (ZYVOX equiv) (QL= 28 tabs/30 days)	PA-QL	2	ANTI-INFECTIVE AGENTS - MISC.
LINZESS CAP	PA	3	GASTROINTESTINAL AGENTS - MISC.
LIORESAL INT INJ	M	M	MUSCULOSKELETAL THERAPY AGENTS
liothyronine inj (TRIOSTAT equiv)	M	M	THYROID AGENTS
liothyronine tab (CYTOMEL equiv)	-	2	THYROID AGENTS
lisinopril tab (PRINIVIL/ZESTRIL equiv)	-	1	ANTIHYPERTENSIVES
lisinopril/hydrochlorothiazide tab (ZESTORETIC equiv)	-	1	ANTIHYPERTENSIVES
LITHIUM CARBONATE CAP	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium carbonate cap (ESKALITH equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium carbonate ER tab (LITHOBID equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium carbonate tab	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LITHIUM CITRATE SOLN	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LITHOBID TAB	-	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LIVALO TAB (Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	ST	4	ANTIHYPERLIPIDEMICS
L-METHYL-MC TAB	-	4	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
LMR PLUS KIT	-	NC	DERMATOLOGICALS
LO LOESTRIN TAB	-	3	CONTRACEPTIVES
LOESTRIN 24 FE TAB	-	3	CONTRACEPTIVES
lohist liquid (DECON-A equiv)	OTC	NC	COUGH/COLD/ALLERGY
LOKELMA PAK	PA	3	MISCELLANEOUS THERAPEUTIC CLASSES
LOMAIRA TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
LONHALA MAGNAIR SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
LONSURF TAB (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
loperamide cap (IMODIUM equiv)	-	2	ANTIDIARRHEALS
LOPERAMIDE SOLN	-	NC	ANTIDIARRHEAL/PROBIOTIC AGENTS
lopinavir/ritonavir soln (KALETRA equiv)	-	5	ANTIVIRALS
loratadine cap (CLARITIN equiv)	OTC	2	ANTIHISTAMINES
loratadine chew tab (CLARITIN equiv)	-	1	ANTIHISTAMINES
loratadine ODT (CLARITIN equiv)	-	NC	ANTIHISTAMINES
loratadine syrup (CLARITIN equiv)	-	2	ANTIHISTAMINES
loratadine tab (CLARITIN equiv)	-	1	ANTIHISTAMINES
loratadine/pseudoephedrine 24-hour tab (CLARITIN-D equiv)	-	NC	COUGH/COLD/ALLERGY
lorazepam conc (ATIVAN equiv)	-	2	ANTIAXIETY AGENTS
lorazepam inj	M	M	ANTIAXIETY AGENTS
lorazepam tab (ATIVAN equiv)	-	2	ANTIAXIETY AGENTS
LORBRENA TAB 100MG (QL= 1 tab/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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LORBRENA TAB 25MG (QL= 3 tabs/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LORTAB ELIXIR	-	3	ANALGESICS - OPIOID
LORVATUS PHARMAPAK KIT	-	NC	MUSCULOSKELETAL THERAPY AGENTS
losartan tab (COZAAR equiv)	-	1	ANTIHYPERTENSIVES
losartan/hydrochlorothiazide tab (HYZAAR equiv)	-	1	ANTIHYPERTENSIVES
LOTEMAX OPHTH OINT (QL= 14gm/365 days)	QL	4	OPHTHALMIC AGENTS
LOTEMAX OPHTH SUSP	-	3	OPHTHALMIC AGENTS
LOTEMAX SM GEL 0.38%	-	NC	OPHTHALMIC AGENTS
loteprednol ophth susp (LOTEMAX equiv)	-	2	OPHTHALMIC AGENTS
lovastatin tab (MEVACOR equiv)	-	1	ANTIHYPERLIPIDEMICS
loxapine cap (LOXITANE equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LUCEMYRA TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LUCENTIS INJ 0.5MG	M	M	OPHTHALMIC AGENTS
LUCENTIS SOLN 0.3MG	M	M	OPHTHALMIC AGENTS
LUFYLLIN TAB	-	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
LULICONAZOLE CREAM, LUZU CREAM	-	NC	DERMATOLOGICALS
LUMIFY OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
LUMIGAN OPHTH SOLN (QL= 2.5ml/25 days)	QL	4	OPHTHALMIC AGENTS
LUPRON DEPOT INJ	LPSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT-PED INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
LURIDE SOLN (Covered at \$0 for members 5 years or younger; All other members covered at non-preferred brand copay)	-	6	MINERALS & ELECTROLYTES
LURIDE TAB (Covered at \$0 for members 5 years or younger; All other members covered at non-preferred brand copay)	-	6	MINERALS & ELECTROLYTES
LUVIRA CAP	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
LYNPARZA CAP (QL= 16 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYNPARZA TAB (QL= 4 tabs/day; Only available through Biologics 800-850-4306)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYRICA CAP	-	3	ANTICONVULSANTS
LYRICA CR TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LYRICA SOLN	-	3	ANTICONVULSANTS
LYSODREN TAB (Only available through Direct Success 732-919-1234)	LD	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYUMJEV INJ	-	NC	ANTIDIABETICS
LYUMJEV KWIKPEN INJ	-	NC	ANTIDIABETICS
M.V.I. INJ	M	M	MULTIVITAMINS
MACRILEN PACK	-	NC	DIAGNOSTIC PRODUCTS
MACRODANTIN CAP 25MG	-	NC	URINARY ANTI-INFECTIVES
MACUGEN INJ	M	M	OPHTHALMIC AGENTS
mafenide acetate soln packet (SULFAMYLON equiv)	-	2	DERMATOLOGICALS
MAGNEBIND TAB	-	4	MINERALS & ELECTROLYTES
MAGNESIUM CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
magnesium salicylate tab	-	2	ANALGESICS - NONNARCOTIC

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magnesium sulfate inj	M	M	MINERALS & ELECTROLYTES
MAGNESIUM SULFATE INJ	M--	NC	MINERALS & ELECTROLYTES
magnesium sulfate/D5W inj	M	M	MINERALS & ELECTROLYTES
MAGNESIUM SULFATE/D5W INJ	M--	NC	MINERALS & ELECTROLYTES
MAKENA INJ	M	M	PROGESTINS
malathion lotion (OVIDE equiv)	-	2	DERMATOLOGICALS
maldemar tab (SCOPACE equiv)	-	2	ANTIEMETICS
MANGANESE CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
MANGANESE SULFATE INJ	M	M	MINERALS & ELECTROLYTES
MAPROTILINE TAB	-	2	ANTIDEPRESSANTS
MARPLAN TAB	-	4	ANTIDEPRESSANTS
MATULANE CAP	PA-SP	5	ANTINEOPLASTICS
MAVENCLAD PAK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MAVYRET TAB (QL= 3 tabs/day)	LPSP-PA-QL	5	ANTIVIRALS
MAXIPIME INJ	M	M	CEPHALOSPORINS
MAYZENT TAB	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MAYZENT TAB STARTER PACK	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
mebendazole chew tab (VERMOX equiv)	-	2	ANTHELMINTICS
meclizine chew tab (BONINE equiv)	-	2	ANTIEMETICS
meclizine tab (ANTIVERT equiv) (Rx Only)	-	2	ANTIEMETICS
MECLOFENAMATE CAP	-	2	ANALGESICS - ANTI-INFLAMMATORY
MEDI-PATCH W/LIDOCAINE PATCH	-	NC	DERMATOLOGICALS
medroxyprogesterone inj (DEPO-PROVERA equiv) (QL= 1 inj/90 days)	QL	6	CONTRACEPTIVES
medroxyprogesterone tab (PROVERA equiv)	-	1	PROGESTINS
mefenamic acid cap (PONSTEL equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
mefloquine tab (LARIAM equiv)	-	2	ANTIMALARIALS
MEFLOQUINE TAB	-	3	ANTIMALARIALS
MEFOXIN INJ	M	M	CEPHALOSPORINS
MEGACE ES SUSP	-	NC	PROGESTINS
megestrol ES susp (MEGACE ES equiv)	-	4	PROGESTINS
megestrol susp (MEGACE equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
megestrol tab (MEGACE equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKINIST TAB 0.5MG	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKINIST TAB 2MG	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKTOVI TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MELOXICAM SUSP	-	2	ANALGESICS - ANTI-INFLAMMATORY
meloxicam tab (MOBIC equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
MELPAQUE HP CREAM	-	2	DERMATOLOGICALS
melphalan inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
melphalan tab (ALKERAN equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MELQUIN 3 SOLN	-	2	DERMATOLOGICALS

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memantine ER cap (NAMENDA XR equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
memantine sol (NAMENDA equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
memantine tab (NAMENDA equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MENACTRA INJ	VAC	6	VACCINES
MENEST TAB	-	4	ESTROGENS
MENHIBRIX INJ	VAC	6	VACCINES
MENOMUNE INJ	VAC	6	VACCINES
MENOSTAR PATCH	-	4	ESTROGENS
MENTAX CREAM	-	3	DERMATOLOGICALS
MENVEO INJ	VAC	6	VACCINES
meperidine inj	M	M	ANALGESICS - OPIOID
MEPERIDINE TAB	-	2	ANALGESICS - OPIOID
meperidine tab (DEMEROL equiv)	-	2	ANALGESICS - OPIOID
MEPHYTON TAB	-	3	VITAMINS
MEPIVACAINE INJ	M	M	LOCAL ANESTHETICS-PARENTERAL
meprobamate tab (MILTOWN equiv)	-	2	ANTI-ANXIETY AGENTS
mercaptopurine tab (PURINETHOL equiv)	-	2	ANTINEOPLASTICS
meropenem inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
mesalamine DR cap (DELZICOL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine DR tab (LIALDA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine enema (ROWASA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine ER cap (APRISO equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine supp (CANASA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine tab (ASACOL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesna inj (MESNEX equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MESNEX TAB	LPSP	5	ANTINEOPLASTICS
metaproterenol syrup	-	2	ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS
METAPROTERENOL TAB	-	2	ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS
metaxalone tab (SKELAXIN equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
metformin ER osmotic tab 1000mg (FORTAMET equiv)	-	NC	ANTIDIABETICS
metformin ER tab (GLUCOPHAGE XR equiv)	-	1	ANTIDIABETICS
metformin soln (RIOMET equiv)	-	2	ANTIDIABETICS
metformin tab (GLUCOPHAGE equiv)	-	1	ANTIDIABETICS
methadone inj	M	M	ANALGESICS - OPIOID
methadone soln	-	2	ANALGESICS - OPIOID
methadone tab (DOLOPHINE equiv)	-	2	ANALGESICS - OPIOID
methadose tab	-	2	ANALGESICS - OPIOID
methamphetamine tab (DESOXYN equiv) (QL= 5 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methazolamide tab (NEPTAZANE equiv)	-	2	DIURETICS
methenamine hippurate tab (HIPREX equiv)	-	2	URINARY ANTI-INFECTIVES
methenamine mandelate tab	-	2	URINARY ANTI-INFECTIVES
methimazole tab (TAPAZOLE equiv)	-	2	THYROID AGENTS
METHITEST TAB	-	3	ANDROGENS-ANABOLIC

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methocarbamol (ROBAXIN equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
methotrexate inj	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
methotrexate tab (Trexall equiv)	-	2	ANTINEOPLASTICS
methoxsalen cap (Oxsoralen Ultra equiv)	-	1	DERMATOLOGICALS
methscopolamine tab (Pamine equiv)	-	2	ULCER DRUGS
METHYCLOTHIAZIDE TAB	-	2	DIURETICS
methyl dopa tab (Aldomet equiv)	-	1	ANTIHYPERTENSIVES
METHYLDOPA/HYDROCHLOROTHIAZIDE TAB	-	2	ANTIHYPERTENSIVES
METHYLDOPATE INJ	M	M	ANTIHYPERTENSIVES
METHYLENE BLUE INJ	M	M	ANTIDOTES
methylergonovine inj (Methergine equiv)	M	M	OXYTOCICS
methylergonovine tab (Methergine equiv)	-	2	OXYTOCICS
methylphenidate CD cap 10mg, 20mg, 30mg (Metadate CD equiv) (QL= 2 caps/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate CD cap 40mg (Metadate CD equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate CD cap 50mg (Metadate CD equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate CD cap 60mg (Metadate CD equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate chew tab (Methylin equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER cap 10mg, 20mg, 30mg (Ritalin LA equiv) (QL= 2 caps/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER cap 40mg (Ritalin LA equiv) (QL= 1 cap/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 10mg (Metadate equiv) (QL= 2 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 18mg (Concerta equiv) (QL= 1 tab/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
METHYLPHENIDATE ER TAB 18mg, 27mg, 36mg, 54mg (QL= 1 tab/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 20mg (Ritalin SR equiv) (QL= 3 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 27mg (Concerta equiv) (QL= 1 tab/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 36mg (QL= 2 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 36mg (Concerta equiv) (QL= 2 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate ER tab 54mg (Concerta equiv) (QL= 1 tab/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
METHYLPHENIDATE ER TAB 72MG	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate soln (Methylin equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylphenidate tab (Ritalin equiv) (QL= 3 tabs/day)	QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
methylprednisolone dose pack (Medrol equiv)	-	2	CORTICOSTEROIDS
methylprednisolone inj (Depo-Medrol equiv)	M	M	CORTICOSTEROIDS

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methylprednisolone tab (MEDROL equiv)	-	2	CORTICOSTEROIDS
METHYLTESTOSTERONE CAP	-	NC	ANDROGENS-ANABOLIC
METIPRANLOLOL OPTH SOLN	-	2	OPHTHALMIC AGENTS
metoclopramide inj (REGLAN equiv)	M	M	GASTROINTESTINAL AGENTS - MISC.
metoclopramide soln (REGLAN equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
metoclopramide tab (REGLAN equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
metolazone tab (ZAROXOLYN equiv)	-	2	DIURETICS
metoprolol ER tab 100mg, 200mg (TOPROL XL equiv)	-	2	BETA BLOCKERS
metoprolol ER tab 25mg (TOPROL XL equiv)	-	1	BETA BLOCKERS
metoprolol ER tab 50mg (TOPROL XL equiv)	-	1	BETA BLOCKERS
metoprolol inj (LOPRESSOR equiv)	M	M	BETA BLOCKERS
metoprolol tab (LOPRESSOR equiv)	-	1	BETA BLOCKERS
metoprolol tab 37.5mg, 75mg (LOPRESSOR equiv)	-	NC	BETA BLOCKERS
METOPROLOL/HYDROCHLOROTHIAZIDE TAB	-	2	ANTIHYPERTENSIVES
metoprolol/hydrochlorothiazide tab (LOPRESSOR HCT equiv)	-	2	ANTIHYPERTENSIVES
metronidazole cap (FLAGYL equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
metronidazole cream (METROCREAM equiv)	-	2	DERMATOLOGICALS
metronidazole gel (METROGEL equiv)	-	2	DERMATOLOGICALS
metronidazole lotion (METROLOTION equiv)	-	2	DERMATOLOGICALS
metronidazole tab (FLAGYL equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
metronidazole vaginal gel (METROGEL equiv)	-	2	VAGINAL PRODUCTS
metronidazole/nacl inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
mexiletine hcl cap	-	2	ANTIARRHYTHMICS
MEXPAROX HC CREAM	-	NC	DERMATOLOGICALS
MIACALCIN INJ	LPSP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
mibelas chew tab (MINASTRIN equiv)	-	2	CONTRACEPTIVES
micafungin inj (MYCAMINE equiv)	M	M	ANTIFUNGALS
MICLARA LIQUID	-	NC	ANTIHISTAMINES
miconazole 3 kit	-	2	VAGINAL PRODUCTS
MICONAZOLE 3 SUPP 200MG	-	4	VAGINAL PRODUCTS
miconazole nitrate cream	-	2	DERMATOLOGICALS
MICORT-HC CREAM	-	NC	DERMATOLOGICALS
MICRHOGAM/RHOGAM PLUS INJ	M	M	PASSIVE IMMUNIZING AGENTS
MICROVIX LP PAK	-	NC	DERMATOLOGICALS
midazolam inj	M	M	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
midodrine tab (PROAMATINE equiv)	-	2	VASOPRESSORS
migliitol tab (GLYSET equiv)	-	2	ANTIDIABETICS
miglustat cap (ZAVESCA equiv) (Only available through Accredo 888-773-7376)	LD-PA	5	HEMATOPOIETIC AGENTS
MIGRANAL SPRAY (QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
MILLIPRED DP PAK	-	4	CORTICOSTEROIDS
MILLIPRED TAB	-	4	CORTICOSTEROIDS
milrinone lactate inj	M	M	CARDIOTONICS
milrinone/dextrose inj	M	M	CARDIOTONICS
MINASTRIN CHEW TAB	-	NC	CONTRACEPTIVES
MINIVELLE PATCH	-	4	ESTROGENS
minocycline cap (MINOCIN equiv)	-	2	TETRACYCLINES

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MINOCYCLINE ER CAP	-	NC	TETRACYCLINES
minocycline ER tab (SOLODYN equiv)	-	2	TETRACYCLINES
minocycline tab (DYNACIN equiv)	-	2	TETRACYCLINES
minoxidil tab (LONITEN equiv)	-	2	ANTIHYPERTENSIVES
MIRCERA INJ	-	NC	HEMATOPOIETIC AGENTS
MIRENA IUD	-	6	CONTRACEPTIVES
mirtazapine ODT (REMERON equiv)	-	2	ANTIDEPRESSANTS
mirtazapine tab (REMERON equiv)	-	2	ANTIDEPRESSANTS
misoprostol tab (CYTOTEC equiv)	-	2	ULCER DRUGS
MITIGARE CAP	-	3	GOUT AGENTS
mitomycin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
mitoxantron inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MIXED VESPID INJ	M	M	BIOLOGICALS MISC
M-M-R II INJ	VAC	6	VACCINES
modafinil tab (PROVIGIL equiv) (QL= 2 tabs/day)	PA-QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
MODERIBA TAB	LPSP-PA	2	ANTIVIRALS
moexipril tab (UNIVASC equiv)	-	2	ANTIHYPERTENSIVES
MOEXIPRIL/HYDROCHLOROTHIAZIDE TAB	-	2	ANTIHYPERTENSIVES
moexipril/hydrochlorothiazide tab (UNIRETIC equiv)	-	2	ANTIHYPERTENSIVES
MOLINDONE TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
mometasone cream (ELOCON equiv)	-	2	DERMATOLOGICALS
mometasone nasal spray (NASONEX equiv) (QL= 1 bottle/fill)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
mometasone oint (ELOCON equiv)	-	2	DERMATOLOGICALS
mometasone soln (ELOCON equiv)	-	2	DERMATOLOGICALS
MONOCLATE-P INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
MONONINE INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
montelukast chew tab (SINGULAIR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
montelukast granule pack (SINGULAIR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
montelukast tab (SINGULAIR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
MONUROL GRANULE PACK	-	4	URINARY ANTI-INFECTIVES
morgidox cap	-	2	TETRACYCLINES
MORPHABOND TAB	-	NC	ANALGESICS - OPIOID
MORPHINE SULFATE ER BEAD CAP (QL= 1 cap/day)	QL	4	ANALGESICS - OPIOID
morphine sulfate ER cap (KADIAN equiv) (QL= 2 caps/day)	QL	2	ANALGESICS - OPIOID
morphine sulfate ER tab (MS CONTIN equiv) (QL= 2 tabs/day)	QL	2	ANALGESICS - OPIOID
morphine sulfate inj	M	M	ANALGESICS - OPIOID
morphine sulfate inj (INFUMORPH INJ equiv)	M	M	ANALGESICS - OPIOID
morphine sulfate soln	-	2	ANALGESICS - OPIOID
MORPHINE SULFATE SUPP	-	2	ANALGESICS - OPIOID
morphine sulfate tab	-	2	ANALGESICS - OPIOID
morrhuate sodium inj	M	M	ASSORTED CLASSES
MOTEGRITY TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
MOTOFEN TAB	-	3	ANTIIDIARRHEALS
MOVANTI TAB	PA	3	GASTROINTESTINAL AGENTS - MISC.

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MOVIPREP SOLN (Step Therapy requires trial of CLENPIQ)	ST	4	LAXATIVES
MOXATAG TAB	-	4	PENICILLINS
MOXATAG TAB 775MG	-	4	PENICILLINS
MOXEZA OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
MOXEZA OPHTH SOLN 0.5%	-	NC	OPHTHALMIC AGENTS
moxifloxacin hcl ophth soln 0.5% (MOXEZA equiv)	-	NC	OPHTHALMIC AGENTS
moxifloxacin ophth soln (VIGAMOX OPHTH SOLN equiv)	-	2	OPHTHALMIC AGENTS
MOXIFLOXACIN SOLN	-	NC	OPHTHALMIC AGENTS
moxifloxacin tab (AVELOX equiv)	-	2	FLUOROQUINOLONES
MOZOBIL INJ	LPSP-M	M	HEMATOPOIETIC AGENTS
MUCINEX LIQUID	-	NC	COUGH/COLD/ALLERGY
MULPLETA TAB (QL= 7 tabs/fill)	LPSP-PA-QL	5	HEMATOPOIETIC AGENTS
MULTAQ TAB	-	4	ANTIARRHYTHMICS
MULTIGEN FOLIC TAB	-	NC	HEMATOPOIETIC AGENTS
MULTIGEN PLUS TAB	-	NC	HEMATOPOIETIC AGENTS
MULTIGEN TAB	-	NC	HEMATOPOIETIC AGENTS
MULTI-LANCET DEVICE 2	OTC	1	MEDICAL DEVICES AND SUPPLIES
multivitamin tab	-	1	HEMATOPOIETIC AGENTS
MULTIVITAMIN/FLUORIDE CHEW TAB	-	NC	MULTIVITAMINS
multivitamin/minerals tab (STROVITE equiv)	-	1	MULTIVITAMINS
mupirocin cream (BACTROBAN CREAM equiv)	-	2	DERMATOLOGICALS
mupirocin oint (BACTROBAN OINT equiv)	-	2	DERMATOLOGICALS
MUSTARGEN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MYCAMINE INJ	M	M	ANTIFUNGALS
MYCAPSSA CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
mycophenolate DR tab (MYFORTIC equiv)	-	2	ASSORTED CLASSES
mycophenolate inj (CELLCEPT equiv)	M	M	ASSORTED CLASSES
mycophenolate mofetil cap (CELLCEPT equiv)	-	2	ASSORTED CLASSES
mycophenolate mofetil tab (CELLCEPT equiv)	-	2	ASSORTED CLASSES
MYDAYIS CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
MYLERAN TAB	LPSP-PA	5	ANTINEOPLASTICS
MYNATAL-Z TAB	-	1	MULTIVITAMINS
MYOBLOC INJ	M	M	NEUROMUSCULAR AGENTS
MYOXIN SUS OTIC	-	2	OTIC AGENTS
MYOZYME INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
MYRBETRIQ TAB	-	4	URINARY ANTISPASMODICS
MYTELASE TAB	-	4	ANTIMYASTHENIC/CHOLINERGIC AGENTS
nabumetone tab (RELAFEN equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
nadolol tab (CORGARD equiv)	-	2	BETA BLOCKERS
nadolol/bendroflumethiazide tab (CORZIDE equiv)	-	2	ANTIHYPERTENSIVES
NADOLOL/BENDROFLUMETHIAZINE TAB 40-5MG	-	2	ANTIHYPERTENSIVES
nafcillin inj	M	M	PENICILLINS
NAFTIFINE CREAM	-	4	DERMATOLOGICALS
naftifine cream (NAFTIN equiv)	-	4	DERMATOLOGICALS
naftifine gel (NAFTIN equiv)	-	NC	DERMATOLOGICALS
NAFTIN GEL	-	NC	DERMATOLOGICALS

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PSP	Medical Benefit	QL	Over-the-Counter	RS	Prior Authorization
SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
ST	Limited to two 15 day fills per month for first 3 months	VAC	Smoking Cessation	¢	Available through Specialty Pharmacy Program
	Step Therapy		Vaccine Program		RxCENTS

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NAGLAZYME INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
nalbuphine inj	M	M	ANALGESICS - OPIOID
naloxone inj	-	2	ANTIDOTES
naloxone prefilled inj	-	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
naltrexone tab (REVIA equiv)	-	2	ANTIDOTES
NAMENDA TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMENDA XR TITRATION PACK	-	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMZARIC CAP (Step Therapy requires trial of donepezil and memantine)	ST	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMZARIC STARTER PACK (Step Therapy requires trial of donepezil and memantine)	ST	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAPRELAN CR TAB 375MG, 750MG	-	4	ANALGESICS - ANTI-INFLAMMATORY
naproxen EC tab (NAPROSYN EC equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
naproxen sodium CR tab (NAPRELAN CR equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
naproxen sodium tab (ANAPROX equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
NAPROXEN SUSP	-	2	ANALGESICS - ANTI-INFLAMMATORY
naproxen susp (NAPROSYN equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
naproxen tab (NAPROSYN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
naproxen/esomeprazole magnesium DR tab (VIMOVO equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naratriptan tab (AMERGE equiv) (QL= 9 tabs/30 days)	QL	2	MIGRAINE PRODUCTS
NARCAN NASAL SPRAY	-	3	ANTIDOTES
NASACORT OTC NASAL SPRAY	OTC	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
NASCOBAL NASAL SPRAY	-	NC	HEMATOPOIETIC AGENTS
NASONEX NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
NATACYN OPHTH SUSP	-	3	OPHTHALMIC AGENTS
NATAZIA TAB	-	6	CONTRACEPTIVES
nateglinide tab (STARLIX equiv)	-	2	ANTIDIABETICS
NATESTO NASAL GEL	-	NC	ANDROGENS-ANABOLIC
NATPARA INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NATROBA SUSP (QL= 1 bottle/fill)	QL	4	DERMATOLOGICALS
NAYZILAM SPRAY	-	NC	ANTICONVULSANTS
NEBUPENT NEB SOLN	-	3	ANTI-INFECTIVE AGENTS - MISC.
NECON TAB	-	6	CONTRACEPTIVES
NEFAZODONE TAB	-	2	ANTIDEPRESSANTS
nefazodone tab 50mg, 250mg	-	2	ANTIDEPRESSANTS
neo/poly gu sol	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
NEO/POLY GU SOLN	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
neomycin tab	-	2	AMINOGLYCOSIDES
NEOMYCIN/POLYMYXIN/GRAMICIDIN OPHTH SOLN	-	2	OPHTHALMIC AGENTS
neomycin/polymyxin/hydrocortisone otic soln (CORTISPORIN equiv)	-	2	OTIC AGENTS
neomycin/polymyxin/hydrocortisone otic susp (CORTISPORIN equiv)	-	2	OTIC AGENTS
neomycin/polymyxin/dexamethasone ophth oint (MAXITROL equiv)	-	2	OPHTHALMIC AGENTS
neomycin/polymyxin/dexamethasone ophth soln (MAXITROL equiv)	-	2	OPHTHALMIC AGENTS
NEOMYCIN/POLYMYXIN/HYDROCORTISONE OPHTH SOLN	-	2	OPHTHALMIC AGENTS

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NEOSALUS FOAM	-	NC	DERMATOLOGICALS
neostigmine methylsulfate inj	M	M	ANTIMYASTHENIC/CHOLINERGIC AGENTS
NEOTUSS PLUS LIQUID	-	2	COUGH/COLD/ALLERGY
NEOTUSS-D LIQUID	-	4	COUGH/COLD/ALLERGY
NEPHRON FA TAB	-	3	HEMATOPOIETIC AGENTS
NERLYNX TAB (QL=6 tabs/day)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NEULASTA INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
NEUMEGA INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
NEUPOGEN INJ	-	NC	HEMATOPOIETIC AGENTS
NEUPRO PATCH	-	4	ANTIPARKINSON AGENTS
NEVANAC OPHTH SUSP (QL= 4 bottles/year)	QL	3	OPHTHALMIC AGENTS
NEVIRAPINE ER TAB	-	2	ANTIVIRALS
nevirapine ER tab (VIRAMUNE XR equiv)	-	2	ANTIVIRALS
nevirapine susp (VIRAMUNE equiv)	-	2	ANTIVIRALS
nevirapine tab (VIRAMUNE equiv)	-	2	ANTIVIRALS
NEXAVAR TAB	PA-PSP-SF	5	ANTINEOPLASTICS
NEXIUM 24HR TAB	-	NC	ULCER DRUGS
NEXIUM GRANULE PACK (Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	ST	4	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
NEXLETOL TAB	-	NC	ANTIHYPERLIPIDEMICS
NEXLIZET TAB	-	NC	ANTIHYPERLIPIDEMICS
NEXTERONE INJ	M	M	ANTIARRHYTHMICS
niacin cap	-	2	VITAMINS
niacin CR tab (SLO-NIACIN equiv)	-	2	VITAMINS
niacin ER tab (NIASPAN equiv)	-	2	ANTIHYPERLIPIDEMICS
niacin tab	-	2	VITAMINS
NIACIN TR TAB	-	2	VITAMINS
niacinamide tab	-	2	VITAMINS
NIACOR TAB	-	1	ANTIHYPERLIPIDEMICS
nicardipine cap (CARDENE equiv)	-	2	CALCIUM CHANNEL BLOCKERS
nicardipine inj (CARDENE equiv)	M	M	CALCIUM CHANNEL BLOCKERS
nicotine gum (NICORETTE equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTINE KIT (Limited to 180 days/calendar year)	OTC-QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nicotine lozenge (COMMIT equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nicotine patch (NICODERM equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTROL INHALER (Limited to 180 days/calendar year)	QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTROL NASAL SPRAY (Limited to 180 days/calendar year)	QL-SMKG	6	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nifedipine cap (PROCARDIA equiv)	-	2	CALCIUM CHANNEL BLOCKERS
nifedipine ER tab (ADALAT CC equiv)	-	2	CALCIUM CHANNEL BLOCKERS
nilutamide tab (NILANDRON equiv)	LPSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nimodipine cap (NIMOTOP equiv)	-	2	CALCIUM CHANNEL BLOCKERS

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NINLARO CAP	PA-PSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nisoldipine ER tab (SULAR equiv)	-	2	CALCIUM CHANNEL BLOCKERS
NISOLDIPINE ER TAB 20MG, 30MG, 40MG	-	2	CALCIUM CHANNEL BLOCKERS
NISOLDIPINE ER TAB 25.5MG	-	2	CALCIUM CHANNEL BLOCKERS
nitisinone cap (ORFADIN equiv) (Only available through Dohmen LSS 844-246-5226)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
NITRO-BID OINT	-	3	ANTIANGINAL AGENTS
NITRO-DUR PATCH 0.3MG/HR, 0.8MG/HR	-	3	ANTIANGINAL AGENTS
nitrofurantoin macrocrystals cap (MACRODANTIN equiv)	-	2	URINARY ANTI-INFECTIVES
nitrofurantoin macrocrystals cap 25mg (MACRODANTIN equiv)	-	2	URINARY ANTI-INFECTIVES
nitrofurantoin monohydrate cap (MACROBID equiv)	-	2	URINARY ANTI-INFECTIVES
nitrofurantoin susp (FURADANTIN equiv)	-	2	URINARY ANTI-INFECTIVES
NITROGLYCERIN ER CAP	-	2	ANTIANGINAL AGENTS
NITROGLYCERIN INJ	M	M	ANTIANGINAL AGENTS
NITROGLYCERIN LINGUAL AEROSOL	-	2	ANTIANGINAL AGENTS
nitroglycerin lingual spray (NITROLINGUAL equiv)	-	2	ANTIANGINAL AGENTS
nitroglycerin patch (NITRO-DUR equiv)	-	2	ANTIANGINAL AGENTS
nitroglycerin SL tab (NITROSTAT equiv)	-	1	ANTIANGINAL AGENTS
NITROGLYCERIN/D5W INJ	-	NC	ANTIANGINAL AGENTS
nitroglycerine/d5w inj (NITROGLYCERIN/D5W equiv)	M	M	ANTIANGINAL AGENTS
NITROMIST SPRAY	-	4	ANTIANGINAL AGENTS
NITROSTAT SL TAB	-	NC	ANTIANGINAL AGENTS
NITYR TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NIVESTYM INJ	LPSP	5	HEMATOPOIETIC AGENTS
NIZATIDINE CAP	-	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
nizatidine cap (AXID equiv)	-	2	ULCER DRUGS
NIZATIDINE SOLN	-	2	ULCER DRUGS
nizoral a-d shampoo (NIZORAL equiv)	OTC	NC	DERMATOLOGICALS
NOCDURNA SL TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NOCTIVA EMULSION SPRAY	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
norepinephrine inj (LEVOPHED equiv)	M	M	VASOPRESSORS
norethindrone tab (AYGESTIN equiv)	-	2	PROGESTINS
norethindrone tab (NORA-QD equiv)	-	6	CONTRACEPTIVES
NORGESIC FORTE TAB	-	4	MUSCULOSKELETAL THERAPY AGENTS
NORGESIC TAB FORTE	-	4	MUSCULOSKELETAL THERAPY AGENTS
normal saline flush inj	M	M	MINERALS & ELECTROLYTES
NORMOSOL-M INJ	M	M	MINERALS & ELECTROLYTES
NORMOSOL-R INJ	M	M	MINERALS & ELECTROLYTES
NORMOSOL-R/DEXTROSE INJ	M	M	MINERALS & ELECTROLYTES
NOROXIN TAB	-	4	FLUOROQUINOLONES
NORPACE CR CAP	-	4	ANTIARRHYTHMICS
nortrel tab (OVCON 35 equiv)	-	6	CONTRACEPTIVES
nortriptyline cap (PAMELOR equiv)	-	1	ANTIDEPRESSANTS
nortriptyline oral soln (NORTRIPTYLINE equiv)	-	2	ANTIDEPRESSANTS

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NORTRIPTYLINE SOLN	-	2	ANTIDEPRESSANTS
NORVIR CAP	-	5	ANTIVIRALS
NORVIR POWDER PACK	-	5	ANTIVIRALS
NORVIR SOLN	-	5	ANTIVIRALS
NOURIANZ TAB	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
NOVACORT GEL	-	NC	DERMATOLOGICALS
NOVAFERRUM DROP 15MG/ML	-	6	HEMATOPOIETIC AGENTS
novagesic tab	-	2	ANALGESICS - NONNARCOTIC
NOVOFINE PEN NEEDLE	OTC	3	MEDICAL DEVICES AND SUPPLIES
NOVOLIN 70/30 FLEXPEN INJ	-	3	ANTIDIABETICS
NOVOLIN INJ	-	3	ANTIDIABETICS
NOVOLIN INJ 70/30	-	3	ANTIDIABETICS
NOVOLIN N FLEXPEN INJ	-	3	ANTIDIABETICS
NOVOLIN N RELION INJ	-	3	ANTIDIABETICS
NOVOLIN R FLEXPEN INJ	-	3	ANTIDIABETICS
NOVOLIN VIAL	-	3	ANTIDIABETICS
NOVOLOG FLEXPEN INJ	-	3	ANTIDIABETICS
NOVOLOG INJ	-	3	ANTIDIABETICS
NOVOLOG MIX FLEXPEN INJ	-	3	ANTIDIABETICS
NOVOLOG MIX INJ	-	3	ANTIDIABETICS
NOVOLOG PENFILL INJ	-	3	ANTIDIABETICS
NOVOSEVEN RT INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
NOVOTWIST PEN NEEDLE	OTC	3	MEDICAL DEVICES AND SUPPLIES
NOVOTWIST/NOVOFINE PEN NEEDLE	OTC	3	MEDICAL DEVICES AND SUPPLIES
NOXAFIL SUSP	-	3	ANTIFUNGALS
NOXAFIL TAB	-	3	ANTIFUNGALS
np thyroid tab (ARMOUR THYROID, NATURE THROID equiv)	-	2	THYROID AGENTS
NPLATE INJ	M	M	HEMATOPOIETIC AGENTS
NUBEQA TAB (QL= 4 tabs/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NUCALA INJ (QL= 1 inj/28 days)	LPSP-PA-QL	5	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
NUCARACLINPA KIT	-	NC	DERMATOLOGICALS
NUCARARXPAK KIT	-	NC	DERMATOLOGICALS
NUCORT LOTION	-	4	DERMATOLOGICALS
NUCYNTA ER TAB (QL= 2 tabs/day)	QL	3	ANALGESICS - OPIOID
NUCYNTA TAB (QL= 6 tabs/day)	QL	3	ANALGESICS - OPIOID
NUDERMRXPAK PAK	-	NC	DERMATOLOGICALS
NUDEXTA CAP (QL= 2 caps/day)	PA-QL	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NULOJIX INJ	M	M	ASSORTED CLASSES
NUPLAZID CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
NUPLAZID TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
NUQUIN HP GEL	-	2	DERMATOLOGICALS
NURTEC ODT	-	NC	MIGRAINE PRODUCTS
NUTROPIN AQ INJ, OMNITROPE INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
NUVAKAAN II KIT	-	NC	DERMATOLOGICALS
NUVARING (QL= 1 ring/28 days)	QL	6	CONTRACEPTIVES

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NUVIGIL TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
NUZYRA TAB	-	NC	TETRACYCLINES
NYATA KIT	-	NC	DERMATOLOGICALS
NYMALIZE SOLN	-	NC	CALCIUM CHANNEL BLOCKERS
nystatin cream (MYCOSTATIN CREAM equiv)	-	2	DERMATOLOGICALS
nystatin oint	-	2	DERMATOLOGICALS
nystatin powder	-	2	ANTIFUNGALS
nystatin susp	-	2	MOUTH/THROAT/DENTAL AGENTS
nystatin tab	-	2	ANTIFUNGALS
nystatin topical powder	-	2	DERMATOLOGICALS
NYSTATIN VAGINAL TAB	-	2	VAGINAL PRODUCTS
nystatin/triamcinolone cream	-	4	DERMATOLOGICALS
nystatin/triamcinolone oint	-	4	DERMATOLOGICALS
OCALIVA TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
octreotide inj (SANDOSTATIN equiv)	LPSP-PA	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
OCUDOX KIT	-	4	TETRACYCLINES
ODACTRA SL TAB	-	NC	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
ODEFSEY TAB	-	3	ANTIVIRALS
ODOMZO CAP	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OFEV CAP (QL= 2 caps/day; Only available through Walgreens 888-347-3416)	LD-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
ofloxacin ophth soln (OCUFLOX equiv)	-	2	OPHTHALMIC AGENTS
ofloxacin otic soln (FLOXIN equiv)	-	4	OTIC AGENTS
ofloxacin tab (FLOXIN equiv)	-	2	FLUOROQUINOLONES
OGESTREL TAB	-	6	CONTRACEPTIVES
olanzapine inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
olanzapine ODT (ZYPREXA equiv) (QL= 1 tab/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
olanzapine tab (ZYPREXA equiv) (QL= 1 tab/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
olanzapine/fluoxetine cap (SYMBYAX equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
olmesartan tab (BENICAR equiv)	-	2	ANTIHYPERTENSIVES
olmesartan/amlodipine/hydrochlorothiazide tab (TRIBENZOR TAB equiv)	-	NC	ANTIHYPERTENSIVES
olmesartan/hydrochlorothiazide tab (BENICAR HCT equiv)	-	2	ANTIHYPERTENSIVES
olopatadine nasal spray (PATANASE equiv) (QL= 1 inhaler/30 days)	QL	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
olopatadine ophth soln 0.1% (PATANOL equiv)	-	2	OPHTHALMIC AGENTS
olopatadine ophth soln 0.2% (PATADAY equiv) (QL= 2.5ml/30 days)	QL	2	OPHTHALMIC AGENTS
OLUMIANT TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
OLUX-OLUX-E PACK	-	4	DERMATOLOGICALS
OMECLAMOX-PAK	-	4	ULCER DRUGS
omedia otic soln (AMERICAINE equiv)	-	2	OTIC AGENTS
OMEGA-3 RX PAK COMPLETE	-	NC	ANTIHYPERLIPIDEMICS
omega-3-acid ethyl esters cap (LOVAZA equiv)	-	2	ANTIHYPERLIPIDEMICS
omeprazole cap (QL= 2 caps/day)	QL	1	ULCER DRUGS
omeprazole magnesium DR tab 20mg (PRILOSEC equiv)	OTC	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS

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omeprazole/sodium bicarbonate cap (ZEGERID equiv)	-	NC	ULCER DRUGS
omeprazole/sodium bicarbonate powder pack (ZEGERID equiv)	-	NC	ULCER DRUGS
OMNIPAQUE SOLN	-	NC	DIAGNOSTIC PRODUCTS
OMNIPOD 5 PACK PODS	-	NC	MEDICAL DEVICES AND SUPPLIES
OMNIPOD DASH PODS	-	NC	MEDICAL DEVICES AND SUPPLIES
OMNIPOD STARTER KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
OMONTYS INJ	M	M	HEMATOPOIETIC AGENTS
ONCASPAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ondansetron inj 40mg/20ml (ZOFTRAN equiv)	M	M	ANTIEMETICS
ondansetron ODT (ZOFTRAN equiv) (QL= 15 tabs/30 days)	QL	2	ANTIEMETICS
ondansetron soln (ZOFTRAN equiv) (QL= 150ml/30 days)	QL	2	ANTIEMETICS
ONDANSETRON TAB (QL= 1 tab/30 days)	QL	2	ANTIEMETICS
ondansetron tab 24mg (ZOFTRAN equiv) (QL= 1 tab/30 days)	QL	2	ANTIEMETICS
ondansetron tab 4mg, 8mg (ZOFTRAN equiv) (QL= 15 tabs/30 days)	QL	2	ANTIEMETICS
ondansetron/nacl inj	M	M	ANTIEMETICS
ONEXTON GEL	-	3	DERMATOLOGICALS
ONFI SUSP	-	NC	ANTICONVULSANTS
ONGLYZA TAB	-	NC	ANTIDIABETICS
ONTAK INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ONYCHO-MED KIT	-	NC	DERMATOLOGICALS
ONZETRA XSAIL	-	NC	MIGRAINE PRODUCTS
opium tincture	-	2	ANTIDIARRHEALS
OPSUMIT TAB (Only available through CVS Specialty 800-237-2767)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
ORACIT SOLN	-	4	GENITOURINARY AGENTS - MISCELLANEOUS
ORALAIR SL TAB	-	NC	BIOLOGICALS MISC
ORAPRED ODT	-	4	CORTICOSTEROIDS
ORAVIG TAB	-	4	MOUTH/THROAT/DENTAL AGENTS
ORENCIA CLICK INJ (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA INJ	LPSP-M	M	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 125MG/ML (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 50MG/0.4ML (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 87.5MG/0.7ML (QL= 4 inj/28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
ORFADIN CAP (Only available through Dohmen LSS 844-246-5226)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORFADIN SUSP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORIAHNN CAP	-	NC	ESTROGENS
ORILISSA TAB 150MG (QL=1 tab/day)	PA-QL	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORILISSA TAB 200MG (QL= 2 tabs/day)	PA-QL	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORKAMBI GRANULES PACKET	-	NC	RESPIRATORY AGENTS - MISC.
orphenadrine citrate ER tab (NORFLEX equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
orphenadrine inj	M	M	MUSCULOSKELETAL THERAPY AGENTS

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SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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orphenadrine/aspirin/caffeine tab (NORGESIC FORTE equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
ORTHOCLONE INJ	M	M	ASSORTED CLASSES
ORTHOVISC INJ	M	M	MUSCULOSKELETAL THERAPY AGENTS
ORTIKOS ER CAP	-	NC	CORTICOSTEROIDS
oseltamivir cap (TAMIFLU equiv) (QL= 10 caps/ 180 days)	QL	2	ANTIVIRALS
oseltamivir cap 30mg (TAMIFLU equiv) (QL= 20 caps/ 180 days)	QL	2	ANTIVIRALS
oseltamivir susp (TAMIFLU equiv) (QL= 180ml/180 days)	QL	2	ANTIVIRALS
osmitrol inj	M	M	DIURETICS
OSMOLEX ER TAB	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
OSMOPREP TAB	-	4	LAXATIVES
OTEZLA STARTER PACK (QL= 1 pack/ 28 days)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
OTEZLA TAB (QL= 2 tabs/day)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
oticin drop 1-0.1%	-	2	OTIC AGENTS
otomax-HC otic soln (CORTANE-B equiv)	-	NC	OTIC AGENTS
OTOVEL OTIC SOLN, CIPROFLOXACIN/FLUOCINOLONE OTIC SOLN	-	NC	OTIC AGENTS
OTOZIN OTIC DROPS	-	2	OTIC AGENTS
OVACE PLUS CREAM	-	3	DERMATOLOGICALS
OVACE PLUS FOAM	-	NC	DERMATOLOGICALS
OVEEZA CAP	-	NC	HEMATOPOIETIC AGENTS
oxacillin inj	M	M	PENICILLINS
oxandrolone tab (OXANDRIN equiv)	-	2	ANDROGENS-ANABOLIC
oxaplatin inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
oxaprozin tab (DAYPRO equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
OXAYDO TAB, ROXYBOND TAB	-	3	ANALGESICS - OPIOID
OXAZEPAM CAP	-	2	ANTI-ANXIETY AGENTS
oxazepam cap (SERAX equiv)	-	2	ANTI-ANXIETY AGENTS
OXBRYTA TAB	-	NC	HEMATOPOIETIC AGENTS
oxcarbazepine susp (TRILEPTAL equiv)	-	2	ANTICONVULSANTS
oxcarbazepine tab (TRILEPTAL equiv)	-	2	ANTICONVULSANTS
OXERVATE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
oxiconazole nitrate cream (OXISTAT equiv)	-	4	DERMATOLOGICALS
OXSORALEN LOT	SP	5	DERMATOLOGICALS
OXTELLAR XR TAB	-	NC	ANTICONVULSANTS
oxybutynin ER tab (DITROPAN XL equiv)	-	1	URINARY ANTISPASMODICS
oxybutynin syrup	-	2	URINARY ANTISPASMODICS
oxybutynin tab (DITROPAN equiv)	-	1	URINARY ANTISPASMODICS
oxycodone cap (OXYIR equiv)	-	2	ANALGESICS - OPIOID
oxycodone conc (ROXICODONE equiv)	-	2	ANALGESICS - OPIOID
oxycodone ER tab (OXYCONTIN equiv)	-	NC	ANALGESICS - OPIOID
oxycodone soln	-	2	ANALGESICS - OPIOID
oxycodone soln (ROXICODONE equiv)	-	2	ANALGESICS - OPIOID
oxycodone tab (ROXICODONE equiv)	-	2	ANALGESICS - OPIOID
oxycodone/acetaminophen cap (TYLOX equiv)	-	2	ANALGESICS - OPIOID
OXYCODONE/ACETAMINOPHEN SOLN	-	2	ANALGESICS - OPIOID
oxycodone/acetaminophen tab (PERCOCET equiv)	-	2	ANALGESICS - OPIOID
oxycodone/acetaminophen tab 2.5-300mg (NALOCET equiv)	-	NC	ANALGESICS - OPIOID
OXYCODONE/ASPIRIN TAB	-	2	ANALGESICS - OPIOID
oxycodone/aspirin tab (PERCODAN equiv)	-	2	ANALGESICS - OPIOID

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OXYCODONE/IBUPROFEN TAB	QL	2	ANALGESICS - OPIOID
oxycodone/ibuprofen tab (COMBUNOX equiv) (QL= 28 tabs/30 days)	QL	2	ANALGESICS - OPIOID
OXYCONTIN CR TAB (QL= 4 tabs/day)	QL	3	ANALGESICS - OPIOID
oxymorphone ER tab (OPANA ER equiv) (QL= 2 tabs/day)	QL	2	ANALGESICS - OPIOID
oxymorphone tab 10mg (OPANA equiv) (QL= 8 tabs/day)	QL	2	ANALGESICS - OPIOID
oxymorphone tab 5mg (OPANA equiv) (QL= 16 tabs/day)	QL	2	ANALGESICS - OPIOID
oxytocin inj (PITOCIN equiv)	M	M	OXYTOCICS
OXYTROL PATCH (QL= 8 patches/30 days)	QL	3	URINARY ANTISPASMODICS
OZEMPIC INJ (QL= 1 pack/28 days)	QL	3	ANTIDIABETICS
OZURDEX IMPLANT	-	3	OPHTHALMIC AGENTS
PACERONE TAB	-	4	ANTIARRHYTHMICS
paclitaxel inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PALFORZIA POWDER PACK	-	NC	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
PALFORZIA SPRINKLE CAP	-	NC	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
paliperidone ER tab (INVEGA equiv) (QL= 1 tab/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
paliperidone ER tab 6mg (INVEGA equiv) (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PALONOSETRON INJ	M	M	ANTIEMETICS
palonosetron inj (ALOXI equiv)	M	M	ANTIEMETICS
PALYNZIQ INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
PAMIDRONATE INJ	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
pamidronate inj (PAMIDRONATE equiv)	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
PANCREAZE CAP, PERTZYE CAP, ULTRESA CAP, ZENPEP CAP	-	4	DIGESTIVE AIDS
PANCRELIPASE CAP	-	4	DIGESTIVE AIDS
PANCURONIUM INJ	M	M	NEUROMUSCULAR AGENTS
PANRETIN GEL	-	3	DERMATOLOGICALS
pantoprazole EC tab (PROTONIX equiv) (QL= 2 tabs/day)	QL	2	ULCER DRUGS
pantoprazole inj (PROTONIX equiv)	M	M	ULCER DRUGS
papaverine inj	M	M	CARDIOVASCULAR AGENTS - MISC.
PAPAVERINE SOLN	M	M	CARDIOVASCULAR AGENTS - MISC.
PARAGARD IUD	-	6	CONTRACEPTIVES
paramox hc gel (NOVACORT GEL equiv)	-	NC	DERMATOLOGICALS
PAREGORIC TINCTURE	-	2	ANTIDIARRHEALS
paricalcitol cap (ZEMPLAR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
paricalcitol inj	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
PAROMOMYCIN CAP	-	2	AMINOGLYCOSIDES
paromomycin cap (HUMATIN equiv)	-	2	AMINOGLYCOSIDES
paroxetine cap (BRISDELLE equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
paroxetine ER tab 12.5mg (PAXIL CR equiv) (QL= 1 tab/day)	QL	2	ANTIDEPRESSANTS
paroxetine ER tab 25mg, 37.5mg (PAXIL CR equiv) (QL= 2 tabs/day)	QL	2	ANTIDEPRESSANTS
paroxetine tab 10mg (QL= 1.5 tabs/day)	QL	1	ANTIDEPRESSANTS

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paroxetine tab 20mg, 40mg (PAXIL equiv) (QL= 1 tab/day)	QL	1	ANTIDEPRESSANTS
paroxetine tab 30mg (QL= 2 tabs/day)	QL	1	ANTIDEPRESSANTS
PASER GRANULE	-	4	ANTIMYCOBACTERIAL AGENTS
PATADAY OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PAXIL SUSP (QL= 15ml/day)	QL	3	ANTIDEPRESSANTS
PAZEO OPHTH SOLN 0.7%	-	NC	OPHTHALMIC AGENTS
pb-belladonna elixir (DONNATAL equiv)	-	NC	ULCER DRUGS
PCE TAB	-	4	MACROLIDES
PEDIADERM HC KIT	-	4	DERMATOLOGICALS
PEDIADERM TA KIT	-	4	DERMATOLOGICALS
PEDIARIX INJ	M	M	TOXOIDS
PEDIATEX TDM SUSP	-	4	COUGH/COLD/ALLERGY
pediatric multiple vitamins/fluoride chew tab	-	1	MULTIVITAMINS
pediatric multiple vitamins/fluoride soln	-	2	MULTIVITAMINS
pediatric multiple vitamins/fluoride/iron soln	-	1	MULTIVITAMINS
PEDIPIROX-4 KIT	-	4	DERMATOLOGICALS
PEDIZOLPAK THERAPY PACK	-	NC	DERMATOLOGICALS
PEDVAX HIB INJ	VAC	6	VACCINES
peg 3350/electrolytes soln (GOLYTELY/COLYTE equiv) (Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay)	QL	6	LAXATIVES
PEGANONE TAB	-	3	ANTICONVULSANTS
PEGASYS INJ	-	NC	ANTIVIRALS
PEMAZYRE TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PEN NEEDLE (all other Brands)	OTC	NC	MEDICAL DEVICES AND SUPPLIES
penicillamine tab (DEPEN TITRATAB equiv)	-	2	MISCELLANEOUS THERAPEUTIC CLASSES
penicillamine cap (CUPRIMINE equiv)	-	2	MISCELLANEOUS THERAPEUTIC CLASSES
PENICILLIN G PROCAINE INJ	M	M	PENICILLINS
PENICILLIN G SODIUM INJ	M	M	PENICILLINS
PENICILLIN GK INJ	M	M	PENICILLINS
PENICILLIN VK SOLN	-	2	PENICILLINS
penicillin vk soln (VEETIDS equiv)	-	2	PENICILLINS
penicillin vk tab (VEETIDS equiv)	-	2	PENICILLINS
PENTACEL INJ	VAC	6	TOXOIDS
pentamidine neb soln (NEBUPENT equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
PENTASA CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
pentazocine/acetaminophen tab (TALACEN equiv)	-	2	ANALGESICS - OPIOID
pentazocine/naloxone tab (TALWIN NX equiv)	-	2	ANALGESICS - OPIOID
PENTOSAN CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
pentostatin inj (NIPENT equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
pentoxifylline ER tab (TRENAL equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
PERFOROMIST NEB SOLN (QL= 2 nebs/day)	QL	3	ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS
perindopril tab (ACEON equiv)	-	2	ANTI-HYPERTENSIVES
PERJETA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
permethrin cream (ELIMITE CREAM equiv)	-	2	DERMATOLOGICALS

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perphenazine tab (TRILAFON equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PERPHENAZINE/AMITRIPTYLINE TAB	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
phenazopyridine plus tab (PYRIDIUM equiv)	-	2	URINARY ANTISPASMODICS
phenazopyridine tab (PYRIDIUM equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
phenelzine tab (NARDIL equiv)	-	2	ANTIDEPRESSANTS
phenobarbital elixir	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
phenobarbital sodium inj	M	M	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
phenoxybenzamine cap (DIBENZYLINE equiv)	PA	5	ANTIHYPERTENSIVES
phentolamine mesylate inj	M	M	ANTIHYPERTENSIVES
phenylephrine inj (NEO-SYNEPHRINE equiv)	M	M	VASOPRESSORS
phenylephrine ophth soln (MYDFRIN equiv)	-	2	OPHTHALMIC AGENTS
phenylephrine/chlorpheniramine dm liquid (NASOHIST DM equiv)	-	2	COUGH/COLD/ALLERGY
phenylephrine/guaifenesin soln	-	2	COUGH/COLD/ALLERGY
phenylephrine/guaifenesin soln (ENTEX equiv)	-	2	COUGH/COLD/ALLERGY
phenyltoloxamine/acetaminophen tab	-	2	ANALGESICS - NONNARCOTIC
phenytoin cap (DILANTIN equiv)	-	2	ANTICONVULSANTS
phenytoin chew tab (DILANTIN equiv)	-	2	ANTICONVULSANTS
phenytoin inj	M	M	ANTICONVULSANTS
phenytoin susp (DILANTIN equiv)	-	2	ANTICONVULSANTS
PHEXXI GEL	-	NC	VAGINAL AND RELATED PRODUCTS
PHISOHEX LIQUID	-	4	ANTISEPTICS & DISINFECTANTS
PHOSLYRA SOLN	-	4	GASTROINTESTINAL AGENTS - MISC.
phospha 250 neutral tab (K-PHOS NEUTRAL equiv)	-	2	MINERALS & ELECTROLYTES
phosphasal tab	-	2	URINARY ANTI-INFECTIVES
PHOSPHOLINE OPHTH SOLN	-	3	OPHTHALMIC AGENTS
PHOTOFRIN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PHOTREXA OP KIT	-	NC	OPHTHALMIC AGENTS
PHOTREXA VISCOUS OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
physiolyte soln	-	2	ASSORTED CLASSES
PHYSOSTIGMINE SALICYLATE INJ	M	M	ANTIDOTES
phytonadione tab (MEPHYTON equiv)	-	2	VITAMINS
PICATO GEL	-	4	DERMATOLOGICALS
PIFELTRO TAB	-	4	ANTIVIRALS
pilocarpine ophth soln (ISOPTO CARPINE equiv)	-	1	OPHTHALMIC AGENTS
pilocarpine tab (SALAGEN equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
PILOPINE HS OPHTH GEL	-	3	OPHTHALMIC AGENTS
pimecrolimus cream (ELIDEL equiv) (Covered for members 2 years or older)	-	2	DERMATOLOGICALS
PIMOZIDE TAB	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
pindolol tab (VISKEN equiv)	-	2	BETA BLOCKERS
pioglitazone tab (ACTOS TAB equiv)	-	2	ANTIDIABETICS
pioglitazone/glimepiride tab (DUETACT equiv)	-	2	ANTIDIABETICS
pioglitazone/metformin tab (ACTOPLUS MET equiv)	-	2	ANTIDIABETICS

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piperacillin/tazobactam inj (ZOSYN equiv)	M	M	PENICILLINS
PIQRAY TAB	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
piroxicam cap (FELDENE equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
PLAN B ONE-STEP (QL= 2 tabs/365 days)	QL	6	CONTRACEPTIVES
PLAN B TAB (QL= 4 tabs/365 days)	OTC-QL	6	CONTRACEPTIVES
PLASMA-LYTE A INJ	M	M	MINERALS & ELECTROLYTES
PLASMA-LYTE INJ	M	M	MINERALS & ELECTROLYTES
PLEGRIDY INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
PLEGRIDY PEN INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
PLENVU SOLN	-	NC	LAXATIVES
PLIAGLIS CREAM	-	NC	DERMATOLOGICALS
PNEUMOVAX INJ (QL= 1 vaccine/lifetime)	QL-VAC	6	VACCINES
PODIAPN CAP	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
PODOCON SOLN	-	2	DERMATOLOGICALS
podofilox soln (CONDYLOX equiv)	-	2	DERMATOLOGICALS
polocaine inj	M	M	LOCAL ANESTHETICS-PARENTERAL
polyethylene glycol 3350 powder (MIRALAX equiv)	-	2	LAXATIVES
polymyxin b inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
polymyxin b/trimethoprim ophth soln (POLYTRIM equiv)	-	2	OPHTHALMIC AGENTS
POLY-VI-FLOR SUSP	-	NC	MULTIVITAMINS
POMALYST CAP	-	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
posaconazole DR tab (NOXAFIL equiv)	-	2	ANTIFUNGALS
POT/CHLORIDE EFFER TAB	-	2	MINERALS & ELECTROLYTES
POTABA CAP	-	4	VITAMINS
POTABA POWDER PACKET	-	3	VITAMINS
POTABA TAB	-	4	VITAMINS
potassium acetate inj	M	M	MINERALS & ELECTROLYTES
potassium bicarbonate effer tab (K-LYTE equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride effer tab (K-LYTE/CL equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride ER cap (MICRO-K equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride ER tab (K-TAB equiv)	-	2	MINERALS & ELECTROLYTES
POTASSIUM CHLORIDE INJ	M	M	MINERALS & ELECTROLYTES
potassium chloride micro tab (K-DUR equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride powder packet (KLOR-CON equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride soln	-	2	MINERALS & ELECTROLYTES
POTASSIUM CHLORIDE/NACL INJ	M	M	MINERALS & ELECTROLYTES
potassium citrate CR tab (UROCIT-K TAB equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
potassium citrate/citric acid soln (POLYCITRA-K equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
potassium phosphate inj	M	M	MINERALS & ELECTROLYTES
POTIGA TAB (QL= 3 tabs/day)	QL	3	ANTICONVULSANTS
PRADAXA CAP (QL= 2 caps/day)	QL	3	ANTICOAGULANTS
PRALIDOXIME INJ	M	M	ANTIDOTES
PRALUENT INJ (QL= 2 inj/28 days)	PA-QL	3	ANTIHYPERLIPIDEMICS

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pramipexole ER tab (MIRAPEX ER equiv)	-	2	ANTIPARKINSON AGENTS
pramipexole tab (MIRAPEX equiv)	-	2	ANTIPARKINSON AGENTS
PRAMOSONE E CREAM	-	NC	DERMATOLOGICALS
PRAMOSONE LOTION	-	3	DERMATOLOGICALS
PRAMOSONE OINT	-	3	DERMATOLOGICALS
pramox gel	-	2	DERMATOLOGICALS
pramoxine/hydrocortisone cream (ANALPRAM-HC equiv)	-	NC	ANORECTAL AGENTS
pramoxine/hydrocortisone cream kit (ANALPRAM-HC equiv)	-	2	ANORECTAL AGENTS
pramoxine-HC AQ otic soln (CORTANE-B AQUEOUS equiv)	-	2	OTIC AGENTS
PRASCION RA CREAM	-	3	DERMATOLOGICALS
prasugrel tab (EFFIENT equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
pravastatin tab (PRAVACHOL equiv)	-	1	ANTIHYPERLIPIDEMICS
praziquantel tab (BILTRICIDE equiv)	-	2	ANTHELMINTICS
prazosin cap (MINIPRESS equiv)	-	2	ANTIHYPERTENSIVES
PRECISION XTRA TEST STRIP	OTC	NC	DIAGNOSTIC PRODUCTS
PRED FORTE OPHTH SUSP	-	4	OPHTHALMIC AGENTS
PRED MILD OPHTH SOLN	-	3	OPHTHALMIC AGENTS
PREDNICARBATE CREAM	-	2	DERMATOLOGICALS
prednicarbate cream (DERMATOP equiv)	-	2	DERMATOLOGICALS
PREDNICARBATE OIN	-	2	DERMATOLOGICALS
PREDNISOLONE OPHTH SUSP	-	2	OPHTHALMIC AGENTS
PREDNISOLONE OPHTH SUSP	-	3	OPHTHALMIC AGENTS
PREDNISOLONE ORAL SOLN	-	2	CORTICOSTEROIDS
PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
prednisolone soln (PEDIAPRED equiv)	-	2	CORTICOSTEROIDS
PREDNISOLONE SOLN	-	4	CORTICOSTEROIDS
PREDNISOLONE SYRUP	-	2	CORTICOSTEROIDS
prednisolone syrup (PRELONE equiv)	-	2	CORTICOSTEROIDS
PREDNISOLONE/MOXIFLOXACIN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/KETOROLAC OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/NEPAFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/NEPAFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISONE INTENSOL	-	4	CORTICOSTEROIDS
prednisone pack	-	2	CORTICOSTEROIDS
PREDNISONE SOLN	-	2	CORTICOSTEROIDS
prednisone tab (DELTASONE equiv)	-	1	CORTICOSTEROIDS
PREDNISONE/DIPHENHYDRAMINE KIT	-	NC	CORTICOSTEROIDS
PREFEST TAB	-	4	ESTROGENS
pregabalin cap (LYRICA equiv)	-	2	ANTICONVULSANTS
pregabalin soln (LYRICA equiv)	-	2	ANTICONVULSANTS
PREGENNA TAB	-	NC	MULTIVITAMINS
PREMARIN INJ	M	M	ESTROGENS
PREMARIN TAB	-	3	ESTROGENS
PREMARIN VAGINAL CREAM	-	3	VAGINAL PRODUCTS
premasol soln	M	M	NUTRIENTS
PREMPHASE TAB, PREMPRO TAB	-	3	ESTROGENS
PRENARA CAP	-	NC	MULTIVITAMINS

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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Drug Name	Special Code	Tier	Category
PRENATABS RX TAB	-	4	MULTIVITAMINS
PRENATAL 19 CHEW TAB	-	4	VITAMINS
PRENATAL 19 TAB	-	4	MULTIVITAMINS
PRENATAL VITAMINS (NON-PREFERRED)	--OTC	4	MULTIVITAMINS
PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	-	1	VITAMINS
PREPOPIK PAK	-	NC	LAXATIVES
PRESTALIA TAB	-	NC	ANTIHYPERTENSIVES
PRETOMANID TAB	-	NC	ANTIMYCOBACTERIAL AGENTS
PREVACID SOLUTAB (QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	QL-ST	4	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
PREVIDENT 5000 PLUS CREAM (Covered at \$0 for members 5 years or younger; All other members covered at preferred brand copay)	-	6	MOUTH/THROAT/DENTAL AGENTS
PREVNAR 13 INJ (QL= 1 vaccine/lifetime)	QL-VAC	6	VACCINES
PREVYMIS TAB	-	NC	ANTIVIRALS
PREZCOBIX TAB	-	5	ANTIVIRALS
PREZISTA SUSP	SP	5	ANTIVIRALS
PREZISTA TAB	-	5	ANTIVIRALS
PRIALT INJ	M	M	ANALGESICS - NONNARCOTIC
PRIFTIN TAB	-	3	ANTIMYCOBACTERIAL AGENTS
PRILOSEC OTC DR TAB	OTC	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
PRIMAQUINE TAB	-	2	ANTIMALARIALS
primaquine tab (PRIMAQUINE equiv)	-	2	ANTIMALARIALS
PRIMAXIN IM INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
primidone tab (MYSOLINE equiv)	-	2	ANTICONSULSANTS
PRIMSOL SOLN	-	4	ANTI-INFECTIVE AGENTS - MISC.
PRISTIQ TAB	-	NC	ANTIDEPRESSANTS
PROAIR HFA INHALER	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
probenecid tab (BENEMID equiv)	-	2	GOUT AGENTS
procainamide inj	M	M	ANTIARRHYTHMICS
prochlorperazine inj	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS
prochlorperazine supp (COMPAZINE equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
prochlorperazine tab (COMPAZINE equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PROCORT CREAM	-	NC	ANORECTAL AGENTS
PROCRIT INJ	LPSP-PA	5	HEMATOPOIETIC AGENTS
PROCTOFOAM HC FOAM	-	3	ANORECTAL AGENTS
proctosol HC cream (ANUSOL HC equiv)	-	2	ANORECTAL AGENTS
PROCYSBI CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PROCYSBI GRANULES PACKET	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PROFE CAP 180MG	OTC	6	HEMATOPOIETIC AGENTS
PROFERRIN ES TAB	-	6	HEMATOPOIETIC AGENTS
PROFILNINE INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
progesterone cap (PROMETRIUM equiv)	-	2	PROGESTINS
progesterone oil inj	M	M	PROGESTINS
PROGLYCEM SUSP	-	4	ANTIDIABETICS

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PROGRAF INJ	M	M	ASSORTED CLASSES
PROGRAF PACKET	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
PROLENSA OPHTH SOLN	-	3	OPHTHALMIC AGENTS
PROLEUKIN INJ	-	NC	ANTINEOPLASTICS
PROLIA INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
PROMACTA POWDER	-	NC	HEMATOPOIETIC AGENTS
PROMACTA TAB	LPSP-PA	5	HEMATOPOIETIC AGENTS
PROMACTA TAB 12.5MG	-	3	HEMATOPOIETIC AGENTS
promethazine DM syrup	-	2	COUGH/COLD/ALLERGY
promethazine inj (PHENERGAN equiv)	M	M	ANTIHISTAMINES
promethazine supp (PHENERGAN equiv)	-	2	ANTIHISTAMINES
promethazine syrup	-	2	ANTIHISTAMINES
promethazine tab (PHENERGAN equiv)	-	2	ANTIHISTAMINES
PROMETHAZINE VC SYRUP	-	2	COUGH/COLD/ALLERGY
promethazine VC syrup (PHENERGAN VC equiv)	-	2	COUGH/COLD/ALLERGY
PROMETHAZINE VC/CODEINE SYRUP	-	2	COUGH/COLD/ALLERGY
promethazine VC/codeine syrup (PHENERGAN VC/CODEINE equiv)	-	2	COUGH/COLD/ALLERGY
promethazine/codeine syrup (PHENERGAN/CODEINE equiv)	-	2	COUGH/COLD/ALLERGY
PROMETHEGAN SUPP	-	2	ANTIHISTAMINES
propafenone ER cap (RYTHMOL SR equiv)	-	2	ANTIARRHYTHMICS
propafenone tab (RYTHMOL equiv)	-	2	ANTIARRHYTHMICS
PROPANTHELINE TAB	-	2	ULCER DRUGS
proparacaine ophth soln (ALCAINE equiv)	-	2	OPHTHALMIC AGENTS
propofol inj	M	M	GENERAL ANESTHETICS
propranolol ER cap (INDERAL LA equiv)	-	2	BETA BLOCKERS
propranolol inj (HEMANGEOL equiv)	M	M	BETA BLOCKERS
PROPRANOLOL SOLN	-	2	BETA BLOCKERS
propranolol tab (INDERAL equiv)	-	1	BETA BLOCKERS
PROPRANOLOL/HYDROCHLOROTHIAZIDE TAB	-	2	ANTIHYPERTENSIVES
propylthiouracil tab	-	2	THYROID AGENTS
PROQUAD INJ	VAC	6	VACCINES
PROSTIGMIN TAB	-	3	ANTIMYASTHENIC/CHOLINERGIC AGENTS
PROTAMINE SULFATE SOLN	M	M	HEMATOLOGICAL AGENTS - MISC.
PROTID TAB	-	2	COUGH/COLD/ALLERGY
PROTONIX INJ	-	NC	ULCER DRUGS
protriptyline tab (VIVACTIL equiv)	-	2	ANTIDEPRESSANTS
PROVENGE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PROZAC WEEKLY CAP	-	NC	ANTIDEPRESSANTS
PULMOZYME INH SOLN	LPSP-PA	5	RESPIRATORY AGENTS - MISC.
PUREFOLIX TAB	-	NC	HEMATOPOIETIC AGENTS
PYLERA CAP	-	3	ULCER DRUGS
pyrazinamide tab	-	2	ANTIMYCOBACTERIAL AGENTS
pyridostigmine CR tab (MESTINON equiv)	-	2	ANTIMYASTHENIC/CHOLINERGIC AGENTS
pyridostigmine tab (MESTINON equiv)	-	2	ANTIMYASTHENIC/CHOLINERGIC AGENTS
PYRIDOSTIGMINE TAB 30MG	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
pyridoxine inj	M	M	VITAMINS
pyridostigmine soln (MESTINON equiv)	-	2	ANTIMYASTHENIC/CHOLINERGIC AGENTS

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SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
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	Step Therapy		Vaccine Program		RxCENTS

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Drug Name	Special Code	Tier	Category
pyrimethamine tab (DARAPRIM equiv) (QL= 3 tabs/day; Only available through Walgreens 888-347-3416)	LD-PA-QL	5	ANTIMALARIALS
PYRIMETHAMINE/LEUCOVORIN CAP	-	NC	ANTIMALARIALS
PYROGALL ACD OINT	-	2	DERMATOLOGICALS
QBRELIS SOLN	PA	4	ANTIHYPERTENSIVES
QBREXZA PAD	-	NC	DERMATOLOGICALS
QINLOCK TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
QMIIZ ODT TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
QNASL NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4	NASAL AGENTS - SYSTEMIC AND TOPICAL
QTERN TAB	-	NC	ANTIDIABETICS
QUADRAMET INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
quetiapine tab (SEROQUEL equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
quetiapine tab 25mg (QL= 3 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
quetiapine tab 50mg (QL= 3 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
quetiapine XR tab (SEROQUEL XR equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
QUILLIVANT XR SUSP (QL= 360ml/30 days)	QL	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
quinapril tab (ACCUPRIL equiv)	-	2	ANTIHYPERTENSIVES
quinapril/hydrochlorothiazide tab (ACCURETIC equiv)	-	2	ANTIHYPERTENSIVES
quinidine gluconate CR tab	-	2	ANTIARRHYTHMICS
QUINIDINE GLUCONATE INJ	M	M	ANTIARRHYTHMICS
QUINIDINE SULFATE ER TAB	-	2	ANTIARRHYTHMICS
quinidine sulfate tab	-	2	ANTIARRHYTHMICS
quinine sulfate cap	-	2	ANTIMALARIALS
QUINIXIL PAK	-	NC	DERMATOLOGICALS
QUINOSONE KIT	-	NC	DERMATOLOGICALS
QVAR INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
QVAR REDIHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
RABAVERT INJ	VAC	6	VACCINES
rabeprazole EC tab (ACIPHEX equiv) (QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	QL-ST	2	ULCER DRUGS
RAGWITEK SL TAB	-	NC	BIOLOGICALS MISC
raloxifene tab (EVISTA equiv) (Covered at \$0 for women 35 years or older; All other members covered at generic copay)	-	6	ENDOCRINE AND METABOLIC AGENTS - MISC.
ramelteon tab (ROZEREM equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ramipril cap (ALTACE equiv)	-	2	ANTIHYPERTENSIVES
RANEXA TAB	-	3	ANTIANGINAL AGENTS
ranitidine cap (ZANTAC equiv)	-	NC	ULCER DRUGS
RANITIDINE INJ	M	M	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
ranitidine syrup (ZANTAC equiv)	-	NC	ULCER DRUGS
ranitidine tab (Rx Only) (ZANTAC equiv)	-	NC	ULCER DRUGS
ranolazine tab (RANEXA equiv)	-	2	ANTIANGINAL AGENTS

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RAPAFLO CAP	-	3	GENITOURINARY AGENTS - MISCELLANEOUS
RAPAMUNE SOLN	-	5	MISCELLANEOUS THERAPEUTIC CLASSES
rasagiline tab (AZILECT equiv)	¢	2	ANTIPARKINSON AGENTS
RAYALDEE CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
RAYOS TAB	-	4	CORTICOSTEROIDS
REBETOL SOLN	LPSP-PA	5	ANTIVIRALS
REBIF INJ	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
REBLOZYL INJ	-	NC	HEMATOPOIETIC AGENTS
RECOMBINATE INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
RECTIV OINT	-	3	ANORECTAL AGENTS
REGONOL INJ	M	M	ANTIMYASTHENIC/CHOLINERGIC AGENTS
REGRANEX GEL	-	4	DERMATOLOGICALS
RELAFEN DS TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
RELENZA DISKHALER (QL= 1 inhaler/180 days)	QL	3	ANTIVIRALS
RELISTOR INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELISTOR INJ KIT	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELISTOR TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
REMEDIENT CAP	-	NC	MULTIVITAMINS
REMICADE INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
REMODULIN INJ 10MG/ML	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
REMODULIN INJ 1MG/ML	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
REMODULIN INJ 2.5MG/ML	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
REMODULIN INJ 5MG/ML	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
RENAGEL TAB	-	4	GASTROINTESTINAL AGENTS - MISC.
RENAGEL TAB 800MG	-	4	GASTROINTESTINAL AGENTS - MISC.
RENOVA CREAM	-	4	DERMATOLOGICALS
RENVELA TAB	-	3	GASTROINTESTINAL AGENTS - MISC.
repaglinide tab (PRANDIN equiv)	-	2	ANTIDIABETICS
REPAGLINIDE TAB	-	4	ANTIDIABETICS
REPATHA INJ (QL= 2 inj/28 days)	PA-QL	3	ANTIHYPERTENSIVES
REPATHA PUSHTRONEX INJ (QL= 1 inj/28 days)	PA-QL	3	ANTIHYPERTENSIVES
REPLESTA WAFER	OTC	6	VITAMINS
RESCON-JR TAB	-	2	COUGH/COLD/ALLERGY
RESCRIPTOR TAB	-	3	ANTIVIRALS
RESERPINE TAB	-	2	ANTIHYPERTENSIVES
RESERVAPAK SYRUP	-	NC	ALTERNATIVE MEDICINES
RESPA-BR TAB	-	2	ANTIHISTAMINES
RESTASIS OPHTH EMULSION (QL= 60 unit dose vials/30 days)	PA-QL	3	OPHTHALMIC AGENTS
RETACRIT INJ	-	NC	HEMATOPOIETIC AGENTS
RETEVMO CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RETISERT IMPLANT	-	3	OPHTHALMIC AGENTS
RETROVIR INJ	M	M	ANTIVIRALS
REVATIO SUSP	-	NC	CARDIOVASCULAR AGENTS - MISC.
REVESTA CAP	-	NC	HEMATOPOIETIC AGENTS
REVLIMID CAP (Restricted to Oncology or Hematology Specialist)	PSP-RS	5	ASSORTED CLASSES
revonto inj	M	M	MUSCULOSKELETAL THERAPY AGENTS

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REYATAZ POWDER PACK	-	5	ANTIVIRALS
REYVOW TAB	-	NC	MIGRAINE PRODUCTS
REZIRA SOLN	-	3	COUGH/COLD/ALLERGY
REZYST CHEW TAB	-	NC	ANTIDIARRHEALS
RHEUMATREX TAB	-	4	ANALGESICS - ANTI-INFLAMMATORY
RHOFADE CREAM	-	NC	DERMATOLOGICALS
RHOPHYLAC INJ	M	M	PASSIVE IMMUNIZING AGENTS
RHOPRESSA OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
RIASTAP	M	M	HEMATOLOGICAL AGENTS - MISC.
RIAX FOAM	-	2	DERMATOLOGICALS
RIBAPAK TAB	LPSP-PA	2	ANTIVIRALS
ribavirin cap (REBETOL equiv)	LPSP-PA	2	ANTIVIRALS
ribavirin inh soln (VIRAZOLE equiv)	PA-SP	5	ANTIVIRALS
ribavirin tab (COPEGUS equiv)	LPSP-PA	2	ANTIVIRALS
RIBAVIRIN TAB 400MG	LPSP-PA	2	ANTIVIRALS
ribavirin tab 400mg (COPEGUS equiv)	LPSP-PA	2	ANTIVIRALS
ribavirin tab 600mg (COPEGUS equiv)	LPSP-PA	2	ANTIVIRALS
RIDAURA CAP	-	3	ANALGESICS - ANTI-INFLAMMATORY
rifabutin cap (MYCOBUTIN equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
RIFAMATE CAP	-	4	ANTIMYCOBACTERIAL AGENTS
rifampin cap (RIFADIN equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
rifampin inj	M	M	ANTIMYCOBACTERIAL AGENTS
RIFATER TAB	-	4	ANTIMYCOBACTERIAL AGENTS
RIGHT STEP PRENATAL VITAMINS	OTC	1	MULTIVITAMINS
riluzole tab (RILUTEK equiv)	SP	5	NEUROMUSCULAR AGENTS
RIMANTADINE TAB	-	2	ANTIVIRALS
ringers inj	M	M	MINERALS & ELECTROLYTES
ringers irrigation	-	2	ASSORTED CLASSES
RINVOQ ER TAB (QL= 1 tab/day)	LPSP-PA-QL	5	ANALGESICS - ANTI-INFLAMMATORY
RIOMET ER SUSP	-	4	ANTIDIABETICS
RIOMET SOLN	-	3	ANTIDIABETICS
risedronate DR tab (ATELVIA equiv) (QL= 4 tabs/28 days; Step Therapy requires trial of alendronate, ibandronate or FOSAMAX+D)	QL-ST	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
risedronate tab (ACTONEL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
RISPERIDONE ODT (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone ODT (RISPERDAL M equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone soln (RISPERDAL equiv) (QL= 240ml/30 days)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone tab (RISPERDAL equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ritonavir tab (NORVIR equiv)	-	5	ANTIVIRALS
RITUXAN INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
rivastigmine cap (EXELON equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
rivastigmine patch (EXELON equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
rizatriptan ODT (MAXALT equiv) (QL= 9 tabs/30 days)	QL	2	MIGRAINE PRODUCTS
rizatriptan tab (MAXALT equiv) (QL= 9 tabs/30 days)	QL	2	MIGRAINE PRODUCTS
ROCKLATAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
rocuronium inj	M	M	NEUROMUSCULAR AGENTS

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ropinirole ER tab (REQUIP XL equiv)	-	2	ANTIPARKINSON AGENTS
ropinirole tab (REQUIP equiv)	-	2	ANTIPARKINSON AGENTS
ROPIVICAINE/CLONIDINE/KETOROLAC INJ	-	NC	LOCAL ANESTHETICS-PARENTERAL
ROSULA WASH	-	NC	DERMATOLOGICALS
rosuvastatin tab 10mg (CRESTOR equiv)	-	1	ANTIHYPERLIPIDEMICS
rosuvastatin tab 20mg (CRESTOR equiv)	-	1	ANTIHYPERLIPIDEMICS
rosuvastatin tab 40mg (CRESTOR equiv)	-	1	ANTIHYPERLIPIDEMICS
rosuvastatin tab 5mg (CRESTOR equiv)	-	1	ANTIHYPERLIPIDEMICS
ROTARIX SUS	VAC	6	VACCINES
ROTATEQ SUS	VAC	6	VACCINES
ROXICET SOLN	-	3	ANALGESICS - OPIOID
ROZEREM TAB (QL= 1 tab/day)	QL	4	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ROZLYTREK CAP (QL= 3 caps/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RUBRACA TAB (QL= 4 tabs/day; Only available through Avella Pharmacy (877) 546-5779)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RUCONEST INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
RUKOBIA ER TAB	-	NC	ANTIVIRALS
RUZURGI TAB	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
RYBELSUS TAB (QL=1 tab/day)	QL	3	ANTIDIABETICS
RYBIX ODT	-	4	ANALGESICS - OPIOID
RYCLORA SYRUP, DEXCHLORPHENIRAMINE SYRUP	-	2	ANTIHISTAMINES
RYDAPT CAP	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RYTARY CAP	-	NC	ANTIPARKINSON AGENTS
RYVENT TAB	-	NC	ANTIHISTAMINES
SABRIL POWDER PACK (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTICONVULSANTS
SABRIL TAB (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTICONVULSANTS
SAFYRAL TAB	-	6	CONTRACEPTIVES
SAIZEN INJ, SEROSTIM INJ, ZORBTIVE INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
salicylic acid aerosol	-	2	DERMATOLOGICALS
salicylic acid cream	-	2	DERMATOLOGICALS
salicylic acid gel	-	2	DERMATOLOGICALS
salicylic acid liquid	-	2	DERMATOLOGICALS
SALICYLIC ACID LOTION	-	2	DERMATOLOGICALS
salicylic acid shampoo (SALEX equiv)	-	2	DERMATOLOGICALS
SALICYLIC ACID SOLN	-	2	DERMATOLOGICALS
SALIMEZ FORTE CREAM	-	NC	DERMATOLOGICALS
SALISOL SOLN 23%	-	NC	DERMATOLOGICALS
salsalate tab (DISALCID equiv)	-	3	ANALGESICS - NONNARCOTIC
SAMSCA TAB	PA-PSP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SANCUSO (QL= 1 patch/30 days)	QL	3	ANTIEMETICS
SANDIMMUNE SOLN 100MG/ML	-	5	ASSORTED CLASSES
SANDOSTATIN LAR INJ KIT	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SANTYL OINT (QL= 90gm/30 days)	QL	3	DERMATOLOGICALS

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SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
ST	Limited to two 15 day fills per month for first 3 months	VAC	Smoking Cessation	¢	Available through Specialty Pharmacy Program
	Step Therapy		Vaccine Program		RxCENTS

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SAPHRIS SL TAB (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	4	ANTIPSYCHOTICS/ANTIMANIC AGENTS
SARAFEM TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SAVAYSA TAB	-	NC	ANTICOAGULANTS
SAVELLA PAK	-	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SAVELLA TAB	-	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SAXENDA INJ	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
SCARCIN GEL	-	NC	DERMATOLOGICALS
scarcin gel (SCARCIN equiv)	-	NC	DERMATOLOGICALS
SCARCIN LIQUID ROLL-ON	-	NC	DERMATOLOGICALS
SCOPOLAMINE INJ	M	M	ULCER DRUGS
scopolamine patch (TRANSDERM-SCOP equiv)	-	2	ANTIEMETICS
seb-prev cream (OVACE CREAM equiv)	-	1	DERMATOLOGICALS
SECUADO PATCH	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
SEEBRI NEOHALER CAP	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SEGLUROMET TAB	-	NC	ANTIDIABETICS
selegiline cap (ELDEPRYL equiv)	-	2	ANTIPARKINSON AGENTS
selegiline tab (ELDEPRYL equiv)	-	2	ANTIPARKINSON AGENTS
SELENIUM INJ	M	M	MINERALS & ELECTROLYTES
selenium sulfide lotion	-	2	DERMATOLOGICALS
selenium sulfide shampoo (SELSEB equiv)	-	2	DERMATOLOGICALS
selenium sulfide shampoo 2.3% (SELRX equiv)	-	NC	DERMATOLOGICALS
SELRX SHAMPOO 2.3%	-	NC	DERMATOLOGICALS
SELZENTRY SOLN	-	5	ANTIVIRALS
SELZENTRY TAB	-	5	ANTIVIRALS
SENSIPAR TAB	-	3	ENDOCRINE AND METABOLIC AGENTS - MISC.
SEREVENT DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SERNIVO SPRAY	-	NC	DERMATOLOGICALS
sertraline conc (ZOLOFT equiv)	-	2	ANTIDEPRESSANTS
sertraline tab 100mg (ZOLOFT equiv) (QL= 2 tabs/day)	QL	1	ANTIDEPRESSANTS
sertraline tab 25mg, 50mg (ZOLOFT equiv) (QL= 1.5 tabs/day)	QL	1	ANTIDEPRESSANTS
SEVELAMER CARBONATE TAB	-	3	GASTROINTESTINAL AGENTS - MISC.
sevelamer hydrochloride tab (RENAGEL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sevelamer powder pak (REVELA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sevelamer tab (REVELA TAB equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sevoflurane soln	-	2	GENERAL ANESTHETICS
SEYSARA TAB	-	NC	TETRACYCLINES
SHINGRIX INJ (Covered for members age 50 or older)	VAC	6	VACCINES
SIGNIFOR INJ (QL= 2 vials/day; Only available through Accredio 888-773-7376)	LD-PA-QL	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SIKLOS TAB	-	NC	HEMATOPOIETIC AGENTS
SILALITE PAK MIS	-	NC	DERMATOLOGICALS
sildenafil inj (REVATIO equiv)	M	M	CARDIOVASCULAR AGENTS - MISC.

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sildenafil susp (REVATIO equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
sildenafil tab 20mg (REVATIO equiv)	PA	2	CARDIOVASCULAR AGENTS - MISC.
SILENOR TAB (QL= 1 tab/day)	QL	4	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
SILIPAC KIT	-	NC	DERMATOLOGICALS
SILIQ INJ	-	NC	DERMATOLOGICALS
silodosin cap (RAPAFLO equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
SILPHEN COUGH SYRUP	-	2	ANTIHISTAMINES
silver nitrate applicator (SILVER NITRATE equiv)	-	NC	DERMATOLOGICALS
SILVER NITRATE OINT	-	2	DERMATOLOGICALS
SILVER NITRATE SOLN	-	2	DERMATOLOGICALS
silver sulfadiazine cream (SILVADENE CREAM equiv)	-	2	DERMATOLOGICALS
SIMBRINZA OPHTH SUSP	-	3	OPHTHALMIC AGENTS
SIMCOR TAB	-	NC	ANTIHYPERLIPIDEMICS
SIMPONI SC INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
SIMULECT INJ	M	M	ASSORTED CLASSES
SIMVASTATIN SUSP	-	NC	ANTIHYPERLIPIDEMICS
simvastatin tab (ZOCOR equiv)	-	1	ANTIHYPERLIPIDEMICS
simvastatin tab 80mg (ZOCOR equiv) (This strength excluded from coverage)	-	NC	ANTIHYPERLIPIDEMICS
SINUVA NASAL IMPLANT	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
sirolimus soln (RAPAMUNE equiv)	-	5	MISCELLANEOUS THERAPEUTIC CLASSE
sirolimus tab (RAPAMUNE equiv)	-	2	ASSORTED CLASSES
SIRTURO TAB (Restricted to Infectious Disease Specialist)	PSP-RS	5	ANTIMYCOBACTERIAL AGENTS
SITZMARKS CAP	-	NC	DIAGNOSTIC PRODUCTS
SIVEXTRO TAB (QL= 6 tabs/fill)	PA-QL	4	ANTI-INFECTIVE AGENTS - MISC.
SKELID TAB	-	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SKLICE LOTION	-	4	DERMATOLOGICALS
SKYRIZI INJ (QL= 2 inj/84 days)	LPSP-PA-QL	5	DERMATOLOGICALS
SLOW RELEASE IRON TAB	-	6	HEMATOPOIETIC AGENTS
SLYND TAB	-	NC	CONTRACEPTIVES
SM IRON TAB	-	6	HEMATOPOIETIC AGENTS
smz/tmp (DS) tab (BACTRIM DS equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
smz/tmp susp (BACTRIM, SEPTRA equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
smz-tmp inj (SMZ-TMP INJ equiv)	M	M	ANTI-INFECTIVE AGENTS - MISC.
SODIUM ACETATE INJ	M	M	MINERALS & ELECTROLYTES
SODIUM BICARBONATE INJ	M	M	MINERALS & ELECTROLYTES
sodium chloride 0.9% irr soln	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
sodium chloride inj	M	M	MINERALS & ELECTROLYTES
sodium chloride inj 0.45%	M	M	MINERALS & ELECTROLYTES
sodium chloride neb soln (HYPER-SAL equiv)	-	2	COUGH/COLD/ALLERGY
sodium ferric gluconate complex in sucrose inj	M	M	HEMATOPOIETIC AGENTS
sodium fluoride cream (PREVIDENT 5000 PLUS equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6	MOUTH/THROAT/DENTAL AGENTS
sodium fluoride gel (PREVIDENT equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
SODIUM FLUORIDE LOZENGE (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6	MINERALS & ELECTROLYTES
sodium fluoride paste (PREVIDENT equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS

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sodium fluoride rinse (PREVIDENT equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
sodium fluoride soln (LURIDE SOLN equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6	MINERALS & ELECTROLYTES
SODIUM FLUORIDE TAB (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6	MINERALS & ELECTROLYTES
sodium fluoride tab (LURIDE equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6	MINERALS & ELECTROLYTES
sodium fluoride/potassium nitrate paste (PREVIDENT equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
SODIUM LACTATE INJ	M	M	MINERALS & ELECTROLYTES
SODIUM NITRITE INJ	M	M	ANTIDOTES
sodium phenylbutyrate powder (BUPHENYL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
sodium phenylbutyrate tab (BUPHENYL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
sodium phosphate inj	M	M	MINERALS & ELECTROLYTES
sodium polystyrene susp (SPS equiv)	-	2	ASSORTED CLASSES
sodium sulfacetamide gel (OVACE PLUS equiv)	-	1	DERMATOLOGICALS
sodium sulfacetamide gel	-	2	DERMATOLOGICALS
sodium sulfacetamide lotion (KLARON equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide shampoo (OVACE equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide wash (OVACE WASH equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur cream (PLEXION SCT equiv)	-	2	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR EMULSION	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur emulsion (ROSAC WASH equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur emulsion (ROSULA equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur foam (CLARIFOAM EF equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur gel (ROSULA equiv)	-	1	DERMATOLOGICALS
sodium sulfacetamide/sulfur lotion (SULFACET R equiv)	-	2	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR LOTION	-	3	DERMATOLOGICALS
sodium sulfacetamide/sulfur pad (PLEXION CLEANSING CLOTH equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur susp (PLEXION TS equiv)	-	2	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR SUSP	-	4	DERMATOLOGICALS
sodium sulfacetamide/sulfur wash (SUMAXIN WASH equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/urea pad (ROSULA equiv)	-	2	DERMATOLOGICALS
sodium thiosulfate inj	M	M	ANTIDOTES
SOFOSBUVIR/VELPATASVIR TAB (QL= 1 tab/ day)	LPSP-PA-QL	5	ANTIVIRALS
SOLARAVIX PAK	-	NC	DERMATOLOGICALS
solifenacin tab (VESICARE equiv)	-	2	URINARY ANTISPASMODICS
SOLLIQUA INJ	-	NC	ANTIDIABETICS
SOLIRIS INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
SOLODYN TAB	-	4	TETRACYCLINES
SOLOSEC GRANULES PACKET	-	NC	AMEBICIDES
SOLTAMOX SOLN	-	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SOLU-CORTEF INJ	M	M	CORTICOSTEROIDS
SOMA TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOMATULINE INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SOMAVERT INJ (Only available through Walgreens 888-347-3416)	LD-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.

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SOOLANTRA CREAM	-	NC	DERMATOLOGICALS
SORBITOL IRRIGATION	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
SORBITOL/MANNITOL SOLN	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
SORILUX FOAM	-	NC	DERMATOLOGICALS
sotalol AF tab (BETAPACE AF equiv)	-	2	BETA BLOCKERS
SOTALOL HCL INJ	M	M	BETA BLOCKERS
sotalol tab (BETAPACE equiv)	-	2	BETA BLOCKERS
SOTYLIZE ORAL SOLN	-	NC	BETA BLOCKERS
SOVALDI PELLETT PAK	-	NC	ANTIVIRALS
SOVALDI TAB	-	NC	ANTIVIRALS
SPECTRACEF TAB	-	2	CEPHALOSPORINS
SPINOSAD SUSP	-	2	DERMATOLOGICALS
SPIRIVA HANDIHALER (QL= 1 inhaler/30 days)	QL	3	ASTHMA AND BRONCHODILATOR AGENTS
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT (Step Therapy requires trial of ADVAIR, BREO, DULERA, or FLUTICASON/SALMETEROL)	ST	3	ASTHMA AND BRONCHODILATOR AGENTS
spironolactone tab (ALDACTONE equiv)	-	1	DIURETICS
spironolactone/hydrochlorothiazide tab (ALDACTAZIDE equiv)	-	2	DIURETICS
SPORANOX SOLN	-	3	ANTIFUNGALS
SPRAVATO NASAL SOLN	-	NC	ANTIDEPRESSANTS
sprintec 28 tab (ORTHO-CYCLEN equiv)	-	6	CONTRACEPTIVES
SPRITAM TAB	-	NC	ANTICONVULSANTS
SPRIX NASAL SPRAY	-	NC	ANALGESICS - ANTI-INFLAMMATORY
SPRYCEL TAB	LPSP-PA-SF	5	ANTINEOPLASTICS
SSKI SOLN	-	3	COUGH/COLD/ALLERGY
STAMARIL INJ	VAC	6	VACCINES
stannous fluoride conc	-	2	MOUTH/THROAT/DENTAL AGENTS
stavudine cap (ZERIT equiv)	-	2	ANTIVIRALS
stavudine soln (ZERIT equiv)	-	2	ANTIVIRALS
STAVZOR CAP	-	4	ANTICONVULSANTS
STEGLATRO TAB	-	NC	ANTIDIABETICS
STEGLUJAN TAB	-	NC	ANTIDIABETICS
STELARA INJ (QL= 1 inj/84 days)	LPSP-PA-QL	5	DERMATOLOGICALS
sterile water for irrigation	-	2	ASSORTED CLASSES
STIMATE NASAL SOLN	PA-SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
STIOLTO INHALER	-	3	ASTHMA AND BRONCHODILATOR AGENTS
STIVARGA TAB	PA-PSP-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
STRATTERA CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
STRENSIQ INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
STREPTOMYCIN INJ	M	M	AMINOGLYCOSIDES
STRIANT FILM	-	NC	ANDROGENS-ANABOLIC
STRIBILD TAB (QL= 1 tab/day)	QL	3	ANTIVIRALS
STRIVERDI RESPIMAT INHALER (QL= 1 inhaler/30 days)	QL	4	ASTHMA AND BRONCHODILATOR AGENTS

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SUBLOCADE INJ	-	NC	ANALGESICS - OPIOID
SUBOXONE SL FILM	-	3	ANALGESICS - OPIOID
SUCRAID SOLN	PA-SP	5	DIGESTIVE AIDS
sucralfate susp (CARAFATE equiv)	-	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
sucralfate tab (CARAFATE equiv)	-	2	ULCER DRUGS
sufentanil inj	M	M	ANALGESICS - OPIOID
SULFACET SODIUM OPHTH OINT 10%	-	2	OPHTHALMIC AGENTS
sulfacetamide sodium ophth soln (BLEPH-10 equiv)	-	2	OPHTHALMIC AGENTS
sulfacetamide sodium/prednisolone ophth soln (VASOCIDIN equiv)	-	2	OPHTHALMIC AGENTS
SULFACETAMIDE/PREDNISOLONE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
SULFADIAZINE TAB	-	2	SULFONAMIDES
SULFAMYLON CREAM	-	4	DERMATOLOGICALS
SULFAMYLON PACK	-	NC	DERMATOLOGICALS
sulfasalazine EC tab (AZULFIDINE equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sulfasalazine tab (AZULFIDINE equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sulindac tab (CLINORIL equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
SUMADEN XLT KIT	-	NC	DERMATOLOGICALS
sumatriptan inj (IMITREX equiv) (QL= 10 inj/30 days)	QL	2	MIGRAINE PRODUCTS
SUMATRIPTAN INJ 6MG/0.5ML (QL= 5 inj/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan nasal spray (IMITREX, SUMATRIPTAN equiv) (QL= 18 sprays/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan tab (IMITREX equiv) (QL= 9 tabs/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan vial inj (IMITREX equiv) (QL= 10 inj/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan/naproxen tab (TREMIMET equiv)	-	NC	MIGRAINE PRODUCTS
SUMAVEL DOSEPRO INJ (QL= 6 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
SUNOSI TAB (QL= 1 tab/day)	PA-QL	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY// NOREXIANTS
SUPPRELIN LA KIT	PA-SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SUPRAX CAP	-	4	CEPHALOSPORINS
SUPRAX CHEW TAB	-	4	CEPHALOSPORINS
SUPRAX SUSP 500MG/5ML	-	4	CEPHALOSPORINS
SUPRAX TAB	-	4	CEPHALOSPORINS
SUPREP SOLN (Step Therapy requires trial of CLENPIQ)	ST	3	LAXATIVES
SUSTOL INJ	-	NC	ANTIEMETICS
SUTENT CAP	PA-PSP-SF	5	ANTINEOPLASTICS
SYLATRON INJ	PA-PSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYMAX DUOTAB	-	4	ULCER DRUGS
SYMDEKO TAB (QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5	RESPIRATORY AGENTS - MISC.
SYMFI (LO) TAB	-	3	ANTIVIRALS
SYMJEPI INJ (QL= 2 inj/fill)	QL	2	VASOPRESSORS
SYMLIN INJ	M	M	ANTIDIABETICS
SYMLINPEN INJ	-	3	ANTIDIABETICS
SYMPAZAN ORAL FILM	-	NC	ANTICONVULSANTS
SYMPROIC TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
SYMTUZA TAB	-	NC	ANTIVIRALS
SYNAGIS INJ	M	M	PASSIVE IMMUNIZING AGENTS
SYNAREL NASAL SOLN	PA-SP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
SYNDROS SOLN	-	NC	ANTIEMETICS
SYNERA PATCH	-	4	DERMATOLOGICALS
SYNJARDY TAB	-	3	ANTIDIABETICS
SYNJARDY XR TAB 10-1000MG, 25-1000MG	-	3	ANTIDIABETICS
SYNJARDY XR TAB 5-1000MG, 12.5-1000MG	-	3	ANTIDIABETICS
SYNRIBO INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYNTHROID TAB	-	1	THYROID AGENTS
SYNVEXIA TC CREAM	-	NC	DERMATOLOGICALS
SYNVISC INJ	M	M	MUSCULOSKELETAL THERAPY AGENTS
TABLOID TAB	SP	5	ANTINEOPLASTICS
TABRECTA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tacrolimus cap (PROGRAF equiv)	-	2	ASSORTED CLASSES
tacrolimus oint (PROTOPIC equiv)	-	2	DERMATOLOGICALS
tadalafil tab (CIALIS equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
tadalafil tab (PAH) (ADCIRCA equiv)	LPSP-PA	5	CARDIOVASCULAR AGENTS - MISC.
tadalafil tab 2.5mg, 5mg (CIALIS equiv)	PA	2	CARDIOVASCULAR AGENTS - MISC.
TAFINLAR CAP	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAGRISSE TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAKHZYRO INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
TALICIA CAP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
TALTZ INJ (QL= 1 inj/28 days)	LPSP-PA-QL	5	DERMATOLOGICALS
TALWIN INJ	M	M	ANALGESICS - OPIOID
TALZENNA CAP 0.25MG (QL= 3 caps/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TALZENNA CAP 1MG (QL= 1 cap/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAMIFLU CAP	-	NC	ANTIVIRALS
TAMIFLU CAP 30MG	-	NC	ANTIVIRALS
tamoxifen tab (NOLVADEX equiv) (Covered at \$0 for women 35 years or older; All other members covered at generic copay)	-	6	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tamsulosin cap (FLOMAX equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
TANDEM F CAP	-	2	HEMATOPOIETIC AGENTS
TARCEVA TAB	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TARGADOX TAB	-	NC	TETRACYCLINES
TARGRETIN CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TARGRETIN GEL	LPSP	4	DERMATOLOGICALS
TARKA TAB	-	2	ANTIHYPERTENSIVES

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TASIGNA CAP	LPSP-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TASOPROL CREAM KIT	-	NC	DERMATOLOGICALS
TAVALISSE TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
TAYTULLA CAP	-	NC	CONTRACEPTIVES
tazarotene cream 0.1% (TAZORAC equiv)	-	2	DERMATOLOGICALS
TAZORAC CREAM	-	NC	DERMATOLOGICALS
TAZORAC GEL	-	4	DERMATOLOGICALS
TAZVERIK TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TECFIDERA CAP	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TECFIDERA STARTER PACK	LPSP	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TECHLITE LANCET 28G	OTC	1	MEDICAL DEVICES AND SUPPLIES
TECHLITE LANCET 30G	OTC	1	MEDICAL DEVICES AND SUPPLIES
TECHNIVIE TAB	-	NC	ANTIVIRALS
TEFLARO INJ	M	M	CEPHALOSPORINS
TEGRETOL CHEW TAB	-	4	ANTICONVULSANTS
TEGRETOL SUSP	-	4	ANTICONVULSANTS
TEGRETOL TAB	-	4	ANTICONVULSANTS
TEGRETOL XR TAB	-	4	ANTICONVULSANTS
TEGSEDI INJ (QL= 4 inj/28 days; Only available through Accredo 888-773-7376)	LD-PA-QL	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TEKAMLO TAB	-	3	ANTIHYPERTENSIVES
TEKTURNA HCT TAB	-	4	ANTIHYPERTENSIVES
TEKTURNA TAB	-	4	ANTIHYPERTENSIVES
telmisartan tab (MICARDIS equiv)	-	2	ANTIHYPERTENSIVES
telmisartan/amlodipine tab (TWINSTA equiv)	-	NC	ANTIHYPERTENSIVES
telmisartan/hydrochlorothiazide tab (MICARDIS HCT equiv)	-	2	ANTIHYPERTENSIVES
temazepam cap 15mg (RESTORIL equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
temazepam cap 22.5mg (RESTORIL equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
temazepam cap 30mg (RESTORIL equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
temazepam cap 7.5mg (RESTORIL equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
TEMODAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TEMOVATE CREAM	-	NC	DERMATOLOGICALS
temozolomide cap (TEMODAR equiv)	LPSP-PA	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
temsirolimus soln (TORISEL equiv)	PA-SP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tenofovir disoproxil fumarate tab (VIREAD equiv)	-	5	ANTIVIRALS
TEPADINA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
terazosin cap (HYTRIN equiv)	-	1	ANTIHYPERTENSIVES
terbinafine tab (LAMISIL equiv)	-	2	ANTIFUNGALS
TERBINEX KIT	-	4	ANTIFUNGALS

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terbutaline inj (BRETHINE equiv)	M	M	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
terbutaline sulfate tab (BRETHINE equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
terconazole cream (TERAZOL equiv)	-	2	VAGINAL PRODUCTS
TERCONAZOLE CREAM 0.8%	-	2	VAGINAL PRODUCTS
terconazole supp (TERAZOL equiv)	-	2	VAGINAL PRODUCTS
TERIPARATIDE INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
TEST STRIPS (all other Brands)	-	NC	DIAGNOSTIC PRODUCTS
TESTIM GEL (Step therapy requires trial of ANDROGEL equiv)	ST	4	ANDROGENS-ANABOLIC
testosterone cypionate inj (DEPO-TESTOSTERONE equiv)	PA	2	ANDROGENS-ANABOLIC
testosterone enanthate inj	M	M	ANDROGENS-ANABOLIC
testosterone gel 1% 25mg (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL 1% 25MG	-	4	ANDROGENS-ANABOLIC
testosterone gel 1% 50mg (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL 1% 50MG	-	4	ANDROGENS-ANABOLIC
testosterone gel 1% pump (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
testosterone gel 1.62% 1.25gm (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
testosterone gel 1.62% 2.5gm (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
testosterone gel 2% (FORTESTA equiv) (Step therapy requires trial of ANDROGEL equiv)	ST	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL PUMP	-	4	ANDROGENS-ANABOLIC
testosterone gel pump 1.62% (ANDROGEL equiv)	-	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL, VOGELXO GEL (Step therapy requires trial of ANDROGEL equiv)	ST	4	ANDROGENS-ANABOLIC
testosterone soln (AXIRON equiv) (Step therapy requires trial of ANDROGEL equiv)	ST	2	ANDROGENS-ANABOLIC
TETANUS TOXOID INJ	-	6	TOXOIDS
TETANUS/DIPHThERIA TOXOID INJ	VAC	6	TOXOIDS
tetrabenazine tab (XENAZINE equiv)	LPSP-PA	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TETRACAINE INJ	M	M	LOCAL ANESTHETICS-PARENTERAL
tetracaine ophth soln	-	2	OPHTHALMIC AGENTS
tetracycline cap	-	2	TETRACYCLINES
TEXACORT SOLN	-	4	DERMATOLOGICALS
THALOMID CAP	PA-PSP	5	ASSORTED CLASSES
THEO-24 CAP	-	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
THEOCHRON TAB	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline CR tab (QUIBRON-T equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline ER tab (UNIPHYL equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline soln	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline/d5w inj	M	M	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
THERA-D TAB	OTC	6	VITAMINS
thiamine inj	M	M	VITAMINS

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THIOLA EC TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
thioridazine tab (MELLARIL equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
THIOTEPA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
thiothixene cap (NAVANE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
THROMBAT III INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
THYMOGLOBULN INJ	M	M	ASSORTED CLASSES
THYROGEN INJ	M	M	DIAGNOSTIC PRODUCTS
THYROLAR TAB	-	4	THYROID AGENTS
tiagabine tab (GABITRIL equiv)	-	2	ANTICONVULSANTS
TIBSOVO TAB (QL= 2 tabs/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TICANASE PAK	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
TICE BCG INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TICLOPIDINE TAB	-	2	HEMATOLOGICAL AGENTS - MISC.
ticlopidine tab (TICLID equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
tigecycline inj (TYGACIL equiv)	M	M	TETRACYCLINES
TIGLUTIK SUSP	-	NC	NEUROMUSCULAR AGENTS
TIKOSYN CAP	-	NC	ANTIARRHYTHMICS
TIMENTIN INJ	M	M	PENICILLINS
timolol maleate ophth gel (TIMOPTIC-XE equiv)	-	2	OPHTHALMIC AGENTS
timolol maleate ophth soln (TIMOPTIC equiv)	-	2	OPHTHALMIC AGENTS
timolol maleate ophth soln 0.5% (ISTALOL equiv)	-	2	OPHTHALMIC AGENTS
timolol maleate tab (BLOCADREN equiv)	-	2	BETA BLOCKERS
TIMOLOL OPHTH GEL SOLN	-	2	OPHTHALMIC AGENTS
tinidazole tab (TINDAMAX equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
TIROSINT-SOL	-	NC	THYROID AGENTS
TIVICAY PD TAB	-	NC	ANTIVIRALS
tizanidine cap (ZANAFLEX equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
tizanidine tab (ZANAFLEX equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
TOBI PODHALER	PSP	5	AMINOGLYCOSIDES
TOBRADEX OPHTH OINT	-	3	OPHTHALMIC AGENTS
TOBRADEX ST OPHTH SUSP	-	3	OPHTHALMIC AGENTS
TOBRAMYCIN INJ	M	M	AMINOGLYCOSIDES
tobramycin neb soln (TOBI equiv)	LPSP-PA	5	AMINOGLYCOSIDES
tobramycin ophth soln (TOBREX equiv)	-	2	OPHTHALMIC AGENTS
tobramycin/dexamethasone ophth soln (TOBRADEX equiv)	-	2	OPHTHALMIC AGENTS
TOBRAMYCIN/NACL INJ	M	M	AMINOGLYCOSIDES
TOBREX OPHTH OINT	-	3	OPHTHALMIC AGENTS
TODAY SPONGE	OTC	6	VAGINAL PRODUCTS
TOLAZAMIDE TAB	-	2	ANTIDIABETICS
TOLBUTAMIDE TAB	-	2	ANTIDIABETICS
tolcapone tab (TASMAR equiv)	-	2	ANTIPARKINSON AGENTS
TOLMETIN CAP	-	2	ANALGESICS - ANTI-INFLAMMATORY
tolmetin cap (TOLECTIN DS equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
TOLMETIN TAB	-	2	ANALGESICS - ANTI-INFLAMMATORY
TOLSURA CAP	-	NC	ANTIFUNGALS
tolterodine SR cap (DETROL LA equiv)	-	2	URINARY ANTISPASMODICS

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tolterodine tab (DETROL equiv)	¢	2	URINARY ANTISPASMODICS
tolvaptan tab (SAMSCA equiv)	PA-PSP	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
TOPICORT OINT	-	NC	DERMATOLOGICALS
topiramate sprinkle cap (TOPAMAX equiv)	-	2	ANTICONVULSANTS
topiramate tab (TOPAMAX equiv)	-	2	ANTICONVULSANTS
toposar inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
topotecan inj (HYCANTIN equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
toremifene tab (FARESTON equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TORISEL SOLN	PA-SP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TORSEMIDE INJ	M	M	DIURETICS
torsemide tab (DEMADEX equiv)	-	2	DIURETICS
TOSYMRA SOLN	-	NC	MIGRAINE PRODUCTS
TOTECT INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TOUJEO MAX SOLOSTAR INJ	-	3	ANTIDIABETICS
TOUJEO SOLOSTAR INJ	-	3	ANTIDIABETICS
TOVET KIT	-	NC	DERMATOLOGICALS
TOVIAZ TAB	-	4	URINARY ANTISPASMODICS
TRACLEER TAB 32MG (Only available through Walgreens 888-347-3416)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
TRACLEER TAB 62.5MG, 125MG (Only available through Walgreens 888-347-3416)	LD-PA	5	CARDIOVASCULAR AGENTS - MISC.
TRADJENTA TAB (QL= 1 tab/day)	QL	3	ANTIDIABETICS
tramadol ER tab (ULTRAM ER equiv) (QL= 1 tab/day)	QL	2	ANALGESICS - OPIOID
TRAMADOL ER/CONZIP CAP 100MG, 200MG, 300MG (QL= 1 cap/day)	QL	4	ANALGESICS - OPIOID
TRAMADOL HCL TAB 100MG	-	NC	ANALGESICS - OPIOID
tramadol tab (ULTRAM equiv) (QL= 8 tabs/day)	QL	2	ANALGESICS - OPIOID
tramadol/acetaminophen tab (ULTRACET equiv) (QL= 8 tabs/day)	QL	2	ANALGESICS - OPIOID
trandolapril tab (MAVIK equiv)	-	2	ANTIHYPERTENSIVES
trandolapril/verapamil ER tab (TARKA equiv)	-	2	ANTIHYPERTENSIVES
tranexamic acid inj	M	M	HEMOSTATICS
tranexamic acid tab (LYSTEDA equiv)	-	2	HEMOSTATICS
TRANSDERM-SCOP PATCH	-	3	ANTIEMETICS
tranylcypromine tab (PARNATE equiv)	-	2	ANTIDEPRESSANTS
TRAVATAN Z DROPS (QL= 2.5ml/30 days)	QL	3	OPHTHALMIC AGENTS
travoprost ophth soln (TRAVATAN Z equiv) (QL= 2.5ml/30 days)	QL	2	OPHTHALMIC AGENTS
trazodone tab 300mg	-	2	ANTIDEPRESSANTS
trazodone tab 50mg, 100mg, 150mg (DESYREL equiv)	-	1	ANTIDEPRESSANTS
TREANDA INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRECTOR TAB	-	4	ANTIMYCOBACTERIAL AGENTS
TRELEGY ELLIPTA INHALER	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TREMFYA INJ	-	NC	DERMATOLOGICALS
treprostinil inj 10mg/ml (REMODULIN equiv)	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
treprostinil inj 1mg/ml (REMODULIN equiv)	LD-M	M	CARDIOVASCULAR AGENTS - MISC.

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treprostinil inj 2.5mg/ml (REMODULIN equiv)	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
treprostinil inj 5mg/ml (REMODULIN equiv)	LD-M	M	CARDIOVASCULAR AGENTS - MISC.
TRESIBA FLEXTOUCH INJ	-	3	ANTIDIABETICS
TRESIBA INJ	-	3	ANTIDIABETICS
tretinoin cap (VESANOID equiv)	LPSP-PA	5	ANTINEOPLASTICS
tretinoin cream (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
tretinoin gel (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
tretinoin gel (RETIN-A GEL equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
TRETIN-X CREAM (Acne Only – members age 35 or older require Prior Authorization)	PA	4	DERMATOLOGICALS
TREXALL TAB	-	3	ANTINEOPLASTICS
TREXIMET TAB	-	NC	MIGRAINE PRODUCTS
TREXIX CAP, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE CAP	-	2	ANALGESICS - OPIOID
triamcinolone acetonide oint (TRIANEX equiv)	-	2	DERMATOLOGICALS
triamcinolone cream	-	1	DERMATOLOGICALS
triamcinolone in orabase paste	-	2	MOUTH/THROAT/DENTAL AGENTS
triamcinolone in orabase paste (KENALOG/ORABASE equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
triamcinolone lotion	-	1	DERMATOLOGICALS
triamcinolone nasal spray (NASACORT equiv) (QL= 1 bottle/fill)	QL	1	NASAL AGENTS - SYSTEMIC AND TOPICAL
triamcinolone oint	-	1	DERMATOLOGICALS
triamcinolone OTC nasal spray (NASACORT equiv)	OTC	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
triamcinolone spray (KENALOG equiv)	-	2	DERMATOLOGICALS
TRIAMINIC SYRUP	OTC	NC	COUGH/COLD/ALLERGY
triamterene cap (DYRENIUM equiv)	-	2	DIURETICS
triamterene/hydrochlorothiazide cap (DYAZIDE equiv)	-	1	DIURETICS
TRIAMTERENE/HYDROCHLOROTHIAZIDE CAP 50-25mg	-	3	DIURETICS
triamterene/hydrochlorothiazide tab (MAXZIDE equiv)	-	1	DIURETICS
TRIANEX OINT	-	2	DERMATOLOGICALS
triazolam tab (HALCION equiv)	-	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
TRIBENZOR TAB	-	NC	ANTIHYPERTENSIVES
TRICHOPHYTON INJ	M	M	DIAGNOSTIC PRODUCTS
tricitrates soln (POLYCITRA-LC equiv)	-	2	GENITOURINARY AGENTS - MISCELLANEOUS
tricon cap (TRINSICON equiv)	-	2	HEMATOPOIETIC AGENTS
TRICOR TAB	-	NC	ANTIHYPERTENSIVES
triderm cream	-	2	DERMATOLOGICALS
trientine cap (SYPRINE equiv)	PA-PSP	5	MISCELLANEOUS THERAPEUTIC CLASSES
trifluoperazine tab (STELAZINE equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
TRIFLURIDINE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
trifluridine ophth soln (VIROPTIC equiv)	-	2	OPHTHALMIC AGENTS
TRIGLIDE TAB	-	4	ANTIHYPERTENSIVES
trihexyphenidyl elixir (ARTANE equiv)	-	2	ANTIPARKINSON AND RELATED THERAPY AGENTS
trihexyphenidyl tab (ARTANE equiv)	-	2	ANTIPARKINSON AGENTS
TRIJARDY XR TAB 10-5-1000MG, 25-5-1000MG (QL= 1 tab/day)	QL	3	ANTIDIABETICS
TRIJARDY XR TAB 5-25-1000MG, 12.5-2.5-1000MG (QL= 2 tabs/day)	QL	3	ANTIDIABETICS

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Drug Name	Special Code	Tier	Category
TRIKAFTA TAB	-	NC	RESPIRATORY AGENTS - MISC.
tri-legest tab (ESTROSTEP FE equiv)	-	6	CONTRACEPTIVES
TRILEPTAL SUSP	-	4	ANTICONVULSANTS
TRILEPTAL TAB	-	4	ANTICONVULSANTS
trilyte soln (NULYTELY equiv) (Covered at \$0 for members 50-75 years, all other members covered at generic copay; Limited to 2 fills/calendar year)	QL	6	LAXATIVES
trimethobenzamide cap (TIGAN equiv)	-	2	ANTIEMETICS
trimethobenzamide inj (TIGAN equiv)	-	2	ANTIEMETICS
trimethoprim tab (PROLOPRIM equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
trimipramine cap (SURMONTIL equiv)	-	2	ANTIDEPRESSANTS
TRINTELLIX TAB (QL= 1 tab/day)	PA-QL	4	ANTIDEPRESSANTS
TRIPEDIA INJ	-	6	TOXOIDS
TRISENOX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRISENOX SOLN	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tri-sprintec tab (ORTHO TRI-CYCLEN (LO) equiv)	-	6	CONTRACEPTIVES
TRIUMEQ TAB	-	3	ANTIVIRALS
TRI-VIT/FLOURIDE/IRON DROPS	-	1	MULTIVITAMINS
tropicamide ophth soln (MYDRIACYL equiv)	-	2	OPHTHALMIC AGENTS
tospium chloride SR cap (SANCTURA XR equiv)	-	2	URINARY ANTISPASMODICS
tospium tab (SANCTURA equiv)	-	2	URINARY ANTISPASMODICS
TRUE METRIX BLOOD GLUCOSE METER	OTC	NC	MEDICAL DEVICES AND SUPPLIES
TRUE RESULT BLOOD GLUCOSE METER	OTC	NC	MEDICAL DEVICES AND SUPPLIES
TRUEDRAW LANCING DEVICE	OTC	NC	MEDICAL DEVICES AND SUPPLIES
TRUETEST CALIBRATION LIQUID	OTC	NC	MEDICAL DEVICES AND SUPPLIES
TRUETEST TEST STRIP	OTC	NC	DIAGNOSTIC PRODUCTS
TRUETEST TEST STRIPS	OTC	NC	DIAGNOSTIC PRODUCTS
TRULANCE TAB	PA	3	GASTROINTESTINAL AGENTS - MISC.
TRULICITY INJ (QL= 4 pens/28 days)	QL	3	ANTIDIABETICS
TRUMENBA INJ	VAC	6	VACCINES
TRUPLUS LANCET	OTC	1	MEDICAL DEVICES AND SUPPLIES
TRUVADA TAB	-	6	ANTIVIRALS
TUDORZA PRESSAIR INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TUKYSA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TURALIO CAP (QL= 4 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TUSNEL SYRUP	-	4	COUGH/COLD/ALLERGY
TUSSICAPS	-	3	COUGH/COLD/ALLERGY
tussigon tab (HYCODAN equiv)	-	2	COUGH/COLD/ALLERGY
TUSSIONEX SUSP	-	NC	COUGH/COLD/ALLERGY
TUXARIN ER TAB	-	NC	COUGH/COLD/ALLERGY
TUZISTRA XR SUSP	-	NC	COUGH/COLD/ALLERGY
TWINRIX INJ	VAC	6	VACCINES
TWIRLA PATCH	-	NC	CONTRACEPTIVES
TYGACIL INJ	M	M	TETRACYCLINES
TYKERB TAB	LPSP-PA	5	ANTINEOPLASTICS

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M	Medical Benefit	OTC	Over-the-Counter	PA	Prior Authorization
PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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TYMLOS INJ	LPSP-PA	5	ENDOCRINE AND METABOLIC AGENTS - MISC.
TYPHIM VI INJ	VAC	6	VACCINES
TYSABRI INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TYVASO INH SOLN (QL= 1 ampule/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5	CARDIOVASCULAR AGENTS - MISC.
TYZEKA TAB	PA-SP	5	ANTIVIRALS
TYZINE NASAL SOLN	-	4	NASAL AGENTS - SYSTEMIC AND TOPICAL
UBRELVY TAB	-	NC	MIGRAINE PRODUCTS
UCERIS RECTAL FOAM	PA	4	ANORECTAL AGENTS
UCERIS TAB	-	NC	CORTICOSTEROIDS
U-CORT CREAM	-	2	DERMATOLOGICALS
UDENYCA INJ	LPSP	5	HEMATOPOIETIC AGENTS
ULESFIA LOTION	-	3	DERMATOLOGICALS
ULORIC TAB	-	3	GOUT AGENTS
ULTRAVATE LOTION	-	4	DERMATOLOGICALS
UMECTA EMULSION	-	NC	DERMATOLOGICALS
umecta mouss aer	-	2	DERMATOLOGICALS
UPTRAVI TAB (QL= 2 tabs/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5	CARDIOVASCULAR AGENTS - MISC.
URAMAXIN AER	-	2	DERMATOLOGICALS
URAMAXIN CREAM	-	NC	DERMATOLOGICALS
URAMAXIN GEL	-	NC	DERMATOLOGICALS
urea cream	-	NC	DERMATOLOGICALS
urea emulsion	-	2	DERMATOLOGICALS
UREA EMULSION	-	NC	DERMATOLOGICALS
urea gel (URAMAXIN equiv)	-	NC	DERMATOLOGICALS
UREA LOTION	-	NC	DERMATOLOGICALS
urea lotion (KERALAC LOTION equiv)	-	NC	DERMATOLOGICALS
UREA NAIL KIT	-	2	DERMATOLOGICALS
UREA SOLN 45%	-	2	DERMATOLOGICALS
UREA SUSP	-	NC	DERMATOLOGICALS
urea susp 40% (UMECTA equiv)	-	NC	DERMATOLOGICALS
URELIEF PLUS TAB	-	2	URINARY ANTISPASMODICS
ursodiol cap (ACTIGALL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
ursodiol tab (URSO (FORTE) equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
ustell cap	-	2	URINARY ANTI-INFECTIVES
UTA CAP	-	NC	URINARY ANTI-INFECTIVES
UTIBRON NEOHALER CAP	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
UVADEX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VAGIFEM TAB	-	NC	VAGINAL PRODUCTS
valacyclovir tab (VALTREX equiv) (QL= 2 tabs/day)	QL	2	ANTIVIRALS
valacyclovir tab 1000mg (VALTREX equiv) (QL= 3 tabs/day)	QL	2	ANTIVIRALS
VALCHLOR GEL (Only available through Avella (877) 546-5779)	LD-PA	5	DERMATOLOGICALS
VALCYTE SOLN	-	NC	ANTIVIRALS
VALCYTE TAB	-	NC	ANTIVIRALS
valganciclovir soln (VALCYTE equiv)	PA-SP	5	ANTIVIRALS

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valganciclovir tab (VALCYTE equiv)	PA	2	ANTIVIRALS
valproate inj	M	M	ANTICONVULSANTS
valproic acid cap (DEPAKENE equiv)	-	2	ANTICONVULSANTS
valproic acid syrup (DEPAKENE equiv)	-	2	ANTICONVULSANTS
valrubicin soln (VALSTAR equiv)	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
valsartan tab 160mg (DIOVAN equiv)	-	1	ANTIHYPERTENSIVES
valsartan tab 320mg (DIOVAN equiv)	-	2	ANTIHYPERTENSIVES
valsartan tab 40mg (DIOVAN equiv)	-	1	ANTIHYPERTENSIVES
valsartan tab 80mg (DIOVAN equiv)	-	1	ANTIHYPERTENSIVES
valsartan/hydrochlorothiazide tab (DIOVAN HCT equiv)	-	2	ANTIHYPERTENSIVES
VALSTAR SOLN	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VALTOCO LIQUID	-	NC	ANTICONVULSANTS
VALTOCO SPRAY	-	NC	ANTICONVULSANTS
VALTURNA TAB	-	4	ANTIHYPERTENSIVES
VANOCIN CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
vancomycin cap (VANOCIN equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
vancomycin inj	M	M	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN INJ	M--	NC	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN/DEXTROSE INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
VANOS CREAM	-	NC	DERMATOLOGICALS
VANTAS KIT	PA-SP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
varafenafil ODT (STAXYN equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
varafenafil tab (LEVITRA equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
VARIVAX INJ	VAC	6	VACCINES
VAROPHEN KIT	-	NC	DERMATOLOGICALS
VARUBI TAB (QL= 2 tabs/day; Restricted to Oncology or Hematology Specialist)	QL-RS	3	ANTIEMETICS
VASCEPA CAP	-	3	ANTIHYPERLIPIDEMICS
vasoalex oint (XENADERM equiv)	-	2	DERMATOLOGICALS
vasopressin inj (PITRESSIN SYNTHETIC equiv)	M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
VAXCHORA SUSP	VAC	6	VACCINES
VAYARIN CAP	-	4	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
VAYAROL CAP	-	4	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
V-C FORTE CAP	-	4	MULTIVITAMINS
vcf vaginal gel (CONCEPTROL equiv)	OTC	6	VAGINAL PRODUCTS
VECAMEYL TAB	-	NC	ANTIHYPERTENSIVES
VECTIBIX INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VECTICAL OINT	-	4	DERMATOLOGICALS
vecuronium inj	M	M	NEUROMUSCULAR AGENTS
VELCADE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VELETRI INJ	M	M	CARDIOVASCULAR AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
VELTASSA POWDER	PA	4	ASSORTED CLASSES
VELTIN GEL	-	4	DERMATOLOGICALS
VEMLIDY TAB	-	NC	ANTIVIRALS
VENCLEXTA STARTER PACK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VENCLEXTA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
venlafaxine ER cap 150mg (QL= 2 caps/day)	QL	2	ANTIDEPRESSANTS
venlafaxine ER cap 37.5mg (EFFEXOR XR equiv) (QL= 1 cap/day)	QL	2	ANTIDEPRESSANTS
venlafaxine ER cap 75mg (QL= 3 caps/day)	QL	2	ANTIDEPRESSANTS
venlafaxine ER tab	-	NC	ANTIDEPRESSANTS
venlafaxine tab (EFFEXOR equiv) (QL= 5 tabs/day)	QL	2	ANTIDEPRESSANTS
VENOFER INJ	M	M	HEMATOPOIETIC AGENTS
VENTAVIS INH SOLN (QL= 9 ampules/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5	CARDIOVASCULAR AGENTS - MISC.
VENTOLIN HFA INHALER (QL= 2 inhalers/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
VERAMYST NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
VERAPAMIL CAP 100MG	-	1	CALCIUM CHANNEL BLOCKERS
VERAPAMIL ER CAP 200MG	-	1	CALCIUM CHANNEL BLOCKERS
VERAPAMIL ER CAP 300MG	-	1	CALCIUM CHANNEL BLOCKERS
verapamil inj	M	M	CALCIUM CHANNEL BLOCKERS
verapamil SR cap (VERELAN equiv)	-	1	CALCIUM CHANNEL BLOCKERS
VERAPAMIL SR CAP 360mg	-	1	CALCIUM CHANNEL BLOCKERS
verapamil SR tab (CALAN SR, ISOPTIN SR equiv)	-	1	CALCIUM CHANNEL BLOCKERS
verapamil tab (CALAN equiv)	-	1	CALCIUM CHANNEL BLOCKERS
VERDESO FOAM	-	4	DERMATOLOGICALS
VERDROCET TAB 2.5MG-325MG	-	NC	ANALGESICS - OPIOID
VEREGEN OINT	-	4	DERMATOLOGICALS
VERELAN PM ER CAP 100MG, 300MG	-	NC	CALCIUM CHANNEL BLOCKERS
VERELAN SR CAP 360mg	-	NC	CALCIUM CHANNEL BLOCKERS
versiclear lotion	-	2	DERMATOLOGICALS
VERZENIO TAB (QL=2 tabs/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VESICARE TAB	-	3	URINARY ANTISPASMODICS
VEXOL OPHTH SUSP	-	4	OPHTHALMIC AGENTS
V-GO INJ KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
VIBATIV INJ	M	M	ANTI-INFECTIVE AGENTS - MISC.
VIBERZI TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
VICTOZA INJ (QL= 9ml/30 days)	QL	3	ANTIDIABETICS
VICTRELIS CAP	-	NC	ANTIVIRALS
VIDEX SOLN	-	5	ANTIVIRALS
VIEKIRA XR TAB	-	NC	ANTIVIRALS
vigabatrin powder pack (SABRIL POWDER equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTICONVULSANTS
vigabatrin tab (SABRIL equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5	ANTICONVULSANTS
VIIBRYD KIT	-	4	ANTIDEPRESSANTS
VIIBRYD TAB (QL= 1 tab/day)	QL	4	ANTIDEPRESSANTS
VIMOVO TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY

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SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
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VIMPAT SOLN	-	3	ANTICONVULSANTS
VIMPAT TAB (QL= 2 tabs/day)	QL	3	ANTICONVULSANTS
VINBLASTINE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
vincasar pfs inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VINCRISTINE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
vinorelbine inj	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VIOKACE TAB	-	4	DIGESTIVE AIDS
viorele tab, kariva tab (MIRCETTE equiv)	-	6	CONTRACEPTIVES
VIRACEPT TAB	-	3	ANTIVIRALS
VIRAMUNE SUSP	-	2	ANTIVIRALS
VIRAZOLE INH SOLN	-	NC	ANTIVIRALS
VIREAD POWDER	SP	5	ANTIVIRALS
VIREAD TAB	-	5	ANTIVIRALS
VISICOL TAB	-	4	LAXATIVES
VISTOGARD PAK	-	NC	ANTIDOTES
VISUDYNE INJ	LPSP-M	M	OPHTHALMIC AGENTS
VITAFOL STRIPS	-	NC	MULTIVITAMINS
vitamin c inj	M	M	VITAMINS
vitamin D cap ((RX Only))	-	2	VITAMINS
vitamin D cap 1000unit (Covered for members 65 years or older)	OTC	6	VITAMINS
vitamin D cap 400unit (Covered for members 65 years or older)	OTC	6	VITAMINS
vitamin d chew	OTC	6	VITAMINS
VITAMIN D TAB 400UNIT (Covered for members 65 years or older)	OTC	6	VITAMINS
vitamin d3 drops	OTC	6	VITAMINS
vitamin d3 tab	OTC	6	VITAMINS
vitamin k inj	M	M	VITAMINS
VITA-RESPA TAB	-	4	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
VITEKTA TAB	-	5	ANTIVIRALS
VITRAKVI CAP 100MG (QL= 2 caps/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VITRAKVI CAP 25MG (QL= 6 caps/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VITRAKVI SOLN (QL= 10ml/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VIVITROL INJ	LPSP-M	M	ANTIDOTES
VIVLODEX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
VIVOTIF CAP	VAC	6	VACCINES
VIZIMPRO TAB (QL= 1 tab/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VOGELXO PUMP	-	NC	ANDROGENS-ANABOLIC
VOLTAREN GEL	-	NC	DERMATOLOGICALS
VORAXAZE INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
voriconazole inj	M	M	ANTIFUNGALS
voriconazole susp (VFEND equiv)	PA	2	ANTIFUNGALS
voriconazole tab (VFEND equiv)	PA	2	ANTIFUNGALS

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VOSEVI TAB (QL= 1 tab/day)	LPSP-PA-QL	5	ANTIVIRALS
VOTRIENT TAB	LPSP-PA-SF	5	ANTINEOPLASTICS
VP-PNV-DHA CAP	-	4	MULTIVITAMINS
VPRIV INJ	M	M	HEMATOPOIETIC AGENTS
VRAYLAR CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VRAYLAR PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VUMERITY CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
VUMON INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VYLEESI INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
VYNDAMAX CAP (QL= 1 cap/day)	PA-PSP-QL	5	CARDIOVASCULAR AGENTS - MISC.
VYNDAQEL CAP (QL= 4 caps/day)	PA-PSP-QL	5	CARDIOVASCULAR AGENTS - MISC.
VYTORIN TAB 10-80MG	-	NC	ANTIHYPERLIPIDEMICS
VYVANSE CAP (QL= 1 cap/day)	QL	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
VYVANSE CHEW TAB (QL= 1 cap/day)	QL	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
VYZULTA SOLN	-	NC	OPHTHALMIC AGENTS
WAKIX TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
warfarin tab (COUMADIN equiv)	-	1	ANTICOAGULANTS
WASP VENOM INJ	M	M	BIOLOGICALS MISC
wee care susp	-	6	HEMATOPOIETIC AGENTS
WELCHOL TAB	-	2	ANTIHYPERLIPIDEMICS
wixela inhub inhaler (ADVAIR equiv) (QL= 1 inhaler/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
WPR PLUS	-	NC	DERMATOLOGICALS
wymzya FE tab (FEMCON FE equiv)	-	6	CONTRACEPTIVES
XADAGO TAB	-	NC	ANTIPARKINSON AGENTS
XALIX SOL	-	NC	DERMATOLOGICALS
XALKORI CAP (QL= 2 caps/day)	PA-PSP-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XAQUIL XR TAB	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
XARELTO TAB	-	3	ANTICOAGULANTS
XATMEP SOLN	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XCOPRI PAK	-	NC	ANTICONVULSANTS
XCOPRI TAB	-	NC	ANTICONVULSANTS
XELJANZ TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
XELJANZ XR TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
XELPROS OPHTH EMULSION	-	NC	OPHTHALMIC AGENTS
XEMBIFY INJ (Only available through CVS Specialty 800-237-2767)	LD-PA	5	PASSIVE IMMUNIZING AND TREATMENT AGENTS
XENADERM OINT	-	NC	DERMATOLOGICALS
XENAZINE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
XENICAL CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS

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XENLETA TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
XEOMIN INJ	M	M	NEUROMUSCULAR AGENTS
XEPI CREAM	-	NC	DERMATOLOGICALS
XERMELO TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
XGEVA INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
XHANCE NASAL EXHALER	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
XIAFLEX INJ	M	M	ASSORTED CLASSES
XIFAXAN TAB 200MG (QL= 9 tabs/3 days)	QL	4	ANTI-INFECTIVE AGENTS - MISC.
XIFAXAN TAB 550MG (QL= 2 tabs/day; Quantities up to 3 tabs/day for the treatment of IBS-D allowed via PA)	PA-QL	4	ANTI-INFECTIVE AGENTS - MISC.
XIGDUO XR TAB 2.5-1000MG, 5-1000MG (QL= 2 tabs/day)	QL	3	ANTIDIABETICS
XIGDUO XR TAB 5-500MG, 10-500MG, 10-1000MG (QL= 1 tab/day)	QL	3	ANTIDIABETICS
XIIDRA OPTH SOLN	-	NC	OPHTHALMIC AGENTS
XOFLUZA TAB	-	NC	ANTIVIRALS
XOLAIR INJ	LPSP-PA	5	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLEGEL	-	4	DERMATOLOGICALS
XOSPATA TAB (QL= 3 tabs/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XPOVIO PAK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XTAMPZA ER CAP (QL= 120 caps/30 days)	QL	3	ANALGESICS - OPIOID
XTANDI CAP	PA-PSP-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XULANE PATCH	-	6	CONTRACEPTIVES
XULTOPHY INJ (QL= 15ml/30 days)	PA-QL	3	ANTIDIABETICS
XURIDEN POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
XYNTHA INJ	M	M	HEMATOLOGICAL AGENTS - MISC.
XYOSTED INJ	-	NC	ANDROGENS-ANABOLIC
XYREM SOLN (QL= 540ml/30 days; Only available through Xyrem Central Pharmacy 866-997-3688)	LD-PA-QL	5	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
XYZBAC TAB	-	NC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
YBUPHEN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
YELLOW HORN INJ	M	M	BIOLOGICALS MISC
YELLOW JACK INJ	M	M	BIOLOGICALS MISC
YERVOY INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
YF-VAX INJ	VAC	6	VACCINES
YODOXIN TAB	-	3	AMEBICIDES
YONSA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
YOSPRALA TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
YUPELRI SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
zafirlukast tab (ACCOLATE equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
zaleplon cap (QL= 1 cap/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS

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M	Medical Benefit	OTC	Over-the-Counter	PA	Prior Authorization
PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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Drug Name	Special Code	Tier	Category
zaleplon cap (QL= 2 caps/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZALTRAP INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZANOSAR INJ	M	M	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZARONTIN CAP	-	4	ANTICONVULSANTS
ZARONTIN SOLN	-	4	ANTICONVULSANTS
ZARXIO INJ	LPSP	5	HEMATOPOIETIC AGENTS
ZAVESCA CAP (Only available through Accredo 888-773-7376)	LD-PA	5	HEMATOPOIETIC AGENTS
ZECUITY PAD	-	NC	MIGRAINE PRODUCTS
ZEGERID POWDER PACK	-	NC	ULCER DRUGS
ZEJULA CAP (QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZELBORAF TAB	PA-PSP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZEMBRACE SYMTOUCH INJ	-	NC	MIGRAINE PRODUCTS
zenzedi tab 10mg (DEXEDRINE equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
zenzedi tab 5mg (DEXEDRINE equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY//NOREXIANTS
ZEPATIER TAB	-	NC	ANTIVIRALS
ZEPOSIA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZEPOSIA STARTER PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZERIT SOLN	-	NC	ANTIVIRALS
ZERVIAE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ZETONNA NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4	NASAL AGENTS - SYSTEMIC AND TOPICAL
ZIAGEN SOLN	-	NC	ANTIVIRALS
ZIANA GEL	-	NC	DERMATOLOGICALS
zidovudine cap (RETROVIR equiv)	-	2	ANTIVIRALS
zidovudine syrup (RETROVIR equiv)	-	2	ANTIVIRALS
zidovudine tab (RETROVIR equiv)	-	2	ANTIVIRALS
ZIEXTENZO INJ	PSP	5	HEMATOPOIETIC AGENTS
ZILACAINE PAK	-	NC	DERMATOLOGICALS
zileuton ER tab (ZYFLO CR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ZILXI FOAM	-	NC	DERMATOLOGICALS
ZINACEF/D5W INJ	M	M	CEPHALOSPORINS
ZINACEF/H2O INJ	M	M	CEPHALOSPORINS
ZINBRYTA INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
zinc oxide oint	-	2	DERMATOLOGICALS
zinc sulfate cap	-	2	MINERALS & ELECTROLYTES
ZINC SULFATE INJ	M	M	MINERALS & ELECTROLYTES
ZINC TRACE INJ	M	M	MINERALS & ELECTROLYTES
ZIOPTAN OPHTH SOLN (QL= 2 bottles/day)	QL	4	OPHTHALMIC AGENTS
ziprasidone cap (GEODON equiv) (QL= 2 caps/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ziprasidone mesylate inj (GEODON equiv)	M	M	ANTIPSYCHOTICS/ANTIMANIC AGENTS

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Drug Name	Special Code	Tier	Category
ZIPSOR CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ZIRGAN OPHTH GEL	-	4	OPHTHALMIC AGENTS
ZITHROMAX POWDER PACK	-	2	MACROLIDES
ZITHROMAX POWDER PACK	-	4	MACROLIDES
ZN-DTPA SOLN	-	2	ANTIDOTES
ZOXYDRO ER CAP	-	NC	ANALGESICS - OPIOID
ZOLADEX IMPLANT	PA-SP	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
zoledronic acid inj (ZOMETA equiv)	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZOLINZA CAP	LPSP-PA-SF	5	ANTINEOPLASTICS
zolmitriptan ODT (ZOMIG equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2	MIGRAINE PRODUCTS
zolmitriptan tab (ZOMIG equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2	MIGRAINE PRODUCTS
ZOLPAK KIT	-	NC	DERMATOLOGICALS
zolpidem ER tab (AMBIEN CR equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
zolpidem tab (AMBIEN equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS
zolpidem tartrate SL tab (INTERMEZZO equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
ZOMETA INJ	LPSP-M	M	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZOMIG NASAL SPRAY (QL= 18 sprays/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4	MIGRAINE PRODUCTS
ZONATUSS CAP 150MG	-	NC	COUGH/COLD/ALLERGY
zonisamide cap (ZONEGRAN equiv)	-	1	ANTICONVULSANTS
ZONTIVITY TAB (Restricted to Cardiology Specialist)	PA	4	HEMATOLOGICAL AGENTS - MISC.
ZORPRIN TAB	-	4	ANALGESICS - NONNARCOTIC
ZORTRESS TAB	-	4	MISCELLANEOUS THERAPEUTIC CLASSES
ZORTRESS TAB 1MG	-	4	ASSORTED CLASSES
ZOSTAVAX INJ (Covered at Tier 4 for members 50 years through 59 years. Covered at \$0 for members 60 years or older)	VAC	6	VACCINES
ZOVIRAX CREAM	-	3	DERMATOLOGICALS
ZUBSOLV SL TAB	-	3	ANALGESICS - OPIOID
ZUPLENZ SL FILM (QL= 10 films/30 days)	QL	4	ANTIEMETICS
ZURAMPIC TAB	-	NC	GOUT AGENTS
ZYCLARA CREAM	-	4	DERMATOLOGICALS
ZYDELIG TAB (Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYFLO	-	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ZYFLO CR TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ZYKADIA CAP (QL= 5 caps/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYKADIA TAB (QL= 3 tabs/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYLET OPHTH SOLN	-	3	OPHTHALMIC AGENTS
ZYPITAMAG TAB	-	NC	ANTIHYPERLIPIDEMICS

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Drug Name	Special Code	Tier	Category
ZYTIGA TAB 250MG (QL= 4 tabs/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYTIGA TAB 500MG (QL= 2 tabs/day)	LPSP-PA-QL-SF	5	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYVOX SUSP	-	NC	ANTI-INFECTIVE AGENTS - MISC.

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SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
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DrugName	Special Code	Tier
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
amphetamine/dextroamphetamine ER cap (ADDERALL XR equiv) (QL= 1 cap/day)	QL	2
amphetamine/dextroamphetamine tab (ADDERALL equiv) (QL= 2 tabs/day)	QL	2
dextroamphetamine ER cap 10mg (DEXEDRINE CR equiv) (QL= 6 tabs/day)	QL	2
dextroamphetamine ER cap 15mg (DEXEDRINE CR equiv) (QL= 4 caps/day)	QL	2
dextroamphetamine ER cap 5mg (DEXEDRINE CR equiv) (QL= 3 caps/day)	QL	2
dextroamphetamine soln (PROCENTRA equiv)	-	2
dextroamphetamine tab (DEXEDRINE equiv)	-	2
methamphetamine tab (DESOXYN equiv) (QL= 5 tabs/day)	QL	2
zenzedi tab 10mg (DEXEDRINE equiv)	-	2
zenzedi tab 5mg (DEXEDRINE equiv)	-	2
VYVANSE CAP (QL= 1 cap/day)	QL	3
VYVANSE CHEW TAB (QL= 1 cap/day)	QL	3
ADZENYS ER SUSP, AMPHETAMINE ER SUSP	-	NC
ADZENYS XR TAB	-	NC
amphetamine tab (EVEKEO equiv)	-	NC
EVEKEO ODT	-	NC
EVEKEO TAB	-	NC
MYDAYIS CAP	-	NC
ANALEPTICS		
caffeine citrate soln (CAFCIT equiv)	-	2
caffeine citrate inj (CAFCIT equiv)	M	M
CAFFEINE/SODIUM BENZOATE INJ	M	M
doxapram inj	M	M
ANOREXIANTS NON-AMPHETAMINE		
benzphetamine tab	-	NC
LOMAIRA TAB	-	NC
ANTI-OBESITY AGENTS		
BELVIQ XR TAB	-	NC
SAXENDA INJ	-	NC
XENICAL CAP	-	NC
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
atomoxetine cap (STRATTERA equiv) (QL= 1 cap/day)	QL	2
clonidine ER tab (KAPVAY equiv)	-	2
guanfacine ER tab (INTUNIV TAB equiv)	-	2
KAPVAY DOSE PACK	-	4
INTUNIV TAB	-	NC
STRATTERA CAP	-	NC
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI TAB (QL= 1 tab/day)	PA-QL	3
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX TAB	-	NC
STIMULANTS - MISC.		
armodafinil tab (NUVIGIL equiv) (QL= 1 tab/day)	PA-QL	2
dexmethylphenidate ER cap (FOCALIN XR equiv) (QL= 1 cap/day)	QL	2

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EXC	NC =Not Covered	LD	generic =small letters	LPSP	BRANDS =CAPITAL LETTERS
M	Plan Exclusion	OTC	Limited Distribution	PA	Lumicera Preferred Specialty Pharmacy
PSP	Medical Benefit	QL	Over-the-Counter	RS	Prior Authorization
SF	Preferred Specialty Pharmacy	SMKG	Quantity Limit	SP	Restricted to Specialist
ST	Limited to two 15 day fills per month for first 3 months	VAC	Smoking Cessation	¢	Available through Specialty Pharmacy Program
	Step Therapy		Vaccine Program		RxCENTS

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DrugName	Special Code	Tier
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS Cont.		
dexamethylphenidate tab (FOCALIN equiv) (QL= 2 tabs/day)	QL	2
methylphenidate CD cap 10mg, 20mg, 30mg (METADATE CD equiv) (QL= 2 caps/day)	QL	2
methylphenidate CD cap 40mg (METADATE CD equiv) (QL= 1 cap/day)	QL	2
methylphenidate CD cap 50mg (METADATE CD equiv) (QL= 1 cap/day)	QL	2
methylphenidate CD cap 60mg (METADATE CD equiv) (QL= 1 cap/day)	QL	2
methylphenidate ER cap 10mg, 20mg, 30mg (RITALIN LA equiv) (QL= 2 caps/day)	QL	2
methylphenidate ER cap 40mg (RITALIN LA equiv) (QL= 1 cap/day)	QL	2
methylphenidate ER tab 10mg (METADATE equiv) (QL= 2 tabs/day)	QL	2
methylphenidate ER tab 18mg (CONCERTA equiv) (QL= 1 tab/day)	QL	2
METHYLPHENIDATE ER TAB 18mg, 27mg, 36mg, 54mg (QL= 1 tab/day)	QL	2
methylphenidate ER tab 20mg (RITALIN SR equiv) (QL= 3 tabs/day)	QL	2
methylphenidate ER tab 27mg (CONCERTA equiv) (QL= 1 tab/day)	QL	2
methylphenidate ER tab 36mg (QL= 2 tabs/day)	QL	2
methylphenidate ER tab 36mg (CONCERTA equiv) (QL= 2 tabs/day)	QL	2
methylphenidate ER tab 54mg (CONCERTA equiv) (QL= 1 tab/day)	QL	2
methylphenidate soln (METHYLIN equiv)	-	2
methylphenidate tab (RITALIN equiv) (QL= 3 tabs/day)	QL	2
modafinil tab (PROVIGIL equiv) (QL= 2 tabs/day)	PA-QL	2
DAYTRANA PATCH (QL= 1 patch/day)	QL	3
QUILLIVANT XR SUSP (QL= 360ml/30 days)	QL	3
COTEMPLA XR ODT	-	NC
methylphenidate chew tab (METHYLIN equiv)	-	NC
METHYLPHENIDATE ER TAB 72MG	-	NC
NUVIGIL TAB	-	NC

ALLERGENIC EXTRACTS/BIOLOGICALS MISC

ALLERGENIC EXTRACTS

ODACTRA SL TAB	-	NC
PALFORZIA POWDER PACK	-	NC
PALFORZIA SPRINKLE CAP	-	NC

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - R'S

RESERVAPAK SYRUP	-	NC
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AMEBICIDES

AMEBICIDES

YODOXIN TAB	-	3
SOLOSEC GRANULES PACKET	-	NC

AMINOGLYCOSIDES

AMINOGLYCOSIDES

neomycin tab	-	2
PAROMOMYCIN CAP	-	2
paromomycin cap (HUMATIN equiv)	-	2
ARIKAYCE SUSP (QL= 1 vial/day; Only available through Maxor Pharmacy 800-658-6046)	LD-PA-QL	5
TOBI PODHALER	PSP	5
tobramycin neb soln (TOBI equiv)	LPSP-PA	5
AMIKACIN INJ	M	M

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DrugName	Special Code	Tier
AMINOGLYCOSIDES Cont.		
GENTAMICIN INJ	M	M
gentamycin/nacl inj	M	M
KANAMYCIN INJ	M	M
STREPTOMYCIN INJ	M	M
tobramycin inj	M	M
TOBRAMYCIN/NAACL INJ	M	M
KITABIS PAK NEB SOLN	-	NC

ANALGESICS - ANTI-INFLAMMATORY

ANTIRHEUMATIC - ENZYME INHIBITORS

RINVOQ ER TAB (QL= 1 tab/day)	LPSP-PA-QL	5
OLUMIANT TAB	-	NC
XELJANZ TAB	-	NC
XELJANZ XR TAB	-	NC

ANTIRHEUMATIC ANTIMETABOLITES

RHEUMATREX TAB	-	4
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ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

HUMIRA INJ 10MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5
HUMIRA INJ 20MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5
HUMIRA INJ 40MG (QL= 2 syringes/28 days)	LPSP-PA-QL	5
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK (QL= 1 pack/fill, 1 fill/plan year)	LPSP-PA-QL	5
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK (QL= 1 pack/fill, 1 fill/plan year)	LPSP-PA-QL	5
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK (QL= 1 pack/fill, 1 fill/plan year)	LPSP-PA-QL	5
HUMIRA PEN INJ 40MG (QL= 2 pens/28 days)	LPSP-PA-QL	5
SIMPONI SC INJ	-	NC

GOLD COMPOUNDS

RIDAURA CAP	-	3
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INTERLEUKIN-1 BLOCKERS

ARCALYST INJ	M	M
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INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)

KINERET INJ	-	NC
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INTERLEUKIN-1BETA BLOCKERS

ILARIS INJ	-	NC
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INTERLEUKIN-6 RECEPTOR INHIBITORS

ACTEMRA ACTPEN INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
ACTEMRA SC INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
KEVZARA INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
ACTEMRA IV INJ	M	M

NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)

diclofenac sodium EC tab (VOLTAREN equiv)	-	1
ibuprofen tab	-	1
ibuprofen tab ((RX Only))	-	1
meloxicam tab (MOBIC equiv)	-	1
naproxen EC tab (NAPROSYN EC equiv)	-	1
naproxen sodium tab (ANAPROX equiv)	-	1
naproxen tab (NAPROSYN equiv)	-	1

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ANALGESICS - ANTI-INFLAMMATORY Cont.		
celecoxib cap (CELEBREX equiv)	-	2
diclofenac potassium tab (CATAFLAM equiv)	-	2
diclofenac sodium XR tab (VOLTAREN XR equiv)	-	2
diclofenac/misoprostol DR tab (ARTHROTEC equiv)	-	2
etodolac cap (LODINE equiv)	-	2
etodolac ER tab (LODINE XL equiv)	-	2
etodolac tab	-	2
fenoprofen calcium tab	-	2
FENOPROFEN TAB	-	2
flurbiprofen tab (ANSAID equiv)	-	2
ibuprofen susp (Rx ONLY) (ADVIL, MOTRIN equiv)	-	2
indomethacin cap (INDOCIN equiv)	-	2
indomethacin CR cap (INDOCIN SR equiv)	-	2
KETOPROFEN CAP	-	2
ketoprofen cap (ORUDIS equiv)	-	2
KETOPROFEN ER CAP	-	2
ketorolac tab (TORADOL equiv) (QL= 20 tabs/30 days)	QL	2
MECLOFENAMATE CAP	-	2
mefenamic acid cap (PONSTEL equiv)	-	2
MELOXICAM SUSP	-	2
nabumetone tab (RELAFEN equiv)	-	2
naproxen sodium CR tab (NAPRELAN CR equiv)	-	2
NAPROXEN SUSP	-	2
naproxen susp (NAPROSYN equiv)	-	2
oxaprozin tab (DAYPRO equiv)	-	2
piroxicam cap (FELDENE equiv)	-	2
sulindac tab (CLINORIL equiv)	-	2
TOLMETIN CAP	-	2
tolmetin cap (TOLECTIN DS equiv)	-	2
TOLMETIN TAB	-	2
FENOPROFEN CAP	-	4
NAPRELAN CR TAB 375MG, 750MG	-	4
indomethacin inj	M	M
KETOROLAC INJ	M	M
ketorolac inj (TORADOL equiv)	M	M
DUEXIS TAB	-	NC
IBU 600-EZS KIT	-	NC
INDOMETHACIN CAP, TIVORBEX CAP	-	NC
INFLATHERM PAK	-	NC
KETOROLAC TROMETHAMINE NASAL SPRAY, SPRIX NASAL SPRAY	-	NC
naproxen/esomeprazole magnesium DR tab (VIMOVO equiv)	-	NC
QMIIZ ODT TAB	-	NC
RELAFEN DS TAB	-	NC
SPRIX NASAL SPRAY	-	NC
VIMOVO TAB	-	NC
VIVLODEX CAP	-	NC
YBUPHEN TAB	-	NC

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DrugName	Special Code	Tier
ANALGESICS - ANTI-INFLAMMATORY Cont.		
ZIPSOR CAP	-	NC
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA STARTER PACK (QL= 1 pack/ 28 days)	LPSP-PA-QL	5
OTEZLA TAB (QL= 2 tabs/day)	LPSP-PA-QL	5
PYRIMIDINE SYNTHESIS INHIBITORS		
leflunomide tab (ARAVA equiv)	-	2
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA CLICK INJ (QL= 4 inj/28 days)	LPSP-PA-QL	5
ORENCIA SC INJ 125MG/ML (QL= 4 inj/28 days)	LPSP-PA-QL	5
ORENCIA SC INJ 50MG/0.4ML (QL= 4 inj/28 days)	LPSP-PA-QL	5
ORENCIA SC INJ 87.5MG/0.7ML (QL= 4 inj/28 days)	LPSP-PA-QL	5
ORENCIA INJ	LPSP-M	M
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25MG (QL= 8 inj/28 days)	LPSP-PA-QL	5
ENBREL INJ 50MG (QL= 4 inj/28 days)	LPSP-PA-QL	5
ENBREL MINI INJ (QL= 4 inj/28 days)	LPSP-PA-QL	5
ENBREL SURECLICK INJ 50MG (QL= 4 inj/28 days)	LPSP-PA-QL	5
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
ALLZITAL TAB	-	2
ALLZITAL TAB, BUPAP TAB	-	2
butalbital/acetaminophen tab (PHRENILIN equiv)	-	2
butalbital/acetaminophen/caffeine cap (FIORICET equiv)	-	2
butalbital/acetaminophen/caffeine tab (FIORICET equiv)	-	2
butalbital/aspirin/caffeine cap (FIORINAL equiv)	-	2
BUTALBITAL/ASPIRIN/CAFFEINE TAB	-	2
DURAXIN CAP	-	2
ed-flex cap	-	2
FRENADOL TAB	-	2
novagesic tab	-	2
phenyltoloxamine/acetaminophen tab	-	2
butalbital/acetaminophen cap	-	NC
butalbital/acetaminophen/caffeine soln	-	NC
ANALGESICS OTHER		
clonidine inj	M	M
ANALGESICS-PEPTIDE CHANNEL BLOCKERS		
PRIALT INJ	M	M
SALICYLATES		
CHO MAG TRIS LIQUID	-	2
CHOLINE MAGNESIUM TRISALICYLATE TAB	-	2
choline magnesium trisalicylate tab (TRILISATE equiv)	-	2
choline/magnesium liquid	-	2
diflunisal tab (DOLOBID equiv)	-	2
magnesium salicylate tab	-	2
salsalate tab (DISALCID equiv)	-	3

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DrugName	Special Code	Tier
ANALGESICS - NONNARCOTIC Cont.		
ZORPRIN TAB	-	4
aspirin chew tab 81mg (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6
aspirin ec tab 325mg (Covered for males age 45-79 and females age 55-79)	OTC	6
aspirin ec tab 81mg (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6
aspirin effer tab (MEDI-SELTZER equiv) (Covered for males age 45-79 years and women age 55-79 years)	OTC	6
aspirin tab (Covered for males age 45-79 years and women age 55-79 years.)	OTC	6
aspirin tab 325mg (Covered for males age 45-79 and females age 55-79)	OTC	6
ASPIRIN TAB 81MG (Covered for males age 45-79; Covered for females (no age restriction))	OTC	6

ANALGESICS - OPIOID

OPIOID AGONISTS		
CODEINE SULFATE SOLN	-	2
codeine sulfate tab	-	2
fentanyl citrate lollipop (ACTIQ equiv)	PA	2
fentanyl patch (DURAGESIC equiv) (QL= 10 patches/30 days)	QL	2
hydromorphone ER tab (EXALGO equiv)	-	2
hydromorphone liquid	-	2
HYDROMORPHONE SUPP	-	2
hydromorphone tab (DILAUDID equiv)	-	2
MEPERIDINE TAB	-	2
meperidine tab (DEMEROL equiv)	-	2
METHADONE SOLN	-	2
methadone tab (DOLOPHINE equiv)	-	2
methadose tab	-	2
morphine sulfate ER cap (KADIAN equiv) (QL= 2 caps/day)	QL	2
morphine sulfate ER tab (MS CONTIN equiv) (QL= 2 tabs/day)	QL	2
morphine sulfate soln	-	2
MORPHINE SULFATE SUPP	-	2
morphine sulfate tab	-	2
oxycodone cap (OXYIR equiv)	-	2
oxycodone conc (ROXICODONE equiv)	-	2
oxycodone soln	-	2
oxycodone soln (ROXICODONE equiv)	-	2
oxycodone tab (ROXICODONE equiv)	-	2
oxymorphone ER tab (OPANA ER equiv) (QL= 2 tabs/day)	QL	2
oxymorphone tab 10mg (OPANA equiv) (QL= 8 tabs/day)	QL	2
oxymorphone tab 5mg (OPANA equiv) (QL= 16 tabs/day)	QL	2
tramadol ER tab (ULTRAM ER equiv) (QL= 1 tab/day)	QL	2
tramadol tab (ULTRAM equiv) (QL= 8 tabs/day)	QL	2
FENTORA TAB, FENTANYL BUCCAL TAB	-	3
NUCYNTA ER TAB (QL= 2 tabs/day)	QL	3
NUCYNTA TAB (QL= 6 tabs/day)	QL	3
OXAYDO TAB, ROXYBOND TAB	-	3
OXYCONTIN CR TAB (QL= 4 tabs/day)	QL	3
XTAMPZA ER CAP (QL= 120 caps/30 days)	QL	3
ABSTRAL SL TAB (QL= 120 tabs/30 days)	PA-QL	4
EMBEDA CAP	-	4

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ANALGESICS - OPIOID Cont.		
KADIAN CAP (QL= 2 caps/day)	QL	4
LAZANDA NASAL SPRAY (QL= 15 bottles/30 days)	PA-QL	4
MORPHINE SULFATE ER BEAD CAP (QL= 1 cap/day)	QL	4
RYBIX ODT	-	4
TRAMADOL ER/CONZIP CAP 100MG, 200MG, 300MG (QL= 1 cap/day)	QL	4
alfentanil inj	M	M
CODEINE PHOSPHATE INJ	M	M
DEMEROL INJ	M	M
DEPODUR INJ	M	M
fentanyl cit inj	M	M
FENTANYL CITRATE INJ	M	M
HYDROMORPHONE INJ	M	M
INFUMORPH INJ	M	M
meperidine inj	M	M
methadone inj	M	M
MORPHINE SULFATE INJ	M	M
morphine sulfate inj (INFUMORPH INJ equiv)	M	M
sufentanil inj	M	M
ARYMO ER TAB	-	NC
DSUVIA SL TAB	-	NC
fentanyl patch 37.5mcg, 62.5mcg, 87.5mcg (FENTANYL equiv)	-	NC
hydrocodone bitartrate ER cap (ZOHYDRO equiv)	-	NC
HYSINGLA ER TAB	-	NC
LEVORPHANOL TAB	-	NC
levorphanol tab (LEVORPHANOL equiv)	-	NC
MORPHABOND TAB	-	NC
oxycodone ER tab (OXYCONTIN equiv)	-	NC
TRAMADOL HCL TAB 100MG	-	NC
ZOHYDRO ER CAP	-	NC

OPIOID COMBINATIONS

acetaminophen/caffeine/dihydrocodeine tab	-	2
acetaminophen/codeine soln	-	2
acetaminophen/codeine tab (TYLENOL/CODEINE equiv)	-	2
aspirin/codeine tab	-	2
butalbital/acetaminophen/caffeine/codeine cap (FIORICET/CODEINE equiv)	-	2
butalbital/aspirin/caffeine/codeine cap (FIORINAL/CODEINE equiv)	-	2
DVORAH TAB, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE TAB	-	2
hydrocodone/acetaminophen cap (LORCET equiv)	-	2
hydrocodone/acetaminophen soln (HYCET, LORTAB equiv)	-	2
hydrocodone/acetaminophen tab	-	2
hydrocodone/acetaminophen tab (LORTAB equiv)	-	2
hydrocodone/ibuprofen tab (VICOPROFEN equiv)	-	2
oxycodone/acetaminophen cap (TYLOX equiv)	-	2
OXYCODONE/ACETAMINOPHEN SOLN	-	2
oxycodone/acetaminophen tab (PERCOCET equiv)	-	2
OXYCODONE/ASPIRIN TAB	-	2
oxycodone/aspirin tab (PERCODAN equiv)	-	2

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ANALGESICS - OPIOID Cont.		
OXYCODONE/IBUPROFEN TAB	QL	2
oxycodone/ibuprofen tab (COMBUNOX equiv) (QL= 28 tabs/30 days)	QL	2
pentazocine/acetaminophen tab (TALACEN equiv)	-	2
tramadol/acetaminophen tab (ULTRACET equiv) (QL= 8 tabs/day)	QL	2
TREZIX CAP, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE CAP	-	2
LORTAB ELIXIR	-	3
ROXICET SOLN	-	3
APADAZ TAB	-	NC
oxycodone/acetaminophen tab 2.5-300mg (NALOCET equiv)	-	NC
VERDROCET TAB 2.5MG-325MG	-	NC
OPIOID PARTIAL AGONISTS		
buprenorphine patch (BUTRANS equiv)	-	2
buprenorphine SL tab (SUBUTEX equiv)	-	2
buprenorphine/naloxone sl film (SUBOXONE equiv)	-	2
buprenorphine/naloxone SL tab (SUBOXONE equiv)	-	2
butorphanol nasal spray (STADOL equiv) (QL= 2 bottles/30 days)	QL	2
pentazocine/naloxone tab (TALWIN NX equiv)	-	2
BUNAVAIL FILM	-	3
SUBOXONE SL FILM	-	3
ZUBSOLV SL TAB	-	3
BUTRANS PATCH 5 MCG/HR, 10 MCG/HR, 15 MCG/HR, 20 MCG/HR	-	4
buprenorphine inj	M	M
butorphanol inj	M	M
nalbuphine inj	M	M
TALWIN INJ	M	M
BELBUCA FILM	-	NC
SUBLOCADE INJ	-	NC
ANDROGENS-ANABOLIC		
ANABOLIC STEROIDS		
oxandrolone tab (OXANDRIN equiv)	-	2
ANADROL-50 TAB	-	4
ANDROGENS		
danazol cap (DANOCRINE equiv)	-	2
testosterone cypionate inj (DEPO-TESTOSTERONE equiv)	PA	2
testosterone gel 1% 25mg (ANDROGEL equiv)	-	2
testosterone gel 1% 50mg (ANDROGEL equiv)	-	2
testosterone gel 1% pump (ANDROGEL equiv)	-	2
testosterone gel 1.62% 1.25gm (ANDROGEL equiv)	-	2
testosterone gel 1.62% 2.5gm (ANDROGEL equiv)	-	2
testosterone gel 2% (FORTESTA equiv) (Step therapy requires trial of ANDROGEL equiv)	ST	2
testosterone gel pump 1.62% (ANDROGEL equiv)	-	2
testosterone soln (AXIRON equiv) (Step therapy requires trial of ANDROGEL equiv)	ST	2
ANDROXY TAB	-	3
METHITEST TAB	-	3
ANDRODERM PATCH (Step therapy requires trial of ANDROGEL equiv)	ST	4
ANDROGEL 1.62% 1.25GM	-	4

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ANDROGENS-ANABOLIC Cont.		
ANDROGEL 1.62% 2.5GM	-	4
ANDROGEL PUMP 1.62%	-	4
AXIRON SOLN (Step therapy requires trial of ANDROGEL equiv)	ST	4
FORTESTA GEL 2% (Step therapy requires trial of ANDROGEL equiv)	ST	4
TESTIM GEL (Step therapy requires trial of ANDROGEL equiv)	ST	4
TESTOSTERONE GEL 1% 25MG	-	4
TESTOSTERONE GEL 1% 50MG	-	4
TESTOSTERONE GEL PUMP	-	4
TESTOSTERONE GEL, VOGELXO GEL (Step therapy requires trial of ANDROGEL equiv)	ST	4
TESTOSTERONE ENANTHATE INJ	M	M
ANDROGEL 1% 25MG	-	NC
ANDROGEL 1% 50MG	-	NC
JATENZO CAP	-	NC
METHYLTESTOSTERONE CAP	-	NC
NATESTO NASAL GEL	-	NC
STRIANT FILM	-	NC
VOGELXO PUMP	-	NC
XYOSTED INJ	-	NC

ANORECTAL AGENTS

INTRARECTAL STEROIDS

hydrocortisone enema (CORTENEMA equiv)	-	2
CORTIFOAM	-	3
UCERIS RECTAL FOAM	PA	4

RECTAL COMBINATIONS

lidocaine/hydrocortisone cream (ANAMANTLE equiv)	-	2
lidocaine/hydrocortisone kit (ANALPRAM equiv)	-	2
LIDOCAINE/HYDROCORTISONE RECTAL CREAM KIT	-	2
LIDO-HYDRO GEL	-	2
pramoxine/hydrocortisone cream kit (ANALPRAM-HC equiv)	-	2
ANALPRAM-HC LOTION	-	3
PROCTOFOAM HC FOAM	-	3
ANALPRAM-E KIT	-	4
ANALPRAM-HC CREAM	-	NC
pramoxine/hydrocortisone cream (ANALPRAM-HC equiv)	-	NC
PROCORT CREAM	-	NC

RECTAL STEROIDS

proctosol HC cream (ANUSOL HC equiv)	-	2
hydrocortisone supp (ANUSOL HC equiv)	-	NC

VASODILATING AGENTS

RECTIV OINT	-	3
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ANTHELMINTICS

ANTHELMINTICS

albendazole tab (ALBENZA equiv)	-	2
ivermectin tab (STROMEKTOL equiv)	-	2
mebendazole chew tab (VERMOX equiv)	-	2

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ANTHELMINTICS Cont.		
praziquantel tab (BILTRICIDE equiv)	-	2
ALBENZA TAB	-	3
BENZNIDAZOLE TAB	PA	3
BILTRICIDE TAB	-	3
EGATEN TAB	-	NC
EMVERM TAB	-	NC

ANTIANGINAL AGENTS

ANTIANGINALS-OTHER

ranolazine tab (RANEXA equiv)	-	2
RANEXA TAB	-	3

NITRATES

ISORDIL TAB 40MG	-	1
ISOSORBIDE DINITRATE ER TAB	-	1
isosorbide dinitrate ER tab (ISOCHRON equiv)	-	1
isosorbide dinitrate SL tab	-	1
isosorbide dinitrate tab (ISORDIL equiv)	-	1
isosorbide dinitrate tab 40mg (ISORDIL equiv)	-	1
isosorbide mononitrate ER tab (IMDUR equiv)	-	1
isosorbide mononitrate tab (MONOKET equiv)	-	1
nitroglycerin SL tab (NITROSTAT equiv)	-	1
AMYL NITRITE INH	-	2
NITROGLYCERIN ER CAP	-	2
NITROGLYCERIN LINGUAL AEROSOL	-	2
nitroglycerin lingual spray (NITROLINGUAL equiv)	-	2
nitroglycerin patch (NITRO-DUR equiv)	-	2
DILATRATE SR CAP	-	3
NITRO-BID OINT	-	3
NITRO-DUR PATCH 0.3MG/HR, 0.8MG/HR	-	3
NITROMIST SPRAY	-	4
NITROGLYCERIN INJ	M	M
nitroglycerine/d5w inj (NITROGLYCERIN/D5W equiv)	M	M
GONITRO POWDER	-	NC
NITROGLYCERIN/D5W INJ	-	NC
NITROSTAT SL TAB	-	NC

ANTIANGIETY AGENTS

ANTIANGIETY AGENTS - MISC.

buspirone tab (BUSPAR equiv)	-	1
hydroxyzine pamoate cap (VISTARIL equiv)	-	2
HYDROXYZINE PAMOATE CAP 100MG	-	2
hydroxyzine syrup (ATARAX equiv)	-	2
hydroxyzine tab (ATARAX equiv)	-	2
meprobamate tab (MILTOWN equiv)	-	2
droperidol inj	M	M
HYDROXYZINE INJ	M	M

BENZODIAZEPINES

alprazolam ER tab (XANAX XR equiv)	-	2
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ANTIANSXIETY AGENTS Cont.		
alprazolam ODT (NIRAVAM equiv)	-	2
alprazolam tab (XANAX equiv)	-	2
chlordiazepoxide cap (LIBRIUM equiv)	-	2
clorazepate tab (TRANXENE-T equiv)	-	2
diazepam conc (VALIUM equiv)	-	2
DIAZEPAM SOLN	-	2
diazepam tab (VALIUM equiv)	-	2
lorazepam conc (ATIVAN equiv)	-	2
lorazepam tab (ATIVAN equiv)	-	2
OXAZEPAM CAP	-	2
oxazepam cap (SERAX equiv)	-	2
DIAZEPAM INJ	M	M
lorazepam inj	M	M
ANTIARRHYTHMICS		
ANTIARRHYTHMICS - MISC.		
adenosine inj (ADENOCARD equiv)	M	M
ANTIARRHYTHMICS TYPE I-A		
disopyramide cap (NORPACE equiv)	-	2
disopyramide ER cap (NORPACE CR equiv)	-	2
quinidine gluconate CR tab	-	2
QUINIDINE SULFATE ER TAB	-	2
quinidine sulfate tab	-	2
NORPACE CR CAP	-	4
procainamide inj	M	M
QUINIDINE GLUCONATE INJ	M	M
ANTIARRHYTHMICS TYPE I-B		
mexiletine hcl cap	-	2
LIDOCAINE INJ	M	M
lidocaine inj (XYLOCAINE equiv)	M	M
lidocaine/d5w inj	M	M
ANTIARRHYTHMICS TYPE I-C		
flecainide tab (TAMBOCOR equiv)	-	2
propafenone ER cap (RYTHMOL SR equiv)	-	2
propafenone tab (RYTHMOL equiv)	-	2
ANTIARRHYTHMICS TYPE III		
amiodarone tab (CORDARONE equiv)	-	2
dofetilide cap (TIKOSYN equiv)	-	2
MULTAQ TAB	-	4
PACERONE TAB	-	4
amiodarone inj (CORDARONE equiv)	M	M
ibutilide inj (CORVERT equiv)	M	M
NEXTERONE INJ	M	M
TIKOSYN CAP	-	NC

ANTIASTHMATIC AND BRONCHODILATOR AGENTS

ANTIASTHMATIC - MONOCLONAL ANTIBODIES

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DrugName	Special Code	Tier
ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS Cont.		
FASENRA PEN INJ (QL= 1 inj/56 days)	LPSP-PA-QL	5
NUCALA INJ (QL= 1 inj/28 days)	LPSP-PA-QL	5
XOLAIR INJ	LPSP-PA	5
ANTI-INFLAMMATORY AGENTS		
cromolyn neb soln (INTAL equiv)	-	2
ASTHMA AND BRONCHODILATOR AGENT COMBINATIONS		
difil-g forte liquid (BRONDIL equiv)	-	2
dyphylline-gg tab (LUFYLLIN-GG equiv)	-	2
BRONCHODILATORS - ANTICHOLINERGICS		
ipratropium neb soln (ATROVENT equiv) (QL= 125 nebs/30 days)	QL	2
ATROVENT HFA INHALER (QL= 2 inhalers/30 days)	QL	3
INCRUSE ELLIPTA INHALER	-	3
SPIRIVA HANDIHALER (QL= 1 inhaler/30 days)	QL	3
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT (Step Therapy requires trial of ADVAIR, BREO, DULERA, or FLUTICASONE/SALMETEROL)	ST	3
LONHALA MAGNAIR SOLN	-	NC
SEEBRI NEOHALER CAP	-	NC
TUDORZA PRESSAIR INHALER	-	NC
YUPELRI SOLN	-	NC
LEUKOTRIENE MODULATORS		
montelukast chew tab (SINGULAIR equiv)	-	2
montelukast granule pack (SINGULAIR equiv)	-	2
montelukast tab (SINGULAIR equiv)	-	2
zafirlukast tab (ACCOLATE equiv)	-	2
zileuton ER tab (ZYFLO CR equiv)	-	2
ZYFLO	-	4
ZYFLO CR TAB	-	NC
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP TAB	-	3
STEROID INHALANTS		
budesonide inh susp (PULMICORT equiv) (QL= 2 nebs/day)	QL	2
ARNUITY ELLIPTA INHALER	-	3
ASMANEX HFA INHALER (QL= 2 inhalers/30 days)	QL	3
ASMANEX INHALER (QL= 2 inhalers/30 days)	QL	3
FLOVENT DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3
FLOVENT HFA INHALER (QL= 2 inhalers/30 days)	QL	3
ALVESCO INHALER	-	NC
ARMONAIR RESPICLICK	-	NC
QVAR INHALER	-	NC
QVAR REDHALER	-	NC
SYMPATHOMIMETICS		
albuterol neb soln 0.083% (PROVENTIL equiv) (QL= 3 boxes/30 days)	QL	2
albuterol neb soln 0.5% (VENTOLIN equiv) (QL= 5 boxes/30 days)	QL	2
albuterol neb soln 0.63mg (ACCUNEB equiv) (QL= 5 boxes/30 days)	QL	2
albuterol neb soln 1.25mg (ACCUNEB equiv) (QL= 5 boxes/30 days)	QL	2

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M	Medical Benefit	OTC	Over-the-Counter	PA	Prior Authorization
PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
ANTIASTHMATIC AND BRONCHODILATOR AGENTS Cont.		
albuterol sulfate ER tab (VOSPIRE ER equiv)	-	2
albuterol sulfate syrup	-	2
albuterol sulfate tab	-	2
ALBUTEROL TAB ER	-	2
albuterol/ipratropium neb soln (DUONEB equiv)	-	2
FLUTICASONE/SALMETEROL INHALER	-	2
levalbuterol neb soln (XOPENEX equiv) (QL= 6 nebs/day)	QL	2
metaproterenol syrup	-	2
METAPROTERENOL TAB	-	2
terbutaline sulfate tab (BRETHINE equiv)	-	2
wixela inhub inhaler (ADVAIR equiv) (QL= 1 inhaler/30 days)	QL	2
ADVAIR DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3
ADVAIR HFA INHALER (QL= 1 inhaler/30 days)	QL	3
ANORO ELLIPTA INHALER	-	3
BREO ELLIPTA INHALER (QL= 1 inhaler/30 days)	QL	3
COMBIVENT INHALER (QL= 2 inhalers/30 days)	QL	3
COMBIVENT RESPIMAT INHALER (QL= 2 inhalers/30 days)	QL	3
DULERA INHALER (QL= 1 inhaler/30 days)	QL	3
PERFOROMIST NEB SOLN (QL= 2 nebs/day)	QL	3
PROAIR HFA INHALER	QL	3
SEREVENT DISKUS INHALER (QL= 1 inhaler/30 days)	QL	3
STIOLTO INHALER	-	3
TRELEGY ELLIPTA INHALER	-	3
VENTOLIN HFA INHALER (QL= 2 inhalers/30 days)	QL	3
ARCAPTA NEOHALER (QL= 1 inhaler/30 days)	QL	4
BROVANA NEB SOLN (QL= 2 nebs/day)	QL	4
LEVALBUTEROL INHALER, XOPENEX HFA INHALER (QL= 2 inhalers/30 days)	QL	4
STRIVERDI RESPIMAT INHALER (QL= 1 inhaler/30 days)	QL	4
epinephrine inj (ADRENALIN equiv)	M	M
terbutaline inj (BRETHINE equiv)	M	M
AIRDUO RESPICLICK	-	NC
BEVESPI AEROSPHERE INHALER	-	NC
BUDESONIDE/FORMOTEROL INHALER, SYMBICORT INHALER	-	NC
DUAKLIR INHALER	-	NC
fluticasone/salmeterol inhaler (ADVAIR equiv)	-	NC
UTIBRON NEOHALER CAP	-	NC

XANTHINES

aminophylline tab	-	2
THEOCHRON TAB	-	2
theophylline CR tab (QUIBRON-T equiv)	-	2
theophylline ER tab (UNIPHYL equiv)	-	2
theophylline soln	-	2
ELIXOPHYLLIN ELIXIR	-	3
LUFYLLIN TAB	-	4
THEO-24 CAP	-	4
aminophylline inj	M	M
theophylline/d5w inj	M	M

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DrugName	Special Code	Tier
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
warfarin tab (COUMADIN equiv)	-	1
COUMADIN TAB	-	4
DIRECT FACTOR XA INHIBITORS		
ELIQUIS TAB, ELIQUIS STARTER PACK (QL= 2 tabs/day)	QL	3
XARELTO TAB	-	3
BEVYXXA CAP	-	NC
SAVAYSA TAB	-	NC
HEPARINS AND HEPARINOID-LIKE AGENTS		
enoxaparin inj (LOVENOX equiv) (Limited to 35 day supply/180 days)	QL	2
fondaparinux inj (ARIXTRA equiv)	-	2
FRAGMIN INJ (Limited to 35 day supply/180 days)	QL	4
heparin lock flush	M	M
heparin sodium inj	M	M
heparin sodium/nacl inj	M	M
HEPARIN/D5W INJ	M	M
heparin/d5w inj (HEPARIN/ D5W equiv)	M	M
THROMBIN INHIBITORS		
PRADAXA CAP (QL= 2 caps/day)	QL	3
argatroban inj	M	M
ANTICONSULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA TAB	PA	4
FYCOMPA SUSP	PA	4
ANTICONSULSANTS - BENZODIAZEPINES		
clobazam tab (ONFI equiv)	PA	2
clonazepam ODT (KLONOPIN equiv)	-	2
clonazepam tab (KLONOPIN equiv)	-	2
DIASTAT PEDIATRIC RECTAL GEL	-	2
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL (QL= 2 packs/fill)	QL	4
clobazam susp (ONFI equiv)	-	NC
NAYZILAM SPRAY	-	NC
ONFI SUSP	-	NC
SYMPAZAN ORAL FILM	-	NC
VALTOCO LIQUID	-	NC
VALTOCO SPRAY	-	NC
ANTICONSULSANTS - MISC.		
zonisamide cap (ZONEGRAN equiv)	-	1
carbamazepine chew tab (TEGRETOL equiv)	-	2
carbamazepine ER cap (CARBATROL equiv)	-	2
carbamazepine ER tab (TEGRETOL XR equiv)	-	2
carbamazepine susp (TEGRETOL equiv)	-	2
carbamazepine tab (TEGRETOL equiv)	-	2
gabapentin cap (NEURONTIN equiv)	-	2
gabapentin soln (NEURONTIN equiv)	-	2

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
gabapentin tab (NEURONTIN equiv)	-	2
LAMICTAL ODT KIT, LAMICTAL XR KIT	-	2
lamotrigine chew tab (LAMICTAL equiv)	-	2
lamotrigine ER tab (LAMICTAL XR equiv)	-	2
lamotrigine ODT (LAMICTAL equiv)	-	2
lamotrigine ODT kit (LAMICTAL ODT KIT equiv)	-	2
lamotrigine tab (LAMICTAL equiv)	-	2
levetiracetam ER tab (KEPPRA XR equiv)	-	2
levetiracetam soln (KEPPRA equiv)	-	2
levetiracetam tab (KEPPRA equiv)	-	2
oxcarbazepine susp (TRILEPTAL equiv)	-	2
oxcarbazepine tab (TRILEPTAL equiv)	-	2
pregabalin cap (LYRICA equiv)	-	2
pregabalin soln (LYRICA equiv)	-	2
primidone tab (MYSOLINE equiv)	-	2
topiramate sprinkle cap (TOPAMAX equiv)	-	2
topiramate tab (TOPAMAX equiv)	-	2
BANZEL TAB	-	3
LAMICTAL ODT	-	3
LYRICA CAP	-	3
LYRICA SOLN	-	3
POTIGA TAB (QL= 3 tabs/day)	QL	3
VIMPAT SOLN	-	3
VIMPAT TAB (QL= 2 tabs/day)	QL	3
BANZEL SUSP	-	4
KEPPRA SOLN	-	4
KEPPRA TAB	-	4
KEPPRA XR TAB	-	4
LAMICTAL CHEW TAB 2MG	-	4
TEGRETOL CHEW TAB	-	4
TEGRETOL SUSP	-	4
TEGRETOL TAB	-	4
TEGRETOL XR TAB	-	4
TRILEPTAL SUSP	-	4
TRILEPTAL TAB	-	4
EPIDIOLEX SOLN (Only available through Walgreens 888-347-3416)	LD-PA	5
levetiracetam inj	M	M
BRIVIACT INJ 50MG/5ML	-	NC
BRIVIACT SOLN 10MG/ML	-	NC
BRIVIACT TAB	-	NC
DIACOMIT CAP	-	NC
DIACOMIT POWDER PACK	-	NC
FINTEPLA SOLN	-	NC
LAMICTAL STARTER KIT	-	NC
LEVETIRACETAM INJ	-	NC
OXTELLAR XR TAB	-	NC
SPRITAM TAB	-	NC

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
CARBAMATES		
felbamate susp (FELBATOL equiv)	-	2
felbamate tab (FELBATOL equiv)	-	2
XCOPRI PAK	-	NC
XCOPRI TAB	-	NC
GABA MODULATORS		
tiagabine tab (GABITRIL equiv)	-	2
SABRIL POWDER PACK (Only available through Walgreens 888-347-3416)	LD-PA	5
SABRIL TAB (Only available through Walgreens 888-347-3416)	LD-PA	5
vigabatrin powder pack (SABRIL POWDER equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5
vigabatrin tab (SABRIL equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5
HYDANTOINS		
phenytoin cap (DILANTIN equiv)	-	2
phenytoin chew tab (DILANTIN equiv)	-	2
phenytoin susp (DILANTIN equiv)	-	2
DILANTIN CAP 30MG	-	3
PEGANONE TAB	-	3
DILANTIN CAP 100MG	-	4
DILANTIN INFATABS	-	4
DILANTIN SUSP	-	4
fosphenytoin sodium inj	M	M
phenytoin inj	M	M
SUCCINIMIDES		
ethosuximide cap (ZARONTIN equiv)	-	2
ethosuximide soln (ZARONTIN equiv)	-	2
CELONTIN CAP	-	3
ZARONTIN CAP	-	4
ZARONTIN SOLN	-	4
VALPROIC ACID		
divalproex ER tab (DEPAKOTE ER equiv)	-	2
divalproex sodium DR tab (DEPAKOTE equiv)	-	2
divalproex sprinkle cap (DEPAKOTE equiv)	-	2
valproic acid cap (DEPAKENE equiv)	-	2
valproic acid syrup (DEPAKENE equiv)	-	2
DEPAKENE CAP	-	4
DEPAKENE SYRUP	-	4
DEPAKOTE ER TAB	-	4
DEPAKOTE SPRINKLE CAP	-	4
DEPAKOTE TAB	-	4
STAVZOR CAP	-	4
valproate inj	M	M
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
mirtazapine ODT (REMERON equiv)	-	2
mirtazapine tab (REMERON equiv)	-	2

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DrugName	Special Code	Tier
ANTIDEPRESSANTS Cont.		
ANTIDEPRESSANTS - MISC.		
bupropion ER tab (WELLBUTRIN equiv) (QL= 2 tabs/day)	QL	2
bupropion tab (WELLBUTRIN equiv)	-	2
bupropion XL tab (WELLBUTRIN XL equiv) (QL= 1 tab/day)	QL	2
MAPROTILINE TAB	-	2
APLENZIN TAB (QL= 1 tab/day)	QL	4
FORFIVO XL TAB (QL= 1 tab/day)	QL	4
bupropion SR tab 150mg (WELLBUTRIN equiv) (QL= 2 tabs/day)	QL	6
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
phenelzine tab (NARDIL equiv)	-	2
tranylcypromine tab (PARNATE equiv)	-	2
EMSAM PATCH	-	4
MARPLAN TAB	-	4
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO NASAL SOLN	-	NC
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
citalopram tab (CELEXA equiv) (QL= 1 tab/day)	QL	1
escitalopram tab (LEXAPRO equiv) (QL= 1 tab/day)	QL	1
escitalopram tab 10mg (QL= 1.5 tabs/day)	QL	1
fluoxetine cap 10mg (PROZAC equiv) (QL= 1 cap/day)	QL	1
fluoxetine cap 20mg (PROZAC equiv) (QL= 3 caps/day)	QL	1
fluoxetine cap 40mg (PROZAC equiv) (QL= 2 caps/day)	QL	1
paroxetine tab 10mg (QL= 1.5 tabs/day)	QL	1
paroxetine tab 20mg, 40mg (PAXIL equiv) (QL= 1 tab/day)	QL	1
paroxetine tab 30mg (QL= 2 tabs/day)	QL	1
sertraline tab 100mg (ZOLOFT equiv) (QL= 2 tabs/day)	QL	1
sertraline tab 25mg, 50mg (ZOLOFT equiv) (QL= 1.5 tabs/day)	QL	1
citalopram soln (CELEXA equiv) (QL= 600ml/30 days)	QL	2
escitalopram soln (LEXAPRO equiv) (QL= 600ml/30 days)	QL	2
fluoxetine soln (PROZAC equiv) (QL= 600ml/30 days)	QL	2
fluoxetine tab 10mg (PROZAC equiv) (QL= 1 tab/day)	QL	2
fluoxetine tab 20mg (PROZAC equiv) (QL= 3 tabs/day)	QL	2
FLUOXETINE TAB 60MG (QL= 1 tab/day)	QL	2
fluoxetine weekly cap (PROZAC equiv) (QL= 4 caps/28 days)	QL	2
fluvoxamine tab 100mg (LUVOX equiv) (QL= 3 tabs/day)	QL	2
fluvoxamine tab 25mg, 50mg (LUVOX equiv) (QL= 2 tabs/day)	QL	2
paroxetine ER tab 12.5mg (PAXIL CR equiv) (QL= 1 tab/day)	QL	2
paroxetine ER tab 25mg, 37.5mg (PAXIL CR equiv) (QL= 2 tabs/day)	QL	2
sertraline conc (ZOLOFT equiv)	-	2
PAXIL SUSP (QL= 15ml/day)	QL	3
PROZAC WEEKLY CAP	-	NC
SEROTONIN MODULATORS		
trazodone tab 50mg, 100mg, 150mg (DESYREL equiv)	-	1
NEFAZODONE TAB	-	2
nefazodone tab 50mg, 250mg	-	2
trazodone tab 300mg	-	2

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DrugName	Special Code	Tier
ANTIDEPRESSANTS Cont.		
TRINTELLIX TAB (QL= 1 tab/day)	PA-QL	4
VIIBRYD KIT	-	4
VIIBRYD TAB (QL= 1 tab/day)	QL	4
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
desvenlafaxine ER tab (PRISTIQ equiv) (QL= 4 tabs/day)	QL	2
duloxetine EC cap	-	2
duloxetine EC cap (CYMBALTA equiv)	-	2
venlafaxine ER cap 150mg (QL= 2 caps/day)	QL	2
venlafaxine ER cap 37.5mg (EFFEXOR XR equiv) (QL= 1 cap/day)	QL	2
venlafaxine ER cap 75mg (QL= 3 caps/day)	QL	2
venlafaxine tab (EFFEXOR equiv) (QL= 5 tabs/day)	QL	2
FETZIMA CAP (QL= 1 cap/day)	PA-QL	4
FETZIMA TITRATION PACK (QL= 1 cap/day)	PA-QL	4
DRIZALMA DR CAP	-	NC
duloxetine cap 40mg (IRENKA equiv)	-	NC
PRISTIQ TAB	-	NC
VENLAFAXINE ER TAB	-	NC
TRICYCLIC AGENTS		
amitriptyline tab (ELAVIL equiv)	-	1
nortriptyline cap (PAMELOR equiv)	-	1
AMOXAPINE TAB	-	2
clomipramine cap (ANAFRANIL equiv)	-	2
desipramine tab (NORPRAMIN equiv)	-	2
DOXEPIN CAP	-	2
doxepin cap (SINEQUAN equiv)	-	2
doxepin conc (SINEQUAN equiv)	-	2
imipramine pamoate cap (TOFRANIL PM equiv)	-	2
imipramine tab (TOFRANIL equiv)	-	2
nortriptyline oral soln (NORTRIPTYLINE equiv)	-	2
NORTRIPTYLINE SOLN	-	2
protriptyline tab (VIVACTIL equiv)	-	2
trimipramine cap (SURMONTIL equiv)	-	2
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
acarbose tab (PRECOSE equiv)	PA	2
miglitol tab (GLYSET equiv)	-	2
GLYSET TAB	-	NC
ANTIDIABETIC - AMYLIN ANALOGS		
SYMLINPEN INJ	-	3
SYMLIN INJ	M	M
ANTIDIABETIC COMBINATIONS		
glipizide/metformin tab (METAGLIP equiv)	-	2
glyburide/metformin tab (GLUCOVANCE equiv)	-	2
pioglitazone/glimepiride tab (DUETACT equiv)	-	2
pioglitazone/metformin tab (ACTOPLUS MET equiv)	-	2
GLYXAMBI TAB (QL= 1 tab/day)	QL	3
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EXC M PSP SF ST	NC =Not Covered Plan Exclusion Medical Benefit Preferred Specialty Pharmacy Limited to two 15 day fills per month for first 3 months Step Therapy	LD OTC QL SMKG VAC
	generic =small letters Limited Distribution Over-the-Counter Quantity Limit Smoking Cessation Vaccine Program	BRANDS =CAPITAL LETTERS Lumicera Preferred Specialty Pharmacy Prior Authorization Restricted to Specialist Available through Specialty Pharmacy Program RxCENTS

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
JANUMET TAB	-	3
JANUMET XR TAB	-	3
JENTADUETO TAB (QL= 2 tabs/day)	QL	3
JENTADUETO XR TAB (QL= 2 tabs/day)	QL	3
SYNJARDY TAB	-	3
SYNJARDY XR TAB 10-1000MG, 25-1000MG	-	3
SYNJARDY XR TAB 5-1000MG, 12.5-1000MG	-	3
TRIJARDY XR TAB 10-5-1000MG, 25-5-1000MG (QL= 1 tab/day)	QL	3
TRIJARDY XR TAB 5-25-1000MG, 12.5-2.5-1000MG (QL= 2 tabs/day)	QL	3
XIGDUO XR TAB 2.5-1000MG, 5-1000MG (QL= 2 tabs/day)	QL	3
XIGDUO XR TAB 5-500MG, 10-500MG, 10-1000MG (QL= 1 tab/day)	QL	3
XULTOPHY INJ (QL= 15ml/30 days)	PA-QL	3
ACTOPLUS MET XR TAB	-	4
REPAGLINIDE TAB	-	4
ALOGLIPTIN/METFORMIN TAB, KAZANO TAB	-	NC
ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB	-	NC
INVOKAMET TAB	-	NC
INVOKAMET XR TAB	-	NC
KOMBIGLYZE XR TAB	-	NC
QTERN TAB	-	NC
SEGLUROMET TAB	-	NC
SOLQUA INJ	-	NC
STEGLUJAN TAB	-	NC
BIGUANIDES		
metformin ER tab (GLUCOPHAGE XR equiv)	-	1
metformin tab (GLUCOPHAGE equiv)	-	1
metformin soln (RIOMET equiv)	-	2
RIOMET SOLN	-	3
RIOMET ER SUSP	-	4
metformin ER osmotic tab 1000mg (FORTAMET equiv)	-	NC
DIABETIC OTHER		
diazoxide susp (PROGLYCEM equiv)	-	2
BAQSIMI NASAL POWDER (QL= 2 inhalations/fill)	QL	3
GLUCAGON INJ KIT	-	3
GVOKE INJ (QL= 2 inj/fill)	QL	3
GVOKE PFS INJ (QL= 2 inj/fill)	QL	3
GLUCAGEN HYPOKIT INJ	-	4
PROGLYCEM SUSP	-	4
KORLYM TAB (Only available through Korlym SPARK program 855-4Korlym (855-456-7596))	LD-PA	5
GLUCAGON EMR INJ	-	NC
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA TAB	¢	3
TRADJENTA TAB (QL= 1 tab/day)	QL	3
ALOGLIPTIN TAB, NESINA TAB	-	NC
ONGLYZA TAB	-	NC
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		

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M	Medical Benefit	OTC	Over-the-Counter	PA	Prior Authorization
PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
CYCLOSET TAB	-	4
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON BCISE AUTO INJ	-	3
BYDUREON INJ	-	3
BYDUREON PEN INJ	-	3
OZEMPIC INJ (QL= 1 pack/28 days)	QL	3
RYBELSUS TAB (QL=1 tab/day)	QL	3
TRULICITY INJ (QL= 4 pens/28 days)	QL	3
VICTOZA INJ (QL= 9ml/30 days)	QL	3
BYETTA INJ (QL= 1 pen/30 days)	QL	4
ADLYXIN INJ	-	NC
INSULIN		
FIASP FLEXTOUCH INJ	-	3
FIASP INJ	-	3
FIASP PENFILL INJ	-	3
HUMULIN N INJ	-	3
HUMULIN N PEN INJ	-	3
HUMULIN R INJ U-500	-	3
HUMULIN R U-500 KWIKPEN INJ	-	3
INSULIN ASPART FLEXPEN INJ (NOVOLOG equiv)	-	3
INSULIN ASPART INJ (NOVOLOG equiv)	-	3
INSULIN ASPART MIX FLEXPEN INJ (NOVOLOG equiv)	-	3
INSULIN ASPART MIX INJ (NOVOLOG equiv)	-	3
INSULIN ASPART PENFILL INJ (NOVOLOG equiv)	-	3
LANTUS INJ	-	3
LANTUS SOLOSTAR INJ	-	3
NOVOLIN 70/30 FLEXPEN INJ	-	3
NOVOLIN INJ	-	3
NOVOLIN INJ 70/30	-	3
NOVOLIN N FLEXPEN INJ	-	3
NOVOLIN N RELION INJ	-	3
NOVOLIN R FLEXPEN INJ	-	3
NOVOLIN VIAL	-	3
NOVOLOG FLEXPEN INJ	-	3
NOVOLOG INJ	-	3
NOVOLOG MIX FLEXPEN INJ	-	3
NOVOLOG MIX INJ	-	3
NOVOLOG PENFILL INJ	-	3
TOUJEO MAX SOLOSTAR INJ	-	3
TOUJEO SOLOSTAR INJ	-	3
TRESIBA FLEXTOUCH INJ	-	3
TRESIBA INJ	-	3
ADMELOG INJ, INSULIN LISPRO INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
ADMELOG SOLOSTAR INJ, INSULIN LISPRO KWIKPEN INJ (JUNIOR) (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
APIDRA INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
APIDRA SOLOSTAR INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
HUMALOG INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
HUMALOG KWIKPEN INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
HUMALOG MIX INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
HUMALOG MIX KWIKPEN INJ, INSULIN LISPRO PROTAMINE INJ (Step Therapy requires trial of NOVOLOG or INSULIN ASPART)	ST	4
HUMALOG PEN INJ (Step Therapy requires trial of NOVOLOG)	ST	4
HUMULIN MIX INJ (Step Therapy requires trial of NOVOLIN)	ST	4
HUMULIN MIX PEN INJ (Step Therapy requires trial of NOVOLIN)	ST	4
HUMULIN R INJ (Step Therapy requires trial of NOVOLIN)	ST	4
LEVEMIR FLEXTOUCH INJ (Step therapy requires trial of LANTUS)	ST	4
LEVEMIR INJ (Step therapy requires trial of LANTUS)	ST	4
BASAGLAR INJ	-	NC
LYUMJEV INJ	-	NC
LYUMJEV KWIKPEN INJ	-	NC
INSULIN SENSITIZING AGENTS		
pioglitazone tab (ACTOS TAB equiv)	-	2
AVANDIA TAB	-	4
MEGLITINIDE ANALOGUES		
nateglinide tab (STARLIX equiv)	-	2
repaglinide tab (PRANDIN equiv)	-	2
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA TAB	-	3
JARDIANCE TAB	-	3
INVOKANA TAB	-	NC
STEGLATRO TAB	-	NC
SULFONYLUREAS		
glimepiride tab (AMARYL equiv)	-	1
glipizide ER tab (GLUCOTROL XL equiv)	-	1
glipizide tab (GLUCOTROL equiv)	-	1
glyburide micronized tab (GLYNASE equiv)	-	1
glyburide tab (MICRONASE equiv)	-	1
CHLORPROPAMIDE TAB	-	2
chlorpropamide tab (DIABINESE equiv)	-	2
TOLAZAMIDE TAB	-	2
TOLBUTAMIDE TAB	-	2
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIPERISTALTIC AGENTS		
DIPHENOXYLATE/ATROPINE LIQUID	-	2
LOPERAMIDE SOLN	-	NC
ANTIDIARRHEALS		
ANTIDIARRHEAL AGENTS - MISC.		
REZYST CHEW TAB	-	NC
ANTIDIARRHEAL COMBINATIONS		
EVIVO LIQUID	-	NC

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DrugName	Special Code	Tier
ANTIDIARRHEALS Cont.		
ANTIPERISTALTIC AGENTS		
diphenoxylate/atropine tab (LOMOTIL equiv)	-	2
loperamide cap (IMODIUM equiv)	-	2
opium tincture	-	2
PAREGORIC TINCTURE	-	2
MOTOFEN TAB	-	3

ANTIDOTES

ANTIDOTE COMBINATIONS AND KITS		
CYANIDE ANTIDOTE KIT	-	2
ANTIDOTES		
acetylcysteine inj	M	M
CALCIUM DISODIUM INJ	M	M
deferoxamine inj	M	M
fomepizole inj	M	M
METHYLENE BLUE INJ	M	M
PHYSOSTIGMINE SALICYLATE INJ	M	M
PRALIDOXIME INJ	M	M
SODIUM NITRITE INJ	M	M
sodium thiosulfate inj	M	M
VISTOGARD PAK	-	NC

ANTIDOTES - CHELATING AGENTS		
CA-DTPA SOLN	-	2
ZN-DTPA SOLN	-	2
CHEMET CAP	-	3
FERRIPROX SOLN (Only available through Ferriprox Total Care 866-758-7071)	LD-PA	5
FERRIPROX TAB (Only available through Ferriprox Total Care 866-758-7071)	LD-PA	5

BENZODIAZEPINE ANTAGONISTS		
flumazenil inj	M	M
OPIOID ANTAGONISTS		
naloxone inj	-	2
naltrexone tab (REVIA equiv)	-	2
NARCAN NASAL SPRAY	-	3
VIVITROL INJ	LPSP-M	M

ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES - CHELATING AGENTS		
deferasirox tab (EXJADE equiv)	LPSP-PA	5
deferasirox tab 180mg (JADENU equiv)	LPSP-PA	5
deferasirox tab 90mg, 360mg (JADENU equiv)	LPSP-PA	5
EXJADE TAB	LPSP-PA	5
JADENU SPRINKLE	LPSP-PA	5
JADENU TAB 180MG	LPSP-PA	5
JADENU TAB 90MG, 360MG	LPSP-PA	5

ANTIDOTES AND SPECIFIC ANTAGONISTS		
CETYLEV TAB	-	NC
OPIOID ANTAGONISTS		

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DrugName	Special Code	Tier
ANTIDOTES AND SPECIFIC ANTAGONISTS Cont.		
naloxone prefilled inj	-	2

ANTIEMETICS

5-HT3 RECEPTOR ANTAGONISTS

granisetron tab (KYTRIL equiv) (QL= 14 tabs/fill)	QL	2
ondansetron ODT (ZOFTRAN equiv) (QL= 15 tabs/30 days)	QL	2
ondansetron soln (ZOFTRAN equiv) (QL= 150ml/30 days)	QL	2
ONDANSETRON TAB (QL= 1 tab/30 days)	QL	2
ondansetron tab 24mg (ZOFTRAN equiv) (QL= 1 tab/30 days)	QL	2
ondansetron tab 4mg, 8mg (ZOFTRAN equiv) (QL= 15 tabs/30 days)	QL	2
ANZEMET TAB (QL= 5 tabs/30 days)	QL	3
SANCUSO (QL= 1 patch/30 days)	QL	3
GRANISOL SOLN (QL= 60ml/fill)	QL	4
ZUPLENZ SL FILM (QL= 10 films/30 days)	QL	4
ALOXI INJ	M	M
ANZEMET INJ	M	M
GRANISETRON INJ	M	M
granisetron inj (KYTRIL equiv)	M	M
ondansetron inj 40mg/20ml (ZOFTRAN equiv)	M	M
ondansetron/nacl inj	M	M
PALONOSETRON INJ	M	M
palonosetron inj (ALOXI equiv)	M	M
SUSTOL INJ	-	NC

ANTIEMETICS - ANTICHOLINERGIC

maldemar tab (SCOPACE equiv)	-	2
meclizine chew tab (BONINE equiv)	-	2
meclizine tab (ANTIVERT equiv) (Rx Only)	-	2
scopolamine patch (TRANSDERM-SCOP equiv)	-	2
trimethobenzamide cap (TIGAN equiv)	-	2
trimethobenzamide inj (TIGAN equiv)	-	2
TRANSDERM-SCOP PATCH	-	3
DIMENHYDRINATE INJ	M	M

ANTIEMETICS - MISCELLANEOUS

dronabinol cap (MARINOL equiv)	-	2
AKYNZEO CAP (QL= 1 tab/fill)	PA-QL	3
CESAMET CAP	-	4
DICLEGIS TAB	-	NC
doxylamine/pyridoxine dr tab (DICLEGIS equiv)	-	NC
SYNDROS SOLN	-	NC

SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS

aprepitant cap (EMEND equiv) (QL= 3 caps/fill)	PA-QL	2
aprepitant pak (EMEND equiv) (QL= 3 caps/fill)	PA-QL	2
fosaprepitant dimeglumine soln (EMEND equiv)	-	2
VARUBI TAB (QL= 2 tabs/day; Restricted to Oncology or Hematology Specialist)	QL-RS	3
EMEND SOLN	-	4
EMEND PAK	-	NC
EMEND SUSP	-	NC

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	Step Therapy		Vaccine Program		RxCENTS

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DrugName **Special Code** **Tier**

ANTIFUNGALS

ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)

CANCIDAS INJ	M	M
ERAXIS INJ	M	M
micafungin inj (MYCAMINE equiv)	M	M
MYCAMINE INJ	M	M

ANTIFUNGALS

flucytosine cap (ANCOBON equiv)	-	2
griseofulvin micro tab (GRIFULVIN V equiv)	-	2
griseofulvin susp (GRIFULVIN equiv)	-	2
griseofulvin tab (GRIS-PEG equiv)	-	2
nystatin powder	-	2
nystatin tab	-	2
terbinafine tab (LAMISIL equiv)	-	2
LAMISIL GRANULE	-	3
TERBINEX KIT	-	4
ABELCET INJ	M	M
AMBISOME INJ	M	M
AMPHOTEC INJ	M	M
AMPHOTERICIN INJ	M	M

IMIDAZOLE-RELATED ANTIFUNGALS

fluconazole susp (DIFLUCAN equiv)	-	2
fluconazole tab (DIFLUCAN equiv)	-	2
fluconazole tab 150mg (DIFLUCAN equiv)	-	2
itraconazole cap (SPORANOX equiv)	-	2
ketoconazole tab (NIZORAL equiv)	-	2
posaconazole DR tab (NOXAFIL equiv)	-	2
voriconazole susp (VFEND equiv)	PA	2
voriconazole tab (VFEND equiv)	PA	2
itraconazole soln (SPORANOX equiv)	-	3
NOXAFIL SUSP	-	3
NOXAFIL TAB	-	3
SPORANOX SOLN	-	3
fluconazole/nacl inj	M	M
voriconazole inj	M	M
CRESEMBA CAP	-	NC
TOLSURA CAP	-	NC

ANTIHISTAMINES

ANTIHISTAMINES - ALKYLAMINES

chlorpheniramine ER cap	-	2
RESPA-BR TAB	-	2
RYCLORA SYRUP, DEXCHLORPHENIRAMINE SYRUP	-	2
brompheniramine soln	-	3
MICLARA LIQUID	-	NC

ANTIHISTAMINES - ETHANOLAMINES

CARBINOXAMINE SOLN	-	2
carbinoxamine soln (PALGIC equiv)	-	2

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ANTIHISTAMINES Cont.					
CARBINOXAMINE TAB	-	2			
carbinoxamine tab (PALGIC equiv)	-	2			
CLEMASTINE SYRUP	-	2			
CLEMASTINE TAB	-	2			
clemastine tab (TAVIST equiv)	-	2			
diphenhydramine cap 50mg (BENADRYL equiv) (Only 50mg covered)	-	2			
diphenhydramine elixer (BENADRYL equiv)	-	2			
diphenhydramine inj (BENADRYL equiv)	-	2			
SILPHEN COUGH SYRUP	-	2			
KARBINAL ER SUSP	-	NC			
RYVENT TAB	-	NC			
ANTIHISTAMINES - NON-SEDATING					
cetirizine tab (ZYRTEC equiv)	-	1			
CLARITIN CHEW TAB	-	1			
loratadine chew tab (CLARITIN equiv)	-	1			
loratadine tab (CLARITIN equiv)	-	1			
cetirizine syrup (ZYRTEC equiv)	-	2			
DESLORATADINE ODT	-	2			
desloratadine tab (CLARINEX equiv)	-	2			
fexofenadine tab (ALLEGRA equiv)	-	2			
levocetirizine soln (XYZAL equiv)	-	2			
levocetirizine tab (XYZAL equiv)	-	2			
loratadine cap (CLARITIN equiv)	OTC	2			
loratadine syrup (CLARITIN equiv)	-	2			
CLARINEX SYRUP	-	3			
ALLEGRA ODT	OTC	NC			
CLARITIN CAP	OTC	NC			
CLARITIN REDITAB	-	NC			
loratadine ODT (CLARITIN equiv)	-	NC			
ANTIHISTAMINES - PHENOTHIAZINES					
promethazine supp (PHENERGAN equiv)	-	2			
promethazine syrup	-	2			
promethazine tab (PHENERGAN equiv)	-	2			
PROMETHEGAN SUPP	-	2			
promethazine inj (PHENERGAN equiv)	M	M			
ANTIHISTAMINES - PIPERIDINES					
cyproheptadine syrup	-	2			
cyproheptadine tab	-	2			
ANTIHYPERLIPIDEMICS					
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS					
NEXLETOL TAB	-	NC			
ANTIHYPERLIPIDEMICS - COMBINATIONS					
ezetimibe/simvastatin tab (VYTORIN equiv) (QL= 1 tab/day (10-80mg is Not Covered))	-	2			
ezetimibe/simvastatin tab 10-80mg (VYTORIN equiv)	-	NC			
NEXLIZET TAB	-	NC			
OMEGA-3 RX PAK COMPLETE	-	NC			
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EXC M PSP SF ST	NC =Not Covered Plan Exclusion Medical Benefit Preferred Specialty Pharmacy Limited to two 15 day fills per month for first 3 months Step Therapy	LD OTC QL SMKG VAC	generic =small letters Limited Distribution Over-the-Counter Quantity Limit Smoking Cessation Vaccine Program	LPSP PA RS SP ¢	BRANDS =CAPITAL LETTERS Lumicera Preferred Specialty Pharmacy Prior Authorization Restricted to Specialist Available through Specialty Pharmacy Program RxCENTS

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DrugName	Special Code	Tier
ANTIHYPERLIPIDEMICS Cont.		
VYTORIN TAB 10-80MG	-	NC
ANTIHYPERLIPIDEMICS - MISC.		
omega-3-acid ethyl esters cap (LOVAZA equiv)	-	2
VASCEPA CAP	-	3
BILE ACID SEQUESTRANTS		
cholestyramine lite powder (QUESTRAN LITE equiv)	-	2
cholestyramine lite powder pack (QUESTRAN LITE equiv)	-	2
colesevelam pack (WELCHOL equiv)	-	2
colesevelam tab (WELCHOL equiv)	-	2
colestipol granule (COLESTID equiv)	-	2
colestipol powder packet (COLESTID equiv)	-	2
colestipol tab (COLESTID equiv)	-	2
WELCHOL TAB	-	2
FIBRIC ACID DERIVATIVES		
fenofibrate cap 67mg, 134mg, 200mg (LOFIBRA equiv)	-	1
fenofibrate tab 48mg, 54mg, 145mg, 160mg (TRICOR equiv)	-	1
FENOFIBRATE CAP, LIPOFEN CAP 50MG, 150MG	-	2
fenofibric acid DR cap (TRILIPIX equiv)	-	2
FENOFIBRIC TAB 105MG	-	2
FENOFIBRIC TAB 35MG	-	2
gemfibrozil tab (LOPID equiv)	-	2
ANTARA CAP	-	4
FIBRICOR TAB	-	4
TRIGLIDE TAB	-	4
fenofibrate cap 43mg, 130mg (ANTARA equiv)	-	NC
fenofibrate tab 40mg, 120mg (FENOGLIDE equiv)	-	NC
TRICOR TAB	-	NC
HMG COA REDUCTASE INHIBITORS		
atorvastatin tab 10mg (LIPITOR equiv)	-	1
atorvastatin tab 20mg (LIPITOR equiv)	-	1
atorvastatin tab 40mg (LIPITOR equiv)	-	1
atorvastatin tab 80mg (LIPITOR equiv)	-	1
lovastatin tab (MEVACOR equiv)	-	1
pravastatin tab (PRAVACHOL equiv)	-	1
rosuvastatin tab 10mg (CRESTOR equiv)	-	1
rosuvastatin tab 20mg (CRESTOR equiv)	-	1
rosuvastatin tab 40mg (CRESTOR equiv)	-	1
rosuvastatin tab 5mg (CRESTOR equiv)	-	1
simvastatin tab (ZOCOR equiv)	-	1
fluvastatin cap (LESCOL equiv)	-	2
ALTOPREV TAB	-	4
LIVALO TAB (Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	ST	4
CRESTOR TAB	-	NC
EZALLOR SPRINKLE CAP	-	NC
FLOLIPID SUSP	-	NC
fluvastatin ER tab (LESCOL XL equiv)	-	NC

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ANTIHYPERTENSIVES Cont.		
LESCOL XL TAB	-	NC
SIMCOR TAB	-	NC
SIMVASTATIN SUSP	-	NC
simvastatin tab 80mg (ZOCOR equiv) (This strength excluded from coverage)	-	NC
ZYPITAMAG TAB	-	NC
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
ezetimibe tab (ZETIA equiv)	-	2
NICOTINIC ACID DERIVATIVES		
NIACOR TAB	-	1
niacin ER tab (NIASPAN equiv)	-	2
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT INJ (QL= 2 inj/28 days)	PA-QL	3
REPATHA INJ (QL= 2 inj/28 days)	PA-QL	3
REPATHA PUSHTRONEX INJ (QL= 1 inj/28 days)	PA-QL	3
ANTIHYPERTENSIVES		
ACE INHIBITORS		
benazepril tab (LOTENSIN equiv)	-	1
captopril tab (CAPOTEN equiv)	-	1
enalapril tab (VASOTEC equiv)	-	1
lisinopril tab (PRINIVIL/ZESTRIL equiv)	-	1
fosinopril tab (MONOPRIL equiv)	-	2
moexipril tab (UNIVASC equiv)	-	2
perindopril tab (ACEON equiv)	-	2
quinapril tab (ACCUPRIL equiv)	-	2
ramipril cap (ALTACE equiv)	-	2
trandolapril tab (MAVIK equiv)	-	2
EPANED PREMIXED SOLN	PA	4
EPANED SOLN	PA	4
QBRELIS SOLN	PA	4
enalaprilat inj	M	M
AGENTS FOR PHEOCHROMOCYTOMA		
phenoxybenzamine cap (DIBENZYLIN equiv)	PA	5
phentolamine mesylate inj	M	M
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
irbesartan tab (AVAPRO equiv)	-	1
losartan tab (COZAAR equiv)	-	1
valsartan tab 160mg (DIOVAN equiv)	-	1
valsartan tab 40mg (DIOVAN equiv)	-	1
valsartan tab 80mg (DIOVAN equiv)	-	1
candesartan tab (ATACAND equiv)	-	2
olmesartan tab (BENICAR equiv)	-	2
telmisartan tab (MICARDIS equiv)	-	2
valsartan tab 320mg (DIOVAN equiv)	-	2
EDARBI TAB (Step Therapy requires trial of telmisartan, irbesartan, candesartan, losartan or valsartan)	ST	4
BENICAR TAB	-	NC

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DrugName	Special Code	Tier
ANTIADRENERGIC ANTIHYPERTENSIVES		
clonidine tab (CATAPRES equiv)	-	1
doxazosin tab (CARDURA equiv)	-	1
GUANABENZ TAB	-	1
guanfacine IR tab (TENEX equiv)	-	1
methyldopa tab (ALDOMET equiv)	-	1
terazosin cap (HYTRIN equiv)	-	1
clonidine patch (CATAPRES-TTS equiv)	-	2
prazosin cap (MINIPRESS equiv)	-	2
RESERPINE TAB	-	2
METHYLDOPATE INJ	M	M
CATAPRES-TTS PATCH	-	NC
ANTIHYPERTENSIVE COMBINATIONS		
atenolol/chlorthalidone tab (TENORETIC equiv)	-	1
bisoprolol/hydrochlorothiazide tab (ZIAC equiv)	-	1
CAPTOPRIL/HYDROCHLOROTHIAZIDE TAB	-	1
enalapril/hydrochlorothiazide tab (VASERETIC equiv)	-	1
irbesartan/hydrochlorothiazide tab (AVALIDE equiv)	-	1
lisinopril/hydrochlorothiazide tab (ZESTORETIC equiv)	-	1
losartan/hydrochlorothiazide tab (HYZAAR equiv)	-	1
amlodipine/benazepril cap (LOTREL equiv)	-	2
amlodipine/valsartan tab (EXFORGE equiv)	¢	2
amlodipine/valsartan/hydrochlorothiazide tab (EXFORGE HCT equiv)	-	2
benazepril/hydrochlorothiazide tab (LOTENSIN HCT equiv)	-	2
candesartan/hydrochlorothiazide tab (ATACAND HCT equiv)	-	2
fosinopril/hydrochlorothiazide tab (MONOPRIL HCT equiv)	-	2
METHYLDOPA/HYDROCHLOROTHIAZIDE TAB	-	2
METOPROLOL/HYDROCHLOROTHIAZIDE TAB	-	2
metoprolol/hydrochlorothiazide tab (LOPRESSOR HCT equiv)	-	2
MOEXIPRIL/HYDROCHLOROTHIAZIDE TAB	-	2
moexipril/hydrochlorothiazide tab (UNIRETIC equiv)	-	2
nadolol/bendroflumethiazide tab (CORZIDE equiv)	-	2
NADOLOL/BENDROFLUMETHIAZINE TAB 40-5MG	-	2
olmesartan/hydrochlorothiazide tab (BENICAR HCT equiv)	-	2
PROPRANOLOL/HYDROCHLOROTHIAZIDE TAB	-	2
quinapril/hydrochlorothiazide tab (ACCURETIC equiv)	-	2
TARKA TAB	-	2
telmisartan/hydrochlorothiazide tab (MICARDIS HCT equiv)	-	2
trandolapril/verapamil ER tab (TARKA equiv)	-	2
valsartan/hydrochlorothiazide tab (DIOVAN HCT equiv)	-	2
AMTURNIDE TAB	-	3
TEKAMLO TAB	-	3
CORZIDE TAB 80-5MG	-	4
EDARBYCLOR TAB (Step Therapy requires trial of telmisartan/hct, irbesartan/hct, candesartan/hct, losartan/hct or valsartan/hct)	ST	4
TEKURNA HCT TAB	-	4

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ANTIHYPERTENSIVES Cont.		
VALTURNA TAB	-	4
amlodipine/olmesartan tab (AZOR TAB equiv)	-	NC
AZOR TAB	-	NC
BENICAR HCT TAB	-	NC
BYVALSON TAB	-	NC
DUTOPROL TAB	-	NC
olmesartan/amlodipine/hydrochlorothiazide tab (TRIBENZOR TAB equiv)	-	NC
PRESTALIA TAB	-	NC
telmisartan/amlodipine tab (TWYNSTA equiv)	-	NC
TRIBENZOR TAB	-	NC
ANTIHYPERTENSIVES - MISC.		
VECAMYL TAB	-	NC
DIRECT RENIN INHIBITORS		
aliskiren tab (TEKTURNA equiv)	¢	2
TEKTURNA TAB	-	4
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone tab (INSPRA equiv)	-	2
VASODILATORS		
hydralazine tab (APRESOLINE equiv)	-	2
minoxidil tab (LONITEN equiv)	-	2
fenoldopam inj (CORLOPAM equiv)	M	M
hydralazine inj	M	M
CORLOPAM INJ	-	NC
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
metronidazole cap (FLAGYL equiv)	-	2
metronidazole tab (FLAGYL equiv)	-	2
pentamidine neb soln (NEBUPENT equiv)	-	2
tinidazole tab (TINDAMAX equiv)	-	2
trimethoprim tab (PROLOPRIM equiv)	-	2
NEBUPENT NEB SOLN	-	3
FIRST METRONIDAZOLE SUSP	-	4
FLAGYL ER TAB	-	4
PRIMSOL SOLN	-	4
XIFAXAN TAB 200MG (QL= 9 tabs/3 days)	QL	4
XIFAXAN TAB 550MG (QL= 2 tabs/day; Quantities up to 3 tabs/day for the treatment of IBS-D allowed via PA)	PA-QL	4
bacitracin inj	M	M
metronidazole/nacl inj	M	M
AEMCOLO TAB	-	NC
IMPAVIDO CAP	-	NC
ANTI-INFECTIVE MISC. - COMBINATIONS		
erythromycin/sulfisoxazole susp (PEDIAZOLE equiv)	-	2
smz/tmp (DS) tab (BACTRIM DS equiv)	-	2
smz/tmp susp (BACTRIM, SEPTRA equiv)	-	2
smz-tmp inj (SMZ-TMP INJ equiv)	M	M

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ANTI-INFECTIVE AGENTS - MISC. Cont.		
ANTIPROTOZOAL AGENTS		
atovaquone susp (MEPRON equiv)	-	2
ALINIA SUSP (QL= 60ml/3 days)	PA-QL	3
ALINIA TAB (QL= 6 tabs/3 days)	PA-QL	3
CARBAPENEMS		
DORIBAX INJ	M	M
DORIPENEM INJ	M	M
ertapenem inj (INVANZ equiv)	M	M
imipenem/cilastatin inj	M	M
INVANZ INJ	M	M
meropenem inj	M	M
PRIMAXIN IM INJ	M	M
CHLORAMPHENICOLS		
chloramphenicol inj	M	M
CYCLIC LIPOPEPTIDES		
daptomycin inj (CUBICIN equiv)	-	2
CUBICIN INJ	-	NC
GLYCOPEPTIDES		
FIRST-VANCOMYCIN SOLN	-	2
FIRVANQ SOLN	-	2
vancomycin cap (VANCOCIN equiv)	-	2
vancomycin inj	M	M
VANCOMYCIN/DEXTROSE INJ	M	M
VIBATIV INJ	M	M
VANCOCIN CAP	-	NC
VANCOMYCIN INJ	-	NC
VANCOMYCIN SOLN	-	NC
KETOLIDES		
KETEK TAB	-	4
LEPROSTATICS		
dapsone tab	-	2
LINCOSAMIDES		
clindamycin cap (CLEOCIN equiv)	-	2
clindamycin soln (CLEOCIN equiv)	-	2
clindamycin inj	M	M
lincomycin inj (LINCOCIN equiv)	M	M
CLEOCIN CAP	-	NC
MONOBACTAMS		
CAYSTON INH SOLN (Only available through Walgreens 888-347-3416)	LD-PA	5
AZACTAM/DEX INJ	M	M
aztreonam inj	M	M
OXAZOLIDINONES		
linezolid soln (ZYVOX equiv)	-	2
linezolid susp (ZYVOX equiv) (QL= 600ml/28 days)	PA-QL	2
linezolid tab (ZYVOX equiv) (QL= 28 tabs/30 days)	PA-QL	2

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ANTI-INFECTIVE AGENTS - MISC. Cont.		
SIVEXTRO TAB (QL= 6 tabs/fill)	PA-QL	4
ZYVOX SUSP	-	NC
PLEUROMUTILINS		
XENLETA TAB	-	NC
POLYMYXINS		
colistimethate inj (COLY-MYCIN M equiv)	LPSP-M	M
polymyxin b inj	M	M
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone/proguanil tab (MALARONE equiv)	-	2
COARTEM TAB	-	3
PYRIMETHAMINE/LEUCOVORIN CAP	-	NC
ANTIMALARIALS		
CHLOROQUINE TAB	-	2
chloroquine tab (ARALEN equiv)	-	2
hydroxychloroquine tab (PLAQUENIL equiv)	-	2
mefloquine tab (LARIAM equiv)	-	2
PRIMAQUINE TAB	-	2
primaquine tab (PRIMAQUINE equiv)	-	2
quinine sulfate cap	-	2
KRINTAFEL TAB	-	3
MEFLOQUINE TAB	-	3
DARAPRIM TAB (QL= 3 tabs/day; Only available through Walgreens 888-347-3416)	LD-PA-QL	5
pyrimethamine tab (DARAPRIM equiv) (QL= 3 tabs/day; Only available through Walgreens 888-347-3416)	LD-PA-QL	5
ARAKODA TAB	-	NC
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
GUANIDINE TAB	-	1
pyridostigmine CR tab (MESTINON equiv)	-	2
pyridostigmine tab (MESTINON equiv)	-	2
pyridostigmine soln (MESTINON equiv)	-	2
PROSTIGMIN TAB	-	3
MYTELASE TAB	-	4
neostigmine methylsulfate inj	M	M
REGONOL INJ	M	M
FIRDAPSE TAB	-	NC
PYRIDOSTIGMINE TAB 30MG	-	NC
RUZURGI TAB	-	NC
ANTIMYCOBACTERIAL AGENTS		
ANTI TB COMBINATIONS		
RIFAMATE CAP	-	4
RIFATER TAB	-	4
ANTIMYCOBACTERIAL AGENTS		
cycloserine cap (CYCLOSERINE equiv)	-	2
ethambutol tab (MYAMBUTOL equiv)	-	2

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ANTIMYCOBACTERIAL AGENTS Cont.		
ISONIAZID SYRUP	-	2
ISONIAZID TAB	-	2
pyrazinamide tab	-	2
rifabutin cap (MYCOBUTIN equiv)	-	2
rifampin cap (RIFADIN equiv)	-	2
PRIFTIN TAB	-	3
PASER GRANULE	-	4
TRECTOR TAB	-	4
SIRTURO TAB (Restricted to Infectious Disease Specialist)	PSP-RS	5
CAPASTAT SULFATE INJ	M	M
ISONIAZID INJ	M	M
rifampin inj	M	M
PRETOMANID TAB	-	NC
ANTINEOPLASTICS		
ALKYLATING AGENTS		
cyclophosphamide tab (CYTOXAN equiv)	PA	2
HEXALEN CAP	SP	5
LEUKERAN TAB	SP	5
MYLERAN TAB	LPSP-PA	5
ANTIMETABOLITES		
mercaptapurine tab (PURINETHOL equiv)	-	2
methotrexate tab (TREXALL equiv)	-	2
TREXALL TAB	-	3
TABLOID TAB	SP	5
ANTINEOPLASTIC ENZYME INHIBITORS		
IRESSA TAB (Only available through Lumicera Pharmacy 855-847-3553)	LD-PA	5
NEXAVAR TAB	PA-PSP-SF	5
SPRYCEL TAB	LPSP-PA-SF	5
SUTENT CAP	PA-PSP-SF	5
TYKERB TAB	LPSP-PA	5
VOTRIENT TAB	LPSP-PA-SF	5
ZOLINZA CAP	LPSP-PA-SF	5
ANTINEOPLASTICS MISC.		
hydroxyurea cap (HYDREA equiv)	-	2
ACTIMMUNE INJ (Only available through Walgreens 888-347-3416)	LD-PA	5
ALFERON-N INJ	LPSP-PA	5
INTRON-A INJ	PA-PSP	5
MATULANE CAP	PA-SP	5
tretinoin cap (VESANOID equiv)	LPSP-PA	5
PROLEUKIN INJ	-	NC
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
leucovorin tab	-	2
MESNEX TAB	LPSP	5
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP	LPSP-PA	5

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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
melphalan tab (ALKERAN equiv)	-	2
GLIADEL WAFER	-	3
ALKERAN TAB	-	4
GLEOSTINE/LOMUSTINE CAP	LPSP	5
temozolomide cap (TEMODAR equiv)	LPSP-PA	5
BICNU INJ	M	M
busulfan inj	M	M
BUSULFEX INJ	M	M
carboplatin inj	M	M
carmustine inj (BICNU equiv)	M	M
cisplatin inj	M	M
cyclophosphamide inj	M	M
IFEX INJ	M	M
ifosfamide inj	M	M
melphalan inj	M	M
MUSTARGEN INJ	M	M
oxaplatin inj	M	M
TEMODAR INJ	M	M
TEPADINA INJ	M	M
THIOTEPA INJ	M	M
TREANDA INJ	M	M
ZANOSAR INJ	M	M
BUSULFEX INJ	-	NC
CYCLOPHOSPHAMIDE CAP	-	NC
ANTIMETABOLITES		
METHOTREXATE INJ	-	2
capecitabine tab (XELODA equiv)	LPSP-PA	5
adrucil inj	M	M
ALIMTA INJ	M	M
ARRANON INJ	M	M
azactidine inj	M	M
cladribine inj	M	M
clofarabine inj (CLOLAR equiv)	M	M
CLOLAR INJ	M	M
cytarabine inj	M	M
decitabine inj	M	M
DEPOCYT INJ	M	M
floxuridine inj	M	M
fludarabine inj	M	M
FOLOTYN INJ	M	M
gemcitabine inj	M	M
XATMEP SOLN	-	NC
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
AVASTIN INJ	M	M
ZALTRAP INJ	M	M

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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ANTINEOPLASTIC - ANTIBODIES		
ADCETRIS INJ	M	M
ARZERRA INJ	M	M
BEXXAR INJ	M	M
CAMPATH INJ	M	M
ERBITUX INJ	M	M
HERCEPTIN INJ	M	M
KADCYLA INJ	M	M
PERJETA INJ	M	M
RITUXAN INJ	M	M
VECTIBIX INJ	M	M
YERVOY INJ	M	M
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA STARTER PACK	-	NC
VENCLEXTA TAB	-	NC
ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY		
PROVENGE INJ	M	M
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
ERIVEDGE CAP	PA-PSP-SF	5
ODOMZO CAP	LPSP-PA	5
DAURISMO TAB	-	NC
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
anastrozole tab (ARIMIDEX equiv)	-	2
bicalutamide tab (CASODEX equiv)	-	2
exemestane tab (AROMASIN equiv)	-	2
flutamide cap (EULEXIN equiv)	-	2
letrozole tab (FEMARA equiv) (QL= 1 tab/day)	QL	2
megestrol susp (MEGACE equiv)	-	2
megestrol tab (MEGACE equiv)	-	2
toremifene tab (FARESTON equiv)	-	2
FARESTON TAB	-	3
SOLTAMOX SOLN	-	3
abiraterone tab 250mg (ZYTIGA equiv) (QL= 4 tabs/day)	LPSP-QL	5
EMCYT CAP	SP	5
ERLEADA TAB (QL= 4 tabs/day)	LPSP-PA-QL	5
LUPRON DEPOT INJ	LPSP	5
LYSODREN TAB (Only available through Direct Success 732-919-1234)	LD	5
nilutamide tab (NILANDRON equiv)	LPSP	5
NUBEQA TAB (QL= 4 tabs/day)	LPSP-PA-QL-SF	5
VANTAS KIT	PA-SP	5
XTANDI CAP	PA-PSP-SF	5
ZOLADEX IMPLANT	PA-SP	5
ZYTIGA TAB 250MG (QL= 4 tabs/day)	LPSP-PA-QL-SF	5
ZYTIGA TAB 500MG (QL= 2 tabs/day)	LPSP-PA-QL-SF	5
tamoxifen tab (NOLVADEX equiv) (Covered at \$0 for women 35 years or older; All other members covered at generic copay)	-	6

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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
DEPO-PROVERA INJ 400/ML	M	M
FASLODEX INJ	M	M
FIRMAGON INJ	M	M
fulvestrant inj (FASLODEX equiv)	M	M
HYDROXYPROGESTERONE CAPROATE INJ	-	NC
YONSA TAB	-	NC
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP	-	3
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK	-	NC
ANTINEOPLASTIC ANTIBIOTICS		
bleomycin inj	M	M
dactinomycin inj	M	M
DAUNORUBICIN INJ	M	M
DAUNOXOME INJ	M	M
DOXORUBICIN INJ	M	M
epirubicin inj	M	M
idarubicin inj	M	M
mitomycin inj	M	M
mitoxantron inj	M	M
valrubicin soln (VALSTAR equiv)	M	M
VALSTAR SOLN	M	M
ANTINEOPLASTIC COMBINATIONS		
KISQALI PAK (QL= 91 tabs/28 days)	LPSP-PA-QL	5
LONSURF TAB (Only available through Walgreens 888-347-3416)	LD-PA	5
IFOSFAMIDE/MESNA KIT	M	M
HERCEPTIN HYLECTA INJ	-	NC
ANTINEOPLASTIC ENZYME INHIBITORS		
AFINITOR DISPERZ	LPSP-PA-SF	5
AFINITOR TAB 10MG	LPSP-PA-SF	5
AFINITOR TAB 2.5MG, 5MG, 7.5MG	LPSP-PA-SF	5
ALECENSA CAP	LPSP-PA	5
ALUNBRIG TAB 30MG (QL= 4 tabs/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5
ALUNBRIG TAB 90MG, 180MG (QL= 1 tab/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5
BALVERSA TAB 3MG (QL= 3 tabs/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
BALVERSA TAB 4MG (QL= 2 tabs/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
BALVERSA TAB 5MG (QL= 1 tab/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
BOSULIF TAB	PA-PSP-SF	5
BRUKINSA CAP (QL= 4 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5
CABOMETYX TAB (QL= 1 tab/day)	PA-PSP-QL-SF	5
CALQUENCE CAP (QL= 2 caps/day; Only available through Lumicera Pharmacy 855-847-3553)	LD-PA-QL-SF	5
CAPRELSA TAB (Only available through Biologics 800-850-4306)	LD-PA	5
COMETRIQ KIT (Only available through Diplomat Pharmacy 877-977-9118)	LD-PA	5
COPIKTRA CAP (QL= 2 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5
COTELLIC TAB (QL= 3 tabs/day)	PA-PSP-QL	5
erlotinib tab (TARCEVA equiv)	LPSP-PA-SF	5

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SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
everolimus tab (AFINITOR equiv)	LPSP-PA-SF	5
FARYDAK CAP (QL= 6 caps/21 days)	PA-PSP-QL	5
GILOTRIF TAB (QL= 1 tab/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
IBRANCE CAP (QL= 21 caps/28 days)	PA-PSP-QL	5
IBRANCE TAB (QL= 1 tabs/day)	PA-PSP-QL	5
ICLUSIG TAB (Only available through AcariaHealth 800-511-5144)	LD-PA-SF	5
imatinib tab (GLEEVEC equiv)	LPSP	5
IMBRUVICA CAP 140MG (QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5
IMBRUVICA CAP 70MG (QL= 1 cap/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5
IMBRUVICA TAB (QL= 1 tab/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5
INLYTA TAB	PA-PSP-SF	5
JAKAFI TAB	PA-PSP	5
KISQALI TAB (QL= 63 tabs/28 days)	LPSP-PA-QL	5
LENVIMA CAP (QL= 3 caps/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
LORBRENA TAB 100MG (QL= 1 tab/day)	PA-PSP-QL-SF	5
LORBRENA TAB 25MG (QL= 3 tabs/day)	PA-PSP-QL-SF	5
LYNPARZA CAP (QL= 16 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL	5
LYNPARZA TAB (QL= 4 tabs/day; Only available through Biologics 800-850-4306)	LD-PA-QL	5
MEKINIST TAB 0.5MG	LPSP-PA	5
MEKINIST TAB 2MG	LPSP-PA	5
NERLYNX TAB (QL=6 tabs/day)	LD-PA-QL-SF	5
NINLARO CAP	PA-PSP	5
PIQRAY TAB	LPSP-PA-SF	5
ROZLYTREK CAP (QL= 3 caps/day)	PA-PSP-QL-SF	5
RUBRACA TAB (QL= 4 tabs/day; Only available through Avella Pharmacy (877) 546-5779)	LD-PA-QL-SF	5
RYDAPT CAP	LPSP-PA	5
STIVARGA TAB	PA-PSP-SF	5
TAFINLAR CAP	LPSP-PA	5
TALZENNA CAP 0.25MG (QL= 3 caps/day)	PA-PSP-QL-SF	5
TALZENNA CAP 1MG (QL= 1 cap/day)	PA-PSP-QL-SF	5
TARCEVA TAB	LPSP-PA-SF	5
TASIGNA CAP	LPSP-PA-SF	5
temsirolimus soln (TORISEL equiv)	PA-SP	5
TIBSOVO TAB (QL= 2 tabs/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL	5
TORISEL SOLN	PA-SP	5
TURALIO CAP (QL= 4 caps/day; Only available through Biologics 800-850-4306)	LD-PA-QL-SF	5
VERZENIO TAB (QL=2 tabs/day)	LPSP-PA-QL-SF	5
VITRAKVI CAP 100MG (QL= 2 caps/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
VITRAKVI CAP 25MG (QL= 6 caps/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
VITRAKVI SOLN (QL= 10ml/day; Only available through US Bioservices 888-518-7246)	LD-PA-QL-SF	5
VIZIMPRO TAB (QL= 1 tab/day)	PA-PSP-QL-SF	5
XALKORI CAP (QL= 2 caps/day)	PA-PSP-QL-SF	5
XOSPATA TAB (QL= 3 tabs/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL-SF	5
ZEJULA CAP (QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-QL-SF	5
ZELBORAF TAB	PA-PSP	5
ZYDELIG TAB (Only available through Diplomat Pharmacy 877-977-9118)	LD-PA-SF	5
ZYKADIA CAP (QL= 5 caps/day)	LPSP-PA-QL-SF	5

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ZYKADIA TAB (QL= 3 tabs/day)	LPSP-PA-QL-SF	5
ISTODAX INJ	M	M
ISTODAX OVR INJ	M	M
KYPROLIS INJ	M	M
VELCADE INJ	M	M
ALUNBRIG PAK	-	NC
AYVAKIT TAB	-	NC
BRAFTOVI CAP 75MG	-	NC
GLEEVEC TAB	-	NC
IDHIFA TAB	-	NC
INREBIC CAP	-	NC
KOSELUGO CAP	-	NC
MEKTOVI TAB	-	NC
PEMAZYRE TAB	-	NC
QINLOCK TAB	-	NC
RETEVMO CAP	-	NC
TABRECTA TAB	-	NC
TAGRISSO TAB	-	NC
TAZVERIK TAB	-	NC
TUKYSA TAB	-	NC
ANTINEOPLASTIC ENZYMES		
ELSPAR INJ	M	M
ERWINAZE INJ	M	M
ONCASPAR INJ	M	M
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
QUADRAMET INJ	M	M
ANTINEOPLASTICS MISC.		
bexarotene cap (TARGRETIN equiv)	LPSP-PA-SF	5
SYLATRON INJ	PA-PSP	5
arsenic trio inj 10/10ml (TRISENOX equiv)	M	M
dacarbazine inj (DACARBAZINE equiv)	M	M
ONTAK INJ	M	M
pentostatin inj (NIPENT equiv)	M	M
PHOTOFRIN INJ	M	M
SYNRIBO INJ	M	M
TICE BCG INJ	M	M
TRISENOX INJ	M	M
TRISENOX SOLN	M	M
UVADEX INJ	M	M
TARGRETIN CAP	-	NC
CHEMOTHERAPY ADJUNCTS		
ELITEK INJ	M	M
KEPIVANCE INJ	M	M
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
amifostine inj	M	M
CALCIUM FOLINATE INJ	M	M

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ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
dexrazoxane inj (TOTECT equiv)	M	M
leucovorin calcium inj	M	M
LEUCOVORIN INJ	M	M
levoleucovorin inj (FUSILEV equiv)	M	M
mesna inj (MESNEX equiv)	M	M
TOTECT INJ	M	M
VORAXAZE INJ	M	M
FUSILEV INJ	-	NC
MITOTIC INHIBITORS		
ETOPOSIDE CAP	LPSP-PA	2
ABRAXANE INJ	M	M
DOCEFREZ INJ	M	M
DOCETAXEL INJ	M	M
ETOPOPHOS INJ	M	M
HALAVEN INJ	M	M
IXEMPRA KIT	M	M
JEVTANA INJ	M	M
paclitaxel inj	M	M
toposar inj	M	M
VINBLASTINE INJ	M	M
vincasar pfs inj	M	M
VINCRISTINE INJ	M	M
vinorelbine inj	M	M
VUMON INJ	M	M
TOPOISOMERASE I INHIBITORS		
irinotecan inj (CAMPTOSAR equiv)	M	M
topotecan inj (HYCANTIN equiv)	M	M
ANTIPARKINSON AGENTS		
ANTIPARKINSON ADJUVANTS		
carbidopa tab (LODOSYN equiv)	-	2
ANTIPARKINSON ANTICHOLINERGICS		
benztropine tab	-	1
trihexyphenidyl tab (ARTANE equiv)	-	2
benztropine inj	M	M
ANTIPARKINSON COMT INHIBITORS		
entacapone tab (COMTAN equiv)	-	2
tolcapone tab (TASMAR equiv)	-	2
ANTIPARKINSON DOPAMINERGICS		
amantadine cap (SYMMETREL equiv)	-	2
amantadine syrup (SYMMETREL equiv)	-	2
amantadine tab	-	2
bromocriptine cap (PARLODEL equiv)	-	2
bromocriptine tab (PARLODEL equiv)	-	2
carbidopa/levodopa ER tab (SINEMET CR equiv)	-	2
carbidopa/levodopa ODT (PARCOPA equiv)	-	2

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ANTIPARKINSON AGENTS Cont.		
carbidopa/levodopa tab (SINEMET equiv)	-	2
CARBIDOPA/LEVODOPA/ENTACAPONE TAB (STALEVO equiv)	-	2
pramipexole ER tab (MIRAPEX ER equiv)	-	2
pramipexole tab (MIRAPEX equiv)	-	2
ropinirole ER tab (REQUIP XL equiv)	-	2
ropinirole tab (REQUIP equiv)	-	2
NEUPRO PATCH	-	4
APOKYN INJ (Only available through CVS Specialty 800-237-2767)	LD-PA	5
DUOPA ENTERAL SUSP	-	NC
GOCOVRI CAP	-	NC
RYTARY CAP	-	NC
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
rasagiline tab (AZILECT equiv)	¢	2
selegiline cap (ELDEPRYL equiv)	-	2
selegiline tab (ELDEPRYL equiv)	-	2
AZILECT TAB	-	NC
XADAGO TAB	-	NC
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ADJUVANTS		
NOURIANZ TAB	-	NC
ANTIPARKINSON ANTICHOLINERGICS		
trihexyphenidyl elixir (ARTANE equiv)	-	2
ANTIPARKINSON DOPAMINERGICS		
INBRIJA INH POWDER	-	NC
KYNMOBI FILM	-	NC
KYNMOBI TITRATION KIT	-	NC
OSMOLEX ER TAB	-	NC
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
LITHIUM CARBONATE CAP	-	2
lithium carbonate cap (ESKALITH equiv)	-	2
lithium carbonate ER tab (LITHOBID equiv)	-	2
lithium carbonate tab	-	2
lithium citrate soln	-	2
LITHOBID TAB	-	4
ANTIPSYCHOTICS - MISC.		
ziprasidone cap (GEODON equiv) (QL= 2 caps/day)	QL	2
LATUDA TAB (QL= 1 tab/day)	PA-QL-¢	4
LATUDA TAB 80MG (QL= 2 tabs/day)	PA-QL-¢	4
GEODON INJ	M	M
ziprasidone mesylate inj (GEODON equiv)	M	M
CAPLYTA CAP	-	NC
NUPLAZID CAP	-	NC
NUPLAZID TAB	-	NC
VRAYLAR CAP	-	NC

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DrugName	Special Code	Tier
ANTIPSYCHOTICS/ANTIMANIC AGENTS Cont.		
VRAYLAR PACK	-	NC
BENZISOXAZOLES		
paliperidone ER tab (INVEGA equiv) (QL= 1 tab/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	2
paliperidone ER tab 6mg (INVEGA equiv) (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	2
RISPERIDONE ODT (QL= 2 tabs/day)	QL	2
risperidone ODT (RISPERDAL M equiv) (QL= 2 tabs/day)	QL	2
risperidone soln (RISPERDAL equiv) (QL= 240ml/30 days)	QL	2
risperidone tab (RISPERDAL equiv) (QL= 2 tabs/day)	QL	2
FANAPT TAB (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	4
INVEGA INJ	-	4
INVEGA TAB	-	NC
BUTYROPHENONES		
haloperidol tab (HALDOL equiv)	-	1
haloperidol lactate conc (HALDOL equiv)	-	2
haloperidol decanoate inj	M	M
haloperidol lactate inj	M	M
DIBENZAPINES		
clozapine tab (QL= 4 tabs/day)	QL	2
clozapine tab (QL= 6 tabs/day)	QL	2
clozapine tab (QL= 9 tabs/day)	QL	2
loxapine cap (LOXITANE equiv)	-	2
olanzapine ODT (ZYPREXA equiv) (QL= 1 tab/day)	QL	2
olanzapine tab (ZYPREXA equiv) (QL= 1 tab/day)	QL	2
quetiapine tab (SEROQUEL equiv) (QL= 2 tabs/day)	QL	2
quetiapine tab 25mg (QL= 3 tabs/day)	QL	2
quetiapine tab 50mg (QL= 3 tabs/day)	QL	2
quetiapine XR tab (SEROQUEL XR equiv) (QL= 2 tabs/day)	QL	2
SAPHRIS SL TAB (QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone)	QL-ST	4
olanzapine inj	M	M
CLOZAPINE ODT	-	NC
CLOZAPINE ODT 12.5MG	-	NC
clozapine ODT 25mg, 100mg (CLOZAPINE, FAZACLO equiv)	-	NC
FAZACLO ODT 12.5MG, 25MG, 100MG	-	NC
SECUADO PATCH	-	NC
DIHYDROINDOLONES		
MOLINDONE TAB	-	NC
PHENOTHIAZINES		
chlorpromazine tab (THORAZINE equiv)	-	1
fluphenazine tab (PROLIXIN equiv)	-	1
FLUPHENAZINE ELIXIR	-	2
FLUPHENAZINE ORAL CONC	-	2
perphenazine tab (TRILAFON equiv)	-	2
prochlorperazine supp (COMPAZINE equiv)	-	2
prochlorperazine tab (COMPAZINE equiv)	-	2

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ANTIPSYCHOTICS/ANTIMANIC AGENTS Cont.		
thioridazine tab (MELLARIL equiv)	-	2
trifluoperazine tab (STELAZINE equiv)	-	2
CHLORPROMAZINE INJ	M	M
fluphenazine decanoate inj	M	M
fluphenazine inj	M	M
prochlorperazine inj	M	M
QUINOLINONE DERIVATIVES		
aripiprazole ODT (ABILIFY equiv) (QL= 2 tabs/day)	QL	2
aripiprazole soln (ABILIFY equiv) (QL= 900ml/30 days)	QL	2
aripiprazole tab (ABILIFY equiv) (QL= 1 tab/day)	QL	2
aripiprazole tab 2mg (ABILIFY equiv) (QL= 2 tabs/day)	QL	2
aripiprazole tab 5mg (ABILIFY equiv) (QL= 2 tabs/day)	QL	2
ABILIFY DISCMELT (QL= 2 tabs/day)	QL	4
ABILIFY MAINTENA	-	4
ABILIFY SOLN (QL= 900ml/30 days)	QL	4
ABILIFY INJ	M	M
ABILIFY MYCITE TAB	-	NC
THIOXANTHENES		
thiothixene cap (NAVANE equiv)	-	1

ANTISEPTICS & DISINFECTANTS

ANTISEPTICS & DISINFECTANTS		
formaldehyde soln	-	2
hydrogen peroxide soln	-	2
lazerformaly soln	-	2
HYLAMEND GEL FIRST AID	-	NC
CHLORINE ANTISEPTICS		
CHLORHEX GLU SOLN	-	1
chlorhexidine gluconate soln (DYNA-HEX 2 SOLN equiv)	-	1
BENZALKONIUM SOLN	-	2
PHISOHEX LIQUID	-	4
IODINE ANTISEPTICS		
iodine soln	-	2
IODINE TINCTURE	-	2

ANTIVIRALS

ANTIRETROVIRALS		
abacavir soln (ZIAGEN equiv)	-	2
abacavir tab (ZIAGEN equiv)	-	2
abacavir/lamivudine/zidovudine tab (TRIZIVIR equiv) (QL= 2 tabs/day)	QL	2
didanosine DR cap (VIDEX EC equiv)	-	2
DIDANOSINE DR CAP, VIDEX EC CAP	-	2
lamivudine tab (EPIVIR equiv)	-	2
lamivudine/zidovudine tab (COMBIVIR equiv)	-	2
NEVIRAPINE ER TAB	-	2
nevirapine ER tab (VIRAMUNE XR equiv)	-	2
nevirapine susp (VIRAMUNE equiv)	-	2

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ANTIVIRALS Cont.		
nevirapine tab (VIRAMUNE equiv)	-	2
stavudine cap (ZERIT equiv)	-	2
stavudine soln (ZERIT equiv)	-	2
VIRAMUNE SUSP	-	2
zidovudine cap (RETROVIR equiv)	-	2
zidovudine syrup (RETROVIR equiv)	-	2
zidovudine tab (RETROVIR equiv)	-	2
CIMDUO TAB	-	3
COMPLERA TAB (QL= 1 tab/day)	QL	3
CRIXIVAN CAP	-	3
GENVOYA TAB	-	3
ODEFSEY TAB	-	3
RESCRIPTOR TAB	-	3
STRIBILD TAB (QL= 1 tab/day)	QL	3
SYMFI (LO) TAB	-	3
TRIUMEQ TAB	-	3
VIRACEPT TAB	-	3
DELSTRIGO TAB	-	4
PIFELTRO TAB	-	4
abacavir/lamivudine tab (EPZICOM equiv)	-	5
APTIVUS CAP	-	5
APTIVUS SOLN	-	5
atazanavir cap (REYATAZ equiv)	-	5
ATRIPLA TAB (QL= 1 tab/day)	QL	5
BIKTARVY TAB	-	5
DESCOVY TAB	-	5
EDURANT TAB	-	5
efavirenz cap (SUSTIVA equiv)	-	5
efavirenz tab (SUSTIVA equiv)	-	5
EMTRIVA CAP	-	5
EMTRIVA SOLN	-	5
EVOTAZ TAB	-	5
fosamprenavir tab (LEXIVA equiv)	-	5
FUZEON INJ	LPSP	5
INTELENCE TAB	-	5
INVIRASE CAP	-	5
INVIRASE TAB	-	5
ISENTRESS (HD) TAB	-	5
ISENTRESS CHEW TAB	-	5
JULUCA TAB	-	5
KALETRA SOLN	-	5
KALETRA TAB	-	5
lamivudine soln (EPIVIR equiv)	-	5
LEXIVA SUSP	-	5
lopinavir/ritonavir soln (KALETRA equiv)	-	5
NORVIR CAP	-	5
NORVIR POWDER PACK	-	5

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DrugName	Special Code	Tier
ANTIVIRALS Cont.		
NORVIR SOLN	-	5
PREZCOBIX TAB	-	5
PREZISTA SUSP	SP	5
PREZISTA TAB	-	5
REYATAZ POWDER PACK	-	5
ritonavir tab (NORVIR equiv)	-	5
SELZENTRY SOLN	-	5
SELZENTRY TAB	-	5
tenofovir disoproxil fumarate tab (VIREAD equiv)	-	5
VIDEX SOLN	-	5
VIREAD POWDER	SP	5
VIREAD TAB	-	5
VITEKTA TAB	-	5
TRUVADA TAB	-	6
RETROVIR INJ	M	M
DOVATO TAB	-	NC
EPZICOM TAB	-	NC
RUKOBIA ER TAB	-	NC
SYM TUZA TAB	-	NC
TIVICAY PD TAB	-	NC
ZERIT SOLN	-	NC
ZIAGEN SOLN	-	NC
CMV AGENTS		
valganciclovir tab (VALCYTE equiv)	PA	2
valganciclovir soln (VALCYTE equiv)	PA-SP	5
cidofovir inj	M	M
FOSCARNET INJ	M	M
GANCICLOVIR INJ	M	M
PREVYMIS TAB	-	NC
VALCYTE SOLN	-	NC
VALCYTE TAB	-	NC
HEPATITIS AGENTS		
entecavir tab (BARACLUDE equiv)	LPSP-PA	2
lamivudine tab 100mg (EPIVIR HBV equiv)	-	2
MODERIBA TAB	LPSP-PA	2
RIBAPAK TAB	LPSP-PA	2
ribavirin cap (REBETOL equiv)	LPSP-PA	2
ribavirin tab (COPEGUS equiv)	LPSP-PA	2
RIBAVIRIN TAB 400MG	LPSP-PA	2
ribavirin tab 400mg (COPEGUS equiv)	LPSP-PA	2
ribavirin tab 600mg (COPEGUS equiv)	LPSP-PA	2
adefovir dipivoxil tab (HEPSERA equiv)	LPSP-PA	5
BARACLUDE SOLN	PA-SP	5
EPCLUSA TAB (QL= 1 tab/ day)	LPSP-PA-QL	5
EPIVIR HBV SOLN	-	5
HARVONI TAB (QL= 1 tab/ day)	LPSP-PA-QL	5

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ANTIVIRALS Cont.		
LEDIPASVIR/SOFOSBUVIR TAB (QL= 1 tab/ day)	LPSP-PA-QL	5
MAVYRET TAB (QL= 3 tabs/day)	LPSP-PA-QL	5
REBETOL SOLN	LPSP-PA	5
SOFOSBUVIR/VELPATASVIR TAB (QL= 1 tab/ day)	LPSP-PA-QL	5
TYZEKA TAB	PA-SP	5
VOSEVI TAB (QL= 1 tab/day)	LPSP-PA-QL	5
DAKLINZA TAB	-	NC
HARVONI PELLETT PAK	-	NC
INCIVEK TAB	-	NC
PEGASYS INJ	-	NC
SOVALDI PELLETT PAK	-	NC
SOVALDI TAB	-	NC
TECHNIVIE TAB	-	NC
VEMLIDY TAB	-	NC
VICTRELIS CAP	-	NC
VIEKIRA XR TAB	-	NC
ZEPATIER TAB	-	NC
HERPES AGENTS		
acyclovir cap (ZOVIRAX equiv)	-	1
acyclovir susp (ZOVIRAX equiv)	-	2
acyclovir tab (ZOVIRAX equiv)	-	2
famciclovir tab 125mg (FAMVIR equiv) (QL= 1 tab/day)	QL	2
famciclovir tab 250mg (FAMVIR equiv) (QL= 2 tabs/day)	QL	2
famciclovir tab 500mg (FAMVIR equiv) (QL= 21 tabs/30 days)	QL	2
valacyclovir tab (VALTREX equiv) (QL= 2 tabs/day)	QL	2
valacyclovir tab 1000mg (VALTREX equiv) (QL= 3 tabs/day)	QL	2
acyclovir inj	M	M
INFLUENZA AGENTS		
oseltamivir cap (TAMIFLU equiv) (QL= 10 caps/ 180 days)	QL	2
oseltamivir cap 30mg (TAMIFLU equiv) (QL= 20 caps/ 180 days)	QL	2
oseltamivir susp (TAMIFLU equiv) (QL= 180ml/180 days)	QL	2
RIMANTADINE TAB	-	2
RELENZA DISKHALER (QL= 1 inhaler/180 days)	QL	3
TAMIFLU CAP	-	NC
TAMIFLU CAP 30MG	-	NC
XOFLUZA TAB	-	NC
RESPIRATORY SYNCYTIAL VIRUS (RSV) AGENTS		
ribavirin inh soln (VIRAZOLE equiv)	PA-SP	5
VIRAZOLE INH SOLN	-	NC
ASSORTED CLASSES		
CHELATING AGENTS		
D-PENAMINE TAB	-	4
ENZYMES		
XIAFLEX INJ	M	M
IMMUNOMODULATORS		

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DrugName	Special Code	Tier
ASSORTED CLASSES Cont.		
REVLIMID CAP (Restricted to Oncology or Hematology Specialist)	PSP-RS	5
THALOMID CAP	PA-PSP	5
IMMUNOSUPPRESSIVE AGENTS		
azathioprine tab (IMURAN equiv)	-	2
cyclosporine cap (SANDIMMUNE equiv)	-	2
cyclosporine modified cap (NEORAL equiv)	-	2
cyclosporine modified soln (NEORAL equiv)	-	2
mycophenolate DR tab (MYFORTIC equiv)	-	2
mycophenolate mofetil cap (CELLCEPT equiv)	-	2
mycophenolate mofetil tab (CELLCEPT equiv)	-	2
sirolimus tab (RAPAMUNE equiv)	-	2
tacrolimus cap (PROGRAF equiv)	-	2
AZASAN TAB	-	3
ZORTRESS TAB 1MG	-	4
SANDIMMUNE SOLN 100MG/ML	-	5
ATGAM INJ	M	M
AZATHIOPRINE INJ	M	M
cyclosporine inj	M	M
mycophenolate inj (CELLCEPT equiv)	M	M
NULOJIX INJ	M	M
ORTHOCLONE INJ	M	M
PROGRAF INJ	M	M
SIMULECT INJ	M	M
THYMOGLOBULN INJ	M	M
ENVARUSUS XR TAB	-	NC
IRRIGATION SOLUTIONS		
lactated ringers irrigation	-	2
physiolyte soln	-	2
ringers irrigation	-	2
sterile water for irrigation	-	2
POTASSIUM REMOVING RESINS		
sodium polystyrene susp (SPS equiv)	-	2
VELTASSA POWDER	PA	4
PROSTAGLANDINS		
alprostadil inj	M	M
SCLEROSING AGENTS		
morrhuate sodium inj	M	M
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA INJ	M	M
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
carvedilol tab (COREG equiv)	-	1
carvedilol phosphate ER cap (COREG CR equiv)	-	2
labetalol tab (NORMODYNE equiv)	-	2
labetalol inj (NORMODYNE equiv)	M	M

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DrugName	Special Code	Tier
BETA BLOCKERS Cont.		
BETA BLOCKERS CARDIO-SELECTIVE		
atenolol tab (TENORMIN equiv)	-	1
metoprolol ER tab 25mg (TOPROL XL equiv)	-	1
metoprolol ER tab 50mg (TOPROL XL equiv)	-	1
metoprolol tab (LOPRESSOR equiv)	-	1
acebutolol cap (SECTRAL equiv)	-	2
betaxolol tab (KERLONE equiv)	-	2
bisoprolol tab (ZEBETA equiv)	-	2
metoprolol ER tab 100mg, 200mg (TOPROL XL equiv)	-	2
BYSTOLIC TAB	¢	3
esmolol inj (BREVIBLOC equiv)	M	M
metoprolol inj (LOPRESSOR equiv)	M	M
FIRST ATENOLOL SOLN	-	NC
FIRST METOPROLOL ORAL SOLN	-	NC
KAPSPARGO CAP	-	NC
metoprolol tab 37.5mg, 75mg (LOPRESSOR equiv)	-	NC
BETA BLOCKERS NON-SELECTIVE		
propranolol tab (INDERAL equiv)	-	1
nadolol tab (CORGARD equiv)	-	2
pindolol tab (VISKEN equiv)	-	2
propranolol ER cap (INDERAL LA equiv)	-	2
PROPRANOLOL SOLN	-	2
sotalol AF tab (BETAPACE AF equiv)	-	2
sotalol tab (BETAPACE equiv)	-	2
timolol maleate tab (BLOCADREN equiv)	-	2
INDERAL XL CAP, INNOPRAN XL CAP	-	4
LEVATOL TAB	-	4
propranolol inj (HEMANGEOL equiv)	M	M
SOTALOL HCL INJ	M	M
SOTYLIZE ORAL SOLN	-	NC
BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
HONEY BEE INJ	M	M
MIXED VESPID INJ	M	M
WASP VENOM INJ	M	M
YELLOW HORN INJ	M	M
YELLOW JACK INJ	M	M
GRASTEK SL TAB	-	NC
ORALAIR SL TAB	-	NC
RAGWITEK SL TAB	-	NC
BIOLOGICALS MISC		
ADAGEN INJ	M	M
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKER COMBINATIONS		
CONSENSI TAB	-	NC

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DrugName	Special Code	Tier
CALCIUM CHANNEL BLOCKERS Cont.		
CALCIUM CHANNEL BLOCKERS		
amlodipine tab (NORVASC equiv)	-	1
VERAPAMIL CAP 100MG	-	1
VERAPAMIL ER CAP 200MG	-	1
VERAPAMIL ER CAP 300MG	-	1
verapamil SR cap (VERELAN equiv)	-	1
VERAPAMIL SR CAP 360mg	-	1
verapamil SR tab (CALAN SR, ISOPTIN SR equiv)	-	1
verapamil tab (CALAN equiv)	-	1
DILTIAZEM CAP	-	2
diltiazem ER cap (CARDIZEM CD equiv)	-	2
diltiazem ER cap (CARDIZEM SR equiv)	-	2
diltiazem ER cap (DILACOR XR equiv)	-	2
diltiazem ER cap (TIAZAC equiv)	-	2
diltiazem ER tab (CARDIZEM LA equiv)	-	2
diltiazem tab (CARDIZEM equiv)	-	2
felodipine ER tab (PLENDIL equiv)	-	2
isradipine cap (DYNACIRC equiv)	-	2
nicardipine cap (CARDENE equiv)	-	2
nifedipine cap (PROCARDIA equiv)	-	2
nifedipine ER tab (ADALAT CC equiv)	-	2
nimodipine cap (NIMOTOP equiv)	-	2
nisoldipine ER tab (SULAR equiv)	-	2
NISOLDIPINE ER TAB 20MG, 30MG, 40MG	-	2
NISOLDIPINE ER TAB 25.5MG	-	2
CARDIZEM LA TAB	-	3
CARDENE INJ	M	M
DILTIAZEM INJ	M	M
diltiazem inj (CARDIZEM equiv)	M	M
nicardipine inj (CARDENE equiv)	M	M
verapamil inj	M	M
KATERZIA SUSP	-	NC
NYMALIZE SOLN	-	NC
VERELAN PM ER CAP 100MG, 300MG	-	NC
VERELAN SR CAP 360mg	-	NC

CARDIOTONICS

CARDIAC GLYCOSIDES		
digoxin tab (LANOXIN equiv)	-	1
DIGOXIN SOLN	-	2
digoxin soln (LANOXIN equiv)	-	2
digoxin inj (LANOXIN equiv)	M	M

PHOSPHODIESTERASE INHIBITORS		
milrinone lactate inj	M	M
milrinone/dextrose inj	M	M

CARDIOVASCULAR AGENTS - MISC.

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
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DrugName	Special Code	Tier
CARDIOVASCULAR AGENTS - MISC. Cont.		
amlodipine/atorvastatin tab (CADUET equiv)	-	2
BIDIL TAB	-	3
ENTRESTO TAB (QL= 2 tabs/day)	QL	3
IMPOTENCE AGENTS		
tadalafil tab 2.5mg, 5mg (CIALIS equiv)	PA	2
CIALIS TAB 2.5MG, 5MG	PA	4
CIALIS TAB	-	NC
LEVITRA TAB	-	NC
tadalafil tab (CIALIS equiv)	-	NC
vardeafil ODT (STAXYN equiv)	-	NC
vardeafil tab (LEVITRA equiv)	-	NC
PERIPHERAL VASODILATORS		
isoxsuprine tab	-	2
papaverine inj	M	M
PAPAVERINE SOLN	M	M
PROSTAGLANDIN VASODILATORS		
TYVASO INH SOLN (QL= 1 ampule/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
VENTAVIS INH SOLN (QL= 9 ampules/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
epoprostenol inj (FLOLAN equiv)	M	M
REMODULIN INJ 10MG/ML	LD-M	M
REMODULIN INJ 1MG/ML	LD-M	M
REMODULIN INJ 2.5MG/ML	LD-M	M
REMODULIN INJ 5MG/ML	LD-M	M
treprostinil inj 10mg/ml (REMODULIN equiv)	LD-M	M
treprostinil inj 1mg/ml (REMODULIN equiv)	LD-M	M
treprostinil inj 2.5mg/ml (REMODULIN equiv)	LD-M	M
treprostinil inj 5mg/ml (REMODULIN equiv)	LD-M	M
VELETRI INJ	M	M
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
ambrisentan tab (LETAIRIS equiv) (Only available through Lumicera 855-847-3553 or Walgreens 888-347-3416)	LD-PA	5
bosentan tab (TRACLEER equiv) (Only available through Walgreens 888-347-3416)	LD-PA	5
LETAIRIS TAB (QL= 1 tab/day; Only available through Lumicera 855-847-3553 or Walgreens 888-347-3416)	LD-PA	5
OPSUMIT TAB (Only available through CVS Specialty 800-237-2767)	LD-PA	5
TRACLEER TAB 32MG (Only available through Walgreens 888-347-3416)	LD-PA	5
TRACLEER TAB 62.5MG, 125MG (Only available through Walgreens 888-347-3416)	LD-PA	5
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
sildenafil tab 20mg (REVATIO equiv)	PA	2
ADCIRCA TAB	LPSP-PA	5
tadalafil tab (PAH) (ADCIRCA equiv)	LPSP-PA	5
sildenafil inj (REVATIO equiv)	M	M
REVATIO SUSP	-	NC
sildenafil susp (REVATIO equiv)	-	NC
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI TAB (QL= 2 tabs/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		

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CARDIOVASCULAR AGENTS - MISC. Cont.		
ADEMPAS TAB (Only available through Accredo 888-773-7376)	LD-PA	5
SINUS NODE INHIBITORS		
CORLANOR SOLN	PA	4
CORLANOR TAB	PA	4
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP (QL= 1 cap/day)	PA-PSP-QL	5
VYNDAQEL CAP (QL= 4 caps/day)	PA-PSP-QL	5
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
cefadroxil cap (DURICEF equiv)	-	2
cefadroxil susp (DURICEF equiv)	-	2
cefadroxil tab (DURICEF equiv)	-	2
cephalexin cap (KEFLEX equiv)	-	2
cephalexin cap 750mg (KEFLEX equiv)	-	2
cephalexin susp (KEFLEX equiv)	-	2
CEFAZOL/DEX SOL	M	M
cefazolin inj	M	M
CEFAZOLIN INJ	M	M
CEPHALEXIN TAB	-	NC
DAXBIA CAP	-	NC
KEFLEX CAP 750MG	-	NC
CEPHALOSPORINS - 2ND GENERATION		
cefaclor cap (CECLOR equiv)	-	2
CEFACTOR ER TAB	-	2
CEFACTOR SUSP	-	2
cefaclor susp (CECLOR equiv)	-	2
cefprozil susp (CEFZIL equiv)	-	2
cefprozil tab (CEFZIL equiv)	-	2
cefuroxime susp (CEFTIN equiv)	-	2
cefuroxime tab (CEFTIN equiv)	-	2
CEFTIN SUSP	-	3
cefotetan inj	M	M
cefotetan inj (CEFOTAN equiv)	M	M
cefotetan/dextrose inj	M	M
CEFOXITIN INJ	M	M
cefuroxime inj	M	M
cefuroxime/dextrose inj	M	M
MEFOXIN INJ	M	M
ZINACEF/D5W INJ	M	M
ZINACEF/H2O INJ	M	M
CEPHALOSPORINS - 3RD GENERATION		
cefdinir cap (OMNICEF equiv)	-	2
cefdinir susp (OMNICEF equiv)	-	2
CEFDITOREN TAB	-	2
cefixime susp (SUPRAX equiv)	-	2
cefepodoxime proxetil susp (VANTIN equiv)	-	2

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CEPHALOSPORINS Cont.		
cefepodoxime proxetil tab (VANTIN equiv)	-	2
SPECTRACEF TAB	-	2
CEDAX CAP	-	4
CEDAX SUSP	-	4
cefixime cap (SUPRAX equiv)	-	4
SUPRAX CAP	-	4
SUPRAX CHEW TAB	-	4
SUPRAX SUSP 500MG/5ML	-	4
SUPRAX TAB	-	4
cefotaxime inj	M	M
ceftazidime inj	M	M
ceftazidime/dextrose inj	M	M
ceftriaxone inj	M	M
ceftriaxone/dextrose inj	M	M
CLAFORAN INJ	M	M
FORTAZ INJ	M	M
CEPHALOSPORINS - 4TH GENERATION		
CEFEPIME INJ	M	M
MAXIPIME INJ	M	M
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO INJ	M	M
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
mibelas chew tab (MINASTRIN equiv)	-	2
LO LOESTRIN TAB	-	3
LOESTRIN 24 FE TAB	-	3
amethyst tab (LYBREL equiv)	-	6
aranelle tab (TRI-NORINYL equiv)	-	6
aviane tab (ALESSE equiv)	-	6
cesia tab (CYCLESSA equiv)	-	6
cryselle tab	-	6
drospirenone/ethinyl estradiol/levomefolate tab (BEYAZ equiv)	-	6
drospirenone/ethinyl estradiol/levomefolate tab (SAFYRAL equiv)	-	6
enpresse tab (TRI-LEVELLEN equiv)	-	6
gianvi tab, ocella tab (YASMIN, YAZ equiv)	-	6
isibloom tab, enskyce tab, apri tab (DESOGEN equiv)	-	6
jolessa tab, amethia tab (SEASONALE, SEASONIQUE equiv)	-	6
junel FE tab (LOESTRIN FE equiv)	-	6
junel tab (LOESTRIN equiv)	-	6
kelnor tab (DEMULEN equiv)	-	6
NATAZIA TAB	-	6
NECON TAB	-	6
nortrel tab (OVCON 35 equiv)	-	6
OGESTREL TAB	-	6
SAFYRAL TAB	-	6
sprintec 28 tab (ORTHO-CYCLEN equiv)	-	6

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**Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
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DrugName	Special Code	Tier
CONTRACEPTIVES Cont.		
tri-legest tab (ESTROSTEP FE equiv)	-	6
tri-sprintec tab (ORTHO TRI-CYCLEN (LO) equiv)	-	6
viorele tab, kariva tab (MIRCETTE equiv)	-	6
wymzya FE tab (FEMCON FE equiv)	-	6
BALCOLTRA TAB	-	NC
BEYAZ TAB	-	NC
MINASTRIN CHEW TAB	-	NC
TAYTULLA CAP	-	NC
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
XULANE PATCH	-	6
TWIRLA PATCH	-	NC
COMBINATION CONTRACEPTIVES - VAGINAL		
NUVARING (QL= 1 ring/28 days)	QL	6
ANNOVERA RING	-	NC
eluryng vaginal ring (NUVARING equiv)	-	NC
COPPER CONTRACEPTIVES - IUD		
PARAGARD IUD	-	6
EMERGENCY CONTRACEPTIVES		
ELLA TAB (QL= 2 tabs/365 days)	QL	6
LEVONORGESTREL TAB 0.75MG (QL= 4 tabs/365 days)	QL	6
levonorgestrel tab 0.75mg (PLAN B equiv) (QL= 4 tabs/365 days)	QL-OTC	6
levonorgestrel tab 1.5mg (PLAN B equiv) (QL= 2 tabs/365 days)	OTC-QL	6
PLAN B ONE-STEP (QL= 2 tabs/365 days)	QL	6
PLAN B TAB (QL= 4 tabs/365 days)	OTC-QL	6
PROGESTIN CONTRACEPTIVES - IMPLANTS		
IMPLANON IMPLANT, NEXPLANON IMPLANT	-	6
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA SC INJ 104MG (QL= 1 inj/90 days)	QL	6
medroxyprogesterone inj (DEPO-PROVERA equiv) (QL= 1 inj/90 days)	QL	6
PROGESTIN CONTRACEPTIVES - IUD		
MIRENA IUD	-	6
PROGESTIN CONTRACEPTIVES - ORAL		
norethindrone tab (NORA-QD equiv)	-	6
SLYND TAB	-	NC
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
prednisone tab (DELTASONE equiv)	-	1
budesonide SR cap (ENTOCORT EC equiv)	-	2
dexamethasone elixir	-	2
DEXAMETHASONE PAK	-	2
dexamethasone pak (DEXPAK equiv)	-	2
DEXAMETHASONE SOLN	-	2
DEXAMETHASONE TAB	-	2
dexamethasone tab (DECADRON equiv)	-	2
hydrocortisone tab (CORTEF equiv)	-	2
Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.		
EXC M PSP SF ST	NC =Not Covered Plan Exclusion Medical Benefit Preferred Specialty Pharmacy Limited to two 15 day fills per month for first 3 months Step Therapy	LD OTC QL SMKG VAC
	generic =small letters Limited Distribution Over-the-Counter Quantity Limit Smoking Cessation Vaccine Program	BRANDS =CAPITAL LETTERS Lumicera Preferred Specialty Pharmacy Prior Authorization Restricted to Specialist Available through Specialty Pharmacy Program RxCENTS

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DrugName	Special Code	Tier
CORTICOSTEROIDS Cont.		
methylprednisolone dose pack (MEDROL equiv)	-	2
methylprednisolone tab (MEDROL equiv)	-	2
PREDNISOLONE ORAL SOLN	-	2
prednisolone soln (PEDIAPRED equiv)	-	2
PREDNISOLONE SYRUP	-	2
prednisolone syrup (PRELONE equiv)	-	2
prednisone pack	-	2
PREDNISON SOLN	-	2
CORTISONE ACETATE TAB	-	3
DEXAMETHASONE CONC	-	4
DEXPAK TAB	-	4
MILLIPRED DP PAK	-	4
MILLIPRED TAB	-	4
ORAPRED ODT	-	4
PREDNISOLONE SOLN	-	4
PREDNISON INTENSOL	-	4
RAYOS TAB	-	4
a-methapred inj (SOLU-MEDROL equiv)	M	M
betamethasone sodium phosphate inj (CELESTONE-SOLUSPAN equiv)	M	M
DEPO-MEDROL INJ	M	M
DEXAMETH PHOS INJ	M	M
dexamethasone sodium phosphate inj	M	M
methylprednisolone inj (DEPO-MEDROL equiv)	M	M
SOLU-CORTEF INJ	M	M
budesonide ER tab (UCERIS equiv)	-	NC
DXEVO 11-DAY PAK	-	NC
EMFLAZA SUSP	-	NC
EMFLAZA TAB	-	NC
ENTOCORT EC CAP	-	NC
ORTIKOS ER CAP	-	NC
PREDNISON/DIPHENHYDRAMINE KIT	-	NC
UCERIS TAB	-	NC

MINERALOCORTICIDS

fludrocortisone tab (FLORINEF equiv)	-	2
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COUGH/COLD/ALLERGY

ANTITUSSIVES

benzonatate cap (TESSALON equiv)	-	2
hydrocodone/homatropine syrup (HYCODAN equiv)	-	2
tussion tab (HYCODAN equiv)	-	2
benzonatate cap 150mg (ZONATUSS equiv)	-	NC
ZONATUSS CAP 150MG	-	NC

COUGH/COLD/ALLERGY COMBINATIONS

ENTRE-B SUSP	OTC	2
entre-b susp (VAZOBID equiv)	OTC--	2
GUAIFENESIN/CODEINE SYRUP	OTC	2
guaifenesin/codeine syrup (TUSSI-ORGANIDIN-S equiv)	OTC	2

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
COUGH/COLD/ALLERGY Cont.		
hydrocodone/chlorpheniramine CR susp (TUSSIONEX equiv)	-	2
HYDROCODONE/CHLORPHENIRAMINE/PSEUDOEPHEDRINE LIQUID	-	2
hydrocodone/chlorpheniramine/pseudoephedrine liquid (ZUTRIPRO equiv)	-	2
NEOTUSS PLUS LIQUID	-	2
phenylephrine/chlorpheniramine dm liquid (NASOHIST DM equiv)	-	2
phenylephrine/guaifenesin soln	-	2
phenylephrine/guaifenesin soln (ENTEX equiv)	-	2
promethazine DM syrup	-	2
PROMETHAZINE VC SYRUP	-	2
promethazine VC syrup (PHENERGAN VC equiv)	-	2
PROMETHAZINE VC/CODEINE SYRUP	-	2
promethazine VC/codeine syrup (PHENERGAN VC/CODEINE equiv)	-	2
promethazine/codeine syrup (PHENERGAN/CODEINE equiv)	-	2
PROTID TAB	-	2
RESCON-JR TAB	-	2
brompheniramine/pseudoephedrine liquid	-	3
CLARINEX-D TAB	-	3
REZIRA SOLN	-	3
TUSSICAPS	-	3
ALBATUSSIN LIQUID	-	4
BRONCOPECTOL SYRUP	-	4
GILTUSS LIQUID	-	4
GILTUSS TR TAB	-	4
NEOTUSS-D LIQUID	-	4
PEDIATEX TDM SUSP	-	4
TUSNEL SYRUP	-	4
BROVEX PEB LIQUID	OTC	NC
cetirizine/pseudoephedrine 12-hour tab (ZYRTEC equiv)	-	NC
DECON-A LIQUID	OTC	NC
DOMETUSS-DMX LIQ	-	NC
HYCOFENIX SOLN	-	NC
lohist liquid (DECON-A equiv)	OTC	NC
loratadine/pseudoephedrine 24-hour tab (CLARITIN-D equiv)	-	NC
MUCINEX LIQUID	-	NC
TRIAMINIC SYRUP	OTC	NC
TUSSIONEX SUSP	-	NC
TUXARIN ER TAB	-	NC
TUZISTRA XR SUSP	-	NC
EXPECTORANTS		
SSKI SOLN	-	3
MISC. RESPIRATORY INHALANTS		
sodium chloride neb soln (HYPER-SAL equiv)	-	2
MUCOLYTICS		
acetylcysteine soln (MUCOMYST equiv)	-	2

DERMATOLOGICALS

ACNE PRODUCTS

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
sodium sulfacetamide/sulfur gel (ROSULA equiv)	-	1
adapalene cream (DIFFERIN equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2
adapalene gel (DIFFERIN equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2
adapalene/benzoyl peroxide gel 0.1-2.5% (EPIDUO equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2
amneesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap	-	2
amneesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap (ACCUTANE equiv)	-	2
benzoyl peroxide gel	-	2
benzoyl peroxide kit	-	2
benzoyl peroxide liquid	-	2
benzoyl peroxide lotion	-	2
benzoyl peroxide pad	-	2
BENZOYL PEROXIDE WASH	-	2
clindamycin foam (EVOCLIN equiv)	-	2
clindamycin gel (CLEOCIN GEL equiv)	-	2
clindamycin lotion (CLEOCIN- T equiv)	-	2
clindamycin pad (CLEOCIN-T equiv)	-	2
clindamycin topical soln (CLEOCIN-T equiv)	-	2
clindamycin/benzoyl peroxide gel (BENZACLIN equiv)	-	2
clindamycin/benzoyl peroxide gel (DUAC GEL equiv)	-	2
clindamycin/tretinoin gel (ZIANA equiv)	-	2
CLINDAREACH KIT	-	2
DIFFERIN OTC GEL 0.1% (Acne Only – members age 35 or older require Prior Authorization)	OTC-PA	2
ERY PAD	-	2
erythromycin gel	-	2
erythromycin pad	-	2
erythromycin soln	-	2
erythromycin/benzoyl peroxide gel	-	2
RIAX FOAM	-	2
sodium sulfacetamide gel	-	2
sodium sulfacetamide lotion (KLARON equiv)	-	2
sodium sulfacetamide/sulfur cream (PLEXION SCT equiv)	-	2
SODIUM SULFACETAMIDE/SULFUR EMULSION	-	2
sodium sulfacetamide/sulfur emulsion (ROSAC WASH equiv)	-	2
sodium sulfacetamide/sulfur emulsion (ROSULA equiv)	-	2
sodium sulfacetamide/sulfur foam (CLARIFOAM EF equiv)	-	2
sodium sulfacetamide/sulfur lotion (SULFACET R equiv)	-	2
sodium sulfacetamide/sulfur pad (PLEXION CLEANSING CLOTH equiv)	-	2
sodium sulfacetamide/sulfur susp (PLEXION TS equiv)	-	2
sodium sulfacetamide/sulfur wash (SUMAXIN WASH equiv)	-	2
tretinoin cream (Acne Only – members age 35 or older require Prior Authorization)	PA	2
tretinoin gel (Acne Only – members age 35 or older require Prior Authorization)	PA	2
tretinoin gel (RETIN-A GEL equiv) (Acne Only – members age 35 or older require Prior Authorization)	PA	2
ADAPALENE LOTION (Acne Only – members age 35 or older require Prior Authorization)	PA	3
AZELEX CREAM (Acne Only – members age 35 or older require Prior Authorization)	PA	3
DIFFERIN LOTION	PA	3
EPIDUO FORTE GEL (Acne Only – members age 35 or older require Prior Authorization)	PA	3

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
ONEXTON GEL	-	3
PRASCION RA CREAM	-	3
SODIUM SULFACETAMIDE/SULFUR LOTION	-	3
ABSORICA CAP	-	4
BENZACLIN KIT CARE	-	4
BENZAMYCIN GEL PACK	-	4
SODIUM SULFACETAMIDE/SULFUR SUSP	-	4
TRETIN-X CREAM (Acne Only – members age 35 or older require Prior Authorization)	PA	4
VELTIN GEL	-	4
ABSORICA LD CAP	-	NC
ACZONE GEL 5%	-	NC
ACZONE GEL, DAPSONE GEL 7.5%	-	NC
AKLIEF CREAM	-	NC
ALTRENO LOTION	-	NC
AMZEEQ FOAM	-	NC
ARAZLO LOTION	-	NC
BENZOYL PEROXIDE/HYDROCORTISONE LOTION	-	NC
benzoyl peroxide/hydrocortisone lotion (VANOXIDE-HC equiv)	-	NC
CLINDAGEL	-	NC
dapsone gel (ACZONE equiv)	-	NC
NUCARACLINPA KIT	-	NC
NUCARARXPAK KIT	-	NC
ROSULA WASH	-	NC
SUMADEN XLT KIT	-	NC
ZIANA GEL	-	NC
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN OINT	-	4
AGENTS FOR WRINKLES/LIPOATROPHY/OTHER AESTHETIC USES		
AVAGE CREAM	-	3
RENOVA CREAM	-	4
KYBELLA INJ	-	NC
ANTIBIOTICS - TOPICAL		
CENTANY OINT	-	2
gentamicin sulfate cream	-	2
gentamicin sulfate oint	-	2
mupirocin cream (BACTROBAN CREAM equiv)	-	2
mupirocin oint (BACTROBAN OINT equiv)	-	2
ALTABAX OINT	-	4
CORTISPORIN CREAM	-	4
CORTISPORIN OINT	-	4
XEPI CREAM	-	NC
ANTIFUNGALS - TOPICAL		
ciclopirox cream (LOPROX CREAM equiv)	-	2
ciclopirox gel (LOPROX GEL equiv)	-	2
ciclopirox nail soln (PENLAC equiv)	-	2
ciclopirox shampoo (LOPROX SHAMPOO equiv)	-	2

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
ciclopirox topical susp (LOPROX SUSP equiv)	-	2
clotrimazole cream (LOTRIMINE AF equiv)	-	2
clotrimazole soln	-	2
clotrimazole/betamethasone cream (LORTRISONE CREAM equiv)	-	2
clotrimazole/betamethasone lotion (LOTRISONE LOTION equiv)	-	2
econazole cream (SPECTAZOLE equiv)	-	2
EXODERM LOTION	-	2
ketoconazole cream (NIZORAL CREAM equiv)	-	2
ketoconazole shampoo (NIZORAL SHAMPOO equiv)	-	2
ketodan foam	-	2
miconazole nitrate cream	-	2
nystatin cream (MYCOSTATIN CREAM equiv)	-	2
nystatin oint	-	2
nystatin topical powder	-	2
versiclear lotion	-	2
EXELDERM CREAM, SULCONAZOLE CREAM	-	3
EXELDERM SOLN	-	3
EXELDERM SOLN, SULCONAZOLE SOLN	-	3
MENTAX CREAM	-	3
ERTACZO CREAM	-	4
NAFTIFINE CREAM	-	4
naftifine cream (NAFTIN equiv)	-	4
nystatin/triamcinolone cream	-	4
nystatin/triamcinolone oint	-	4
oxiconazole nitrate cream (OXISTAT equiv)	-	4
PEDIPIROX-4 KIT	-	4
XOLEGEL	-	4
ALCORTIN A GEL	-	NC
ALOQUIN GEL	-	NC
ECONASIL KIT	-	NC
iodoquinol/hydrocortisone cream 1% (VYTONE equiv)	-	NC
iodoquinol/hydrocortisone cream 1.9-1% (VYTONE equiv)	-	NC
iodoquinol/hydrocortisone/aloe polysaccharide gel (ALCORTIN A equiv)	-	NC
LULICONAZOLE CREAM, LUZU CREAM	-	NC
naftifine gel (NAFTIN equiv)	-	NC
NAFTIN GEL	-	NC
nizoral a-d shampoo (NIZORAL equiv)	OTC	NC
NYATA KIT	-	NC
ONYCHO-MED KIT	-	NC
PEDIZOLPAK THERAPY PACK	-	NC
ZOLPAK KIT	-	NC

ANTI-INFLAMMATORY AGENTS - TOPICAL

diclofenac gel 1% (VOLTAREN equiv)	-	2
diclofenac soln 1.5% (PENNSAID equiv) (QL= 3 bottles/fill)	QL	2
DICLOFENAC PATCH, FLECTOR PATCH	-	3
DST PLUS PAK KIT	-	NC
GABAPENTIN/NAPROXEN CREAM COMPOUND KIT	-	NC

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DERMATOLOGICALS Cont.		
INFLAMMA-K KIT	-	NC
LICART PATCH	-	NC
VAROPHEN KIT	-	NC
VOLTAREN GEL	-	NC
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
fluorouracil cream (EFUDEX CREAM equiv)	-	2
FLUOROURACIL SOLN	-	2
FLUOROURACIL CREAM 0.5%	-	3
PANRETIN GEL	-	3
diclofenac gel (SOLARAZE equiv) (QL= 300gm/30 days)	PA-QL	4
FLUORAC CREAM	-	4
FLUOROPLEX CREAM	-	4
PICATO GEL	-	4
TARGRETIN GEL	LPSP	4
VALCHLOR GEL (Only available through Avella (877) 546-5779)	LD-PA	5
CARAC CREAM	-	NC
SOLARAVIX PAK	-	NC
ANTIPRURITICS - TOPICAL		
DOXEPIN CREAM, PRUDOXIN CREAM, ZONALON CREAM	-	4
ANTIPSORIATICS		
methoxsalen cap (OXSORALEN ULTRA equiv)	-	1
calcipotriene cream (DOVONEX CREAM equiv)	-	2
calcipotriene oint	-	2
calcipotriene soln (DOVONEX SOLN equiv)	-	2
DRITHO-SCALP CREAM	-	2
tazarotene cream 0.1% (TAZORAC equiv)	-	2
DRITHO-SCALP CREAM	-	3
8-MOP CAP	-	4
CALCITRIOL OINT	-	4
TAZORAC GEL	-	4
VECTICAL OINT	-	4
acitretin cap (SORIATANE equiv)	-	5
COSENTYX INJ (1-PACK) (QL= 1 inj/28 days)	LPSP-PA-QL	5
COSENTYX INJ (2-PACK) (QL= 2 inj/28 days)	LPSP-PA-QL	5
SKYRIZI INJ (QL= 2 inj/84 days)	LPSP-PA-QL	5
STELARA INJ (QL= 1 inj/84 days)	LPSP-PA-QL	5
TALTZ INJ (QL= 1 inj/28 days)	LPSP-PA-QL	5
CALCIPOTRIENE FOAM	-	NC
NUDERMRXPAK PAK	-	NC
SILIQ INJ	-	NC
SORILUX FOAM	-	NC
TAZORAC CREAM	-	NC
TREMFYA INJ	-	NC
ANTISEBORRHEIC PRODUCTS		
seb-prev cream (OVACE CREAM equiv)	-	1
sodium sulfacetamide gel (OVACE PLUS equiv)	-	1

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DERMATOLOGICALS Cont.		
selenium sulfide lotion	-	2
selenium sulfide shampoo (SELSEB equiv)	-	2
sodium sulfacetamide shampoo (OVACE equiv)	-	2
sodium sulfacetamide wash (OVACE WASH equiv)	-	2
sodium sulfacetamide/urea pad (ROSULA equiv)	-	2
OVACE PLUS CREAM	-	3
ESKATA SOLN	-	NC
OVACE PLUS FOAM	-	NC
selenium sulfide shampoo 2.3% (SELRX equiv)	-	NC
SELRX SHAMPOO 2.3%	-	NC
ANTIVIRALS - TOPICAL		
acyclovir cream (ZOVIRAX equiv)	-	2
acyclovir oint (ZOVIRAX equiv)	-	2
ZOVIRAX CREAM	-	3
DENAVIR CREAM	-	4
BURN PRODUCTS		
mafenide acetate soln packet (SULFAMYLON equiv)	-	2
silver sulfadiazine cream (SILVADENE CREAM equiv)	-	2
SULFAMYLON CREAM	-	4
SULFAMYLON PACK	-	NC
CAUTERIZING AGENTS		
SILVER NITRATE OINT	-	2
SILVER NITRATE SOLN	-	2
silver nitrate applicator (SILVER NITRATE equiv)	-	NC
CORTICOSTEROIDS - TOPICAL		
calcipotriene/betamethasone oint (TACLONEX equiv)	-	1
triamcinolone cream	-	1
triamcinolone lotion	-	1
triamcinolone oint	-	1
alclometasone cream (ACLOVATE equiv)	-	2
alclometasone oint (ACLOVATE OINT equiv)	-	2
betamethasone augmented cream (DIPROLENE AF CREAM equiv)	-	2
betamethasone augmented gel	-	2
betamethasone augmented lotion (DIPROLENE LOTION equiv)	-	2
betamethasone augmented oint (DIPROLENE OINT equiv)	-	2
betamethasone dipropionate cream (DIPROSONE CREAM equiv)	-	2
betamethasone dipropionate lotion	-	2
betamethasone dipropionate oint (DIPROSONE OINT equiv)	-	2
betamethasone valerate cream	-	2
betamethasone valerate lotion	-	2
betamethasone valerate oint	-	2
calcipotriene/betamethasone dipropionate susp	-	2
clobetasol propionate cream (TEMOVATE CREAM equiv)	-	2
clobetasol propionate emollient cream (TEMOVATE E equiv)	-	2
clobetasol propionate gel (TEMOVATE GEL equiv)	-	2
clobetasol propionate oint (TEMOVATE OINT equiv)	-	2

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DERMATOLOGICALS Cont.		
clobetasol propionate soln (TEMOVATE SOLN equiv)	-	2
CORTALO GEL	-	2
desonide cream (DESOWEN equiv)	-	2
desonide oint	-	2
desoximetasone cream (TOPICORT CREAM equiv)	-	2
desoximetasone gel (TOPICORT equiv)	-	2
desoximetasone oint (TOPICORT equiv)	-	2
fluocinolone acetonide cream	-	2
fluocinolone acetonide oil	-	2
fluocinolone acetonide oint	-	2
fluocinolone acetonide soln	-	2
fluocinonide cream 0.05% (LIDEX equiv)	-	2
fluocinonide emollient cream	-	2
fluocinonide gel	-	2
fluocinonide oint	-	2
fluocinonide soln	-	2
flurandrenolide lotion (CORDRAN equiv)	-	2
flurandrenolide oint (CORDRAN equiv)	-	2
fluticasone propionate cream (CUTIVATE equiv)	-	2
fluticasone propionate oint (CUTIVATE equiv)	-	2
halobetasol propionate cream (ULTRAVATE equiv)	-	2
halobetasol propionate oint (ULTRAVATE equiv)	-	2
halonate pac kit (ULTRAVATE KIT equiv)	-	2
hydrocortisone cream (PROCTOCORT equiv)	-	2
hydrocortisone lotion (LOCOID equiv)	-	2
hydrocortisone lotion (HYTONE equiv)	-	2
hydrocortisone oint	-	2
hydrocortisone/aloe gel (NUZON equiv)	-	2
mometasone cream (ELOCON equiv)	-	2
mometasone oint (ELOCON equiv)	-	2
mometasone soln (ELOCON equiv)	-	2
PREDNICARBATE CREAM	-	2
prednicarbate cream (DERMATOP equiv)	-	2
PREDNICARBATE OIN	-	2
triamcinolone acetonide oint (TRIANEX equiv)	-	2
triamcinolone spray (KENALOG equiv)	-	2
TRIANEX OINT	-	2
triderm cream	-	2
U-CORT CREAM	-	2
ALA SCALP LOTION	-	3
CALCIPOTRIENE/BETAMETHASONE SUSP	-	3
CAPEX SHAMPOO	-	3
CORDRAN TAPE	-	3
HALAC KIT	-	3
PRAMOSONE LOTION	-	3
PRAMOSONE OINT	-	3
AMCINONIDE OINT	PA	4

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clobetasol foam (OLUX FOAM equiv)	PA	4
clobetasol lotion (CLOBEX LOTION equiv)	PA	4
clobetasol shampoo (CLOBEX SHAMPOO equiv)	PA	4
clobetasol spray (CLOBEX SPRAY equiv)	-	4
CLOCORTOLONE CREAM	-	4
CLODERM CREAM	-	4
CORDRAN CREAM 0.025%	-	4
DESONATE GEL	-	4
DESOWEN CREAM KIT	-	4
DESOWEN LOTION KIT	-	4
DESOWEN OINT KIT	-	4
flurandrenolide Cream (CORDRAN equiv)	-	4
NUCORT LOTION	-	4
OLUX-OLUX-E PACK	-	4
PEDIADERM HC KIT	-	4
PEDIADERM TA KIT	-	4
TEXACORT SOLN	-	4
ULTRAVATE LOTION	-	4
VERDESO FOAM	-	4
AMCINONIDE CREAM 0.1%	-	NC
AMCINONIDE LOTION	-	NC
APEXICON E CREAM (PSORCON E equiv)	-	NC
BESER KIT 0.05%	-	NC
betamethasone valerate foam (LUXIQ FOAM equiv)	-	NC
BRYHALI LOTION	-	NC
CLOBEX LOTION	-	NC
CORDRAN LOTION	-	NC
CORDRAN OINT	-	NC
CUTIVATE LOTION	-	NC
desonide gel	-	NC
desonide lotion	-	NC
DIFLORASONE CREAM	-	NC
DUOBRII LOTION	-	NC
ENSTILAR FOAM	-	NC
fluocinonide cream 0.1% (VANOS CREAM equiv)	-	NC
FLUOPAR KIT	-	NC
FLUOVIX PAK	-	NC
fluticasone propionate lotion (CUTIVATE equiv)	-	NC
halcinonide cream (HALOG equiv)	-	NC
HALOG CREAM	-	NC
HALOG OINT	-	NC
HALOG SOLN	-	NC
HC-LIDOCAINE CREAM	-	NC
hydrocortisone butyrate cream (LOCOID equiv)	-	NC
hydrocortisone butyrate lipocream (LOCOID equiv)	-	NC
hydrocortisone butyrate oint (LOCOID equiv)	-	NC
hydrocortisone butyrate soln (LOCOID equiv)	-	NC

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DERMATOLOGICALS Cont.		
hydrocortisone valerate cream	-	NC
hydrocortisone valerate oint (WESTCORT equiv)	-	NC
hydrocortisone/pramoxine cream 2.5-1% (PRAMOSONE equiv)	-	NC
IMPOYZ CREAM	-	NC
LEXETTE FOAM	-	NC
MEXPAROX HC CREAM	-	NC
MICORT-HC CREAM	-	NC
NOVACORT GEL	-	NC
paramox hc gel (NOVACORT GEL equiv)	-	NC
PRAMOSONE E CREAM	-	NC
QUINIXIL PAK	-	NC
QUINOSONE KIT	-	NC
SERNIVO SPRAY	-	NC
SILALITE PAK MIS	-	NC
TASOPROL CREAM KIT	-	NC
TEMOVATE CREAM	-	NC
TOPICORT OINT	-	NC
TOVET KIT	-	NC
VANOS CREAM	-	NC
ECZEMA AGENTS		
DUPIXENT INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
DUPIXENT PEN INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
EMOLLIENT/KERATOLYTIC AGENTS		
latrix susp	-	2
umecta mouss aer	-	2
URAMAXIN AER	-	2
urea emulsion	-	2
UREA NAIL KIT	-	2
UREA SOLN 45%	-	2
KERAFOAM	-	4
UMECTA EMULSION	-	NC
URAMAXIN CREAM	-	NC
URAMAXIN GEL	-	NC
urea cream	-	NC
UREA EMULSION	-	NC
urea gel (URAMAXIN equiv)	-	NC
UREA LOTION	-	NC
urea lotion (KERALAC LOTION equiv)	-	NC
UREA SUSP	-	NC
urea susp 40% (UMECTA equiv)	-	NC
EMOLLIENTS		
ammonium lactate cream (LAC-HYDRIN equiv)	-	2
ammonium lactate lotion (LAC-HYDRIN equiv)	-	2
HYALURONATE GEL	-	2
lactic acid w/ vitamin E cream	-	2
HYLINATE LOTION	-	NC

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DERMATOLOGICALS Cont.		
ENZYMES - TOPICAL		
vasoalex oint (XENADERM equiv)	-	2
SANTYL OINT (QL= 90gm/30 days)	QL	3
XENADERM OINT	-	NC
GLABELLAR LINES (FROWN LINES) AGENTS		
BOTOX COSMET INJ	M	M
HAIR GROWTH AGENTS		
finasteride tab (PROPECIA equiv)	-	NC
IMMUNOMODULATING AGENTS - TOPICAL		
imiquimod cream (ALDARA equiv)	-	2
ZYCLARA CREAM	-	4
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
pimecrolimus cream (ELIDEL equiv) (Covered for members 2 years or older)	-	2
tacrolimus oint (PROTOPIC equiv)	-	2
ELIDEL CREAM (Covered for members 2 years or older)	-	3
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOCON SOLN	-	2
podofilox soln (CONDYLOX equiv)	-	2
PYROGALL ACD OINT	-	2
salicylic acid aerosol	-	2
salicylic acid cream	-	2
salicylic acid gel	-	2
salicylic acid liquid	-	2
salicylic acid lotion	-	2
salicylic acid shampoo (SALEX equiv)	-	2
SALICYLIC ACID SOLN	-	2
CONDYLOX GEL	-	3
SALIMEZ FORTE CREAM	-	NC
SALISOL SOLN 23%	-	NC
XALIX SOL	-	NC
LOCAL ANESTHETICS - TOPICAL		
COCAINE HCL SOL	-	2
ETHYL CHLOR AER MIST	-	2
exactacain aer	-	2
lidocaine cream 3% (LIDAMANTLE equiv)	-	2
LIDOCAINE GEL	-	2
lidocaine gel (GLYDO equiv)	-	2
lidocaine gel (XYLOCAINE equiv)	-	2
lidocaine patch	-	2
lidocaine soln (XYLOCAINE equiv)	-	2
lidocaine/prilocaine cream (EMLA equiv)	PA	2
pramox gel	-	2
SYNERA PATCH	-	4
ADAZIN CREAM	-	NC
ANASTIA LOTION	-	NC

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DERMATOLOGICALS Cont.		
APRIZIO PAK KIT	-	NC
BENZOCAINE/LIDOCAINE/TETRACAINE OINT	-	NC
GEN7T LOTION	-	NC
GEN7T PLUS LOTION	-	NC
GEN7T PLUS PAD	-	NC
L.E.T. GEL	-	NC
lidocaine cream 3.88% (LIDOTRAL equiv)	-	NC
lidocaine oint	-	NC
LIDOCAINE/TETRACAINE CREAM	-	NC
LIDOCIN GEL	-	NC
LIDOSTREAM KIT	-	NC
LIDOTRAL CREAM	-	NC
LIDOTREX GEL	-	NC
LMR PLUS KIT	-	NC
MEDI-PATCH W/LIDOCAINE PATCH	-	NC
MICROVIX LP PAK	-	NC
NUVAKAAN II KIT	-	NC
PLIAGLIS CREAM	-	NC
SYNVEXIA TC CREAM	-	NC
WPR PLUS	-	NC
ZILACAINE PAK	-	NC
MISC. DERMATOLOGICAL PRODUCTS		
EPICERAM EMULSION	-	NC
NEOSALUS FOAM	-	NC
MISC. TOPICAL		
aluminum chloride soln (DRYSOL equiv)	-	2
DRYSOL SOLN	-	2
zinc oxide oint	-	2
HYCLODEX SOLN	-	NC
QBREXZA PAD	-	NC
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA OINT	-	NC
PIGMENTING-DEPIGMENTING AGENTS		
hydroquinone cream (LUSTRA equiv)	-	2
hydroquinone gel	-	2
hydroquinone micro cream	-	2
hydroquinone/sunscreen cream	-	2
MELPAQUE HP CREAM	-	2
MELQUIN 3 SOLN	-	2
NUQUIN HP GEL	-	2
OXSORALEN LOT	SP	5
ROSACEA AGENTS		
azelaic acid gel (FINACEA equiv)	-	2
metronidazole cream (METROCREAM equiv)	-	2
metronidazole gel (METROGEL equiv)	-	2
metronidazole lotion (METROLOTION equiv)	-	2

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DERMATOLOGICALS Cont.		
DOXYCYCLINE CAP, ORACEA CAP	-	3
FINACEA FOAM	-	3
FINACEA GEL	-	3
IVERMECTIN CREAM	-	NC
ivermectin cream (SOOLANTRA equiv)	-	NC
RHOFADE CREAM	-	NC
SOOLANTRA CREAM	-	NC
ZILXI FOAM	-	NC
SCABICIDES & PEDICULICIDES		
CROTAN LOTION	-	2
lindane lotion	-	2
lindane shampoo	-	2
malathion lotion (OVIDE equiv)	-	2
permethrin cream (ELIMITE CREAM equiv)	-	2
SPINOSAD SUSP	-	2
EURAX CREAM	-	3
EURAX LOTION	-	3
ULESFIA LOTION	-	3
NATROBA SUSP (QL= 1 bottle/fill)	QL	4
SKLICE LOTION	-	4
SCAR TREATMENT PRODUCTS		
SCARCIN GEL	-	NC
scarcin gel (SCARCIN equiv)	-	NC
SCARCIN LIQUID ROLL-ON	-	NC
SILIPAC KIT	-	NC
TAR PRODUCTS		
COAL TAR SOLN	-	2
WOUND CARE PRODUCTS		
REGRANEX GEL	-	4
ALEVICYN SOLN DERMAL	-	NC
cicatrace kit (REXASIL equiv)	-	NC
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC BIOLOGICALS		
TRICHOPHYTON INJ	M	M
DIAGNOSTIC DRUGS		
GLUCAGEN INJ	-	4
AMINOHIPURATE INJ	M	M
cosyntropin inj	M	M
cosyntropin inj (CORTROSYN equiv)	M	M
DIPYRIDAMOLE INJ	M	M
isosulfan inj (ISOSULFAN BLUE equiv)	M	M
THYROGEN INJ	M	M
GLUCAGON DIAGNOSTIC INJ	-	NC
MACRILEN PACK	-	NC
DIAGNOSTIC TESTS		

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DIAGNOSTIC PRODUCTS Cont.		
GLUCOCARD EXPRESSION TEST STRIP	OTC	2
GLUCOCARD SHINE TEST STRIP	OTC	2
PRECISION XTRA TEST STRIP	OTC	NC
TEST STRIPS (all other Brands)	-	NC
TRUETEST TEST STRIP	OTC	NC
TRUETEST TEST STRIPS	OTC	NC
RADIOGRAPHIC CONTRAST MEDIA		
OMNIPAQUE SOLN	-	NC
SITZMARKS CAP	-	NC

DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS

DIETARY MANAGEMENT PRODUCTS

L-METHYL-MC TAB	-	4
VAYARIN CAP	-	4
VAYAROL CAP	-	4
VITA-RESPA TAB	-	4
ASTAMED MYO CAP	-	NC
GLYGEST PAK	-	NC
LUVIRA CAP	-	NC
PODIAPN CAP	-	NC
XAQUIL XR TAB	-	NC
XYZBAC TAB	-	NC

DIGESTIVE AIDS

DIGESTIVE ENZYMES

CREON CAP	-	3
PANCREAZE CAP, PERTZYE CAP, ULTRESA CAP, ZENPEP CAP	-	4
PANCRELIPASE CAP	-	4
VIOKACE TAB	-	4
SUCRAID SOLN	PA-SP	5

DIURETICS

CARBONIC ANHYDRASE INHIBITORS

acetazolamide ER cap (DIAMOX SEQUEL equiv)	-	2
methazolamide tab (NEPTAZANE equiv)	-	2
acetazolamide tab	-	3
KEVEYIS TAB	-	3
acetazolamide inj	M	M

DIURETIC COMBINATIONS

amiloride/hydrochlorothiazide tab (MODURETIC equiv)	-	1
triamterene/hydrochlorothiazide cap (DYAZIDE equiv)	-	1
triamterene/hydrochlorothiazide tab (MAXZIDE equiv)	-	1
spironolactone/hydrochlorothiazide tab (ALDACTAZIDE equiv)	-	2
TRIAMTERENE/HYDROCHLOROTHIAZIDE CAP 50-25mg	-	3

LOOP DIURETICS

furosemide tab (LASIX equiv)	-	1
bumetanide tab (BUMEX equiv)	-	2
FUROSEMIDE SOLN	-	2

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DIURETICS Cont.		
furosemide soln (LASIX equiv)	-	2
torsemide tab (DEMADEX equiv)	-	2
ethacrynic tab (EDECIN equiv)	-	4
bumetanide inj (BUMEX equiv)	M	M
ethacrynate inj (SODIUM EDECIN equiv)	M	M
furosemide inj (LASIX equiv)	M	M
TORSEMIDE INJ	M	M
EDECIN TAB	-	NC
OSMOTIC DIURETICS		
osmitrol inj	M	M
POTASSIUM SPARING DIURETICS		
amiloride tab (MIDAMOR equiv)	-	1
spironolactone tab (ALDACTONE equiv)	-	1
triamterene cap (DYRENIUM equiv)	-	2
DYRENIUM CAP	-	4
CAROSPIR SUSP	-	NC
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
CHLOROTHIAZIDE TAB	-	1
chlorothiazide tab (DIURIL equiv)	-	1
hydrochlorothiazide cap (MICROZIDE equiv)	-	1
hydrochlorothiazide tab (HYDRODIURIL equiv)	-	1
indapamide tab (LOZOL equiv)	-	1
chlorthalidone tab	-	2
METHYCLOTHIAZIDE TAB	-	2
metolazone tab (ZAROXOLYN equiv)	-	2
chlorothiazide inj (DIURIL equiv)	M	M
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ADRENAL STEROID INHIBITORS		
ISTURISA TAB	-	NC
BONE DENSITY REGULATORS		
alendronate tab (FOSAMAX equiv)	-	2
ALENDRONATE TAB 40MG	-	2
calcitonin nasal spray (MIACALCIN equiv) (QL= 1 bottle/30 days)	QL	2
ETIDRONATE DISODIUM TAB 400MG	-	2
FORTICAL NASAL SPRAY (QL= 1 bottle/30 days)	QL	2
ibandronate tab 150mg (BONIVA equiv) (QL= 1 tab/28 days)	QL	2
risedronate DR tab (ATELVIA equiv) (QL= 4 tabs/28 days; Step Therapy requires trial of alendronate, ibandronate or FOSAMAX+D)	QL-ST	2
risedronate tab (ACTONEL equiv)	-	2
FOSAMAX+D TAB	-	3
BINOSTO TAB (QL= 4 tabs/ 28 days)	QL	4
MIACALCIN INJ	LPSP	4
SKELID TAB	-	4
FORTEO INJ	LPSP-PA	5
TYMLOS INJ	LPSP-PA	5
GANITE INJ	M	M

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ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
PAMIDRONATE INJ	M	M
pamidronate inj (PAMIDRONATE equiv)	M	M
PROLIA INJ	LPSP-M	M
XGEVA INJ	LPSP-M	M
zoledronic acid inj (ZOMETA equiv)	LPSP-M	M
ZOMETA INJ	LPSP-M	M
NATPARA INJ	-	NC
TERIPARATIDE INJ	-	NC
CORTICOTROPIN		
ACTHAR HP INJ	M	M
GNRH/LHRH ANTAGONISTS		
ORLISSA TAB 150MG (QL=1 tab/day)	PA-QL	5
ORLISSA TAB 200MG (QL= 2 tabs/day)	PA-QL	5
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ (Only available through Walgreens 888-347-3416)	LD-PA	5
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA INJ	PA-SP	5
GROWTH HORMONES		
GENOTROPIN INJ, HUMATROPE INJ, ZOMACTON INJ	LPSP-PA	5
NUTROPIN AQ INJ, OMNITROPE INJ	LPSP-PA	5
SAIZEN INJ, SEROSTIM INJ, ZORBTIVE INJ	LPSP-PA	5
HORMONE RECEPTOR MODULATORS		
raloxifene tab (EVISTA equiv) (Covered at \$0 for women 35 years or older; All other members covered at generic copay)	-	6
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX INJ	PA-PSP	5
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON DEPOT-PED INJ	LPSP-PA	5
SUPPRELIN LA KIT	PA-SP	5
SYNAREL NASAL SOLN	PA-SP	5
FENSOLVI INJ	-	NC
METABOLIC MODIFIERS		
calcitriol cap (ROCALTROL equiv)	-	2
CALCITRIOL INJ	LPSP	2
calcitriol soln (ROCALTROL equiv)	-	2
cinacalcet tab (SENSIPAR equiv)	-	2
doxercalciferol cap (HECTOROL equiv)	-	2
levocarnitine soln (CARNITOR equiv)	-	2
levocarnitine tab (CARNITOR equiv)	-	2
paricalcitol cap (ZEMPLAR equiv)	-	2
sodium phenylbutyrate powder (BUPHENYL equiv)	-	2
sodium phenylbutyrate tab (BUPHENYL equiv)	-	2
BUPHENYL TAB	-	3
SENSIPAR TAB	-	3
CARBAGLU TAB (Only available through Accredo 888-773-7376)	LD-PA	5
CYSTADANE POWDER	PA-SP	5

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PSP	Preferred Specialty Pharmacy	QL	Quantity Limit	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
GALAFOLD CAP (QL= 15 caps/30 days; Only available through Walgreens 888-347-3416)	LD-PA-QL	5
KUVAN POWDER PACK (Only available through Walgreens 888-347-3416)	LD-PA	5
KUVAN TAB (Only available through Walgreens 888-347-3416)	LD-PA	5
nitisinone cap (ORFADIN equiv) (Only available through Dohmen LSS 844-246-5226)	LD-PA	5
ORFADIN CAP (Only available through Dohmen LSS 844-246-5226)	LD-PA	5
ALDURAZYME INJ	M	M
doxercalciferol inj (HECTOROL equiv)	M	M
ELAPRASE INJ	LPSP-M	M
FABRAZYME INJ	M	M
levocarnitine inj (CARNITOR equiv)	M	M
MYOZYME INJ	LPSP-M	M
NAGLAZYME INJ	LPSP-M	M
paricalcitol inj	M	M
CARNITOR INJ	-	NC
NITYR TAB	-	NC
ORFADIN SUSP	-	NC
PALYNZIQ INJ	-	NC
RAYALDEE CAP	-	NC
STRENSIQ INJ	-	NC
XURIDEN POWDER	-	NC
POSTERIOR PITUITARY HORMONES		
desmopressin acetate inj (DDAVP equiv)	-	2
desmopressin acetate nasal spray (DDAVP equiv)	-	2
desmopressin acetate tab (DDAVP equiv)	-	2
desmopressin nasal soln (DDAVP equiv)	-	2
STIMATE NASAL SOLN	PA-SP	5
vasopressin inj (PITRESSIN SYNTHETIC equiv)	M	M
DDAVP NASAL SOLN	-	NC
NOCDURNA SL TAB	-	NC
NOCTIVA EMULSION SPRAY	-	NC
PROLACTIN INHIBITORS		
cabergoline tab (DOSTINEX equiv)	SP	5
SOMATOSTATIC AGENTS		
octreotide inj (SANDOSTATIN equiv)	LPSP-PA	2
SANDOSTATIN LAR INJ KIT	LPSP-PA	5
SIGNIFOR INJ (QL= 2 vials/day; Only available through Accredo 888-773-7376)	LD-PA-QL	5
SOMATULINE INJ	LPSP-PA	5
BYNFEZIA PEN INJ	-	NC
MYCAPSSA CAP	-	NC
VASOPRESSIN RECEPTOR ANTAGONISTS		
SAMSCA TAB	PA-PSP	5
tolvaptan tab (SAMSCA equiv)	PA-PSP	5
JYNARQUE PAK	-	NC
JYNARQUE TAB	-	NC

ESTROGENS

ESTROGEN COMBINATIONS

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
ESTROGENS Cont.		
estradiol/norethindrone tab (ACTIVEVELLA equiv)	-	2
jinteli tab (FEMHRT equiv)	-	2
PREMPHASE TAB, PREMPRO TAB	-	3
COMBIPATCH	-	4
PREFEST TAB	-	4
BIJUVA CAP	-	NC
esterified estrogens/methyltestosterone tab (ESTRATEST equiv)	-	NC
ORIAHNN CAP	-	NC
ESTROGENS		
estradiol tab (ESTRACE equiv)	-	1
DEPO-ESTRADIOL INJ	-	2
estradiol patch (CLIMARA equiv)	-	2
estradiol patch (VIVELLE-DOT equiv)	-	2
estradiol valerate inj (DELESTROGEN equiv)	-	2
ESTROPIPATE TAB	-	2
estropipate tab (OGEN equiv)	-	2
PREMARIN TAB	-	3
ALORA PATCH	-	4
CENESTIN TAB	-	4
DIVIGEL GEL, ELESTRIN GEL	-	4
ENJUVA TAB	-	4
ESTRASORB EMULSION	-	4
EVAMIST SPRAY	-	4
MENEST TAB	-	4
MENOSTAR PATCH	-	4
MINIVELLE PATCH	-	4
PREMARIN INJ	M	M
FLUOROQUINOLONES		
FLUOROQUINOLONES		
CIPROFLOXACIN ER TAB	-	2
ciprofloxacin susp (CIPRO equiv)	-	2
ciprofloxacin tab (CIPRO equiv)	-	2
levofloxacin tab (LEVAQUIN equiv)	-	2
moxifloxacin tab (AVELOX equiv)	-	2
ofloxacin tab (FLOXIN equiv)	-	2
BAXDELA TAB (QL= 2 tabs/day; Restricted to Infectious Disease Specialist)	QL-RS	3
CIPROFLOXACIN 100MG TAB	-	4
FACTIVE TAB	-	4
NOROXIN TAB	-	4
AVELOX INJ	M	M
CIPROFLOXACIN INJ	M	M
levofloxacin inj	M	M
levofloxacin/d5w inj	M	M
CIPRO SUSP 5%	-	NC
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		

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DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
MOTEGRITY TAB	-	NC
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE TAB	PA	3
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA TAB	-	NC
GALLSTONE SOLUBILIZING AGENTS		
ursodiol cap (ACTIGALL equiv)	-	2
ursodiol tab (URSO (FORTE) equiv)	-	2
GASTROINTESTINAL ANTIALLERGY AGENTS		
cromolyn conc (GASTROCROM equiv)	-	2
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
AMITIZA CAP	PA	4
GASTROINTESTINAL STIMULANTS		
metoclopramide tab (REGLAN equiv)	-	1
metoclopramide soln (REGLAN equiv)	-	2
DEXPANTHENOL INJ	M	M
metoclopramide inj (REGLAN equiv)	M	M
INFLAMMATORY BOWEL AGENTS		
balsalazide cap (COLAZAL equiv)	-	2
LIALDA TAB	-	2
mesalamine DR cap (DELZICOL equiv)	-	2
mesalamine DR tab (LIALDA equiv)	-	2
mesalamine enema (ROWASA equiv)	-	2
mesalamine ER cap (APRISO equiv)	-	2
mesalamine supp (CANASA equiv)	-	2
mesalamine tab (ASACOL equiv)	-	2
sulfasalazine EC tab (AZULFIDINE equiv)	-	2
sulfasalazine tab (AZULFIDINE equiv)	-	2
APRISO CAP	-	3
ASACOL HD TAB	-	4
ASACOL HD TAB, MESALAMINE TAB	-	4
DIPENTUM CAP	-	4
GIAZO TAB	-	4
CIMZIA INJ (QL= 2 inj/28 days)	LPSP-PA-QL	5
CIMZIA STARTER INJ KIT (QL= 1 kit/plan year)	LPSP-PA-QL	5
DELZICOL CAP	-	NC
PENTASA CAP	-	NC
REMICADE INJ	-	NC
INTESTINAL ACIDIFIERS		
lactulose soln	-	2
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
LINZESS CAP	PA	3
alosetron tab (LOTRONEX equiv)	PA	5
VIBERZI TAB	-	NC
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		

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DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
MOVANTIK TAB	PA	3
RELISTOR INJ	-	NC
RELISTOR INJ KIT	-	NC
RELISTOR TAB	-	NC
SYMPROIC TAB	-	NC
PHOSPHATE BINDER AGENTS		
calcium acetate cap (PHOSLO equiv)	-	2
calcium acetate tab (ELIPHOS equiv)	-	2
lanthanum carbonate chew tab (FOSRENOL equiv)	-	2
sevelamer hydrochloride tab (RENAGEL equiv)	-	2
sevelamer powder pak (RENVELA equiv)	-	2
sevelamer tab (RENVELA TAB equiv)	-	2
FOSRENOL POWDER PACK	-	3
RENVELA TAB	-	3
SEVELAMER CARBONATE TAB	-	3
AURYXIA TAB	-	4
PHOSLYRA SOLN	-	4
RENAGEL TAB	-	4
RENAGEL TAB 800MG	-	4
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT	PA	5
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB	-	NC
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
etomidate inj	M	M
ketamine inj	M	M
propofol inj	M	M
KETAMINE HCL TROCHES	-	NC
VOLATILE ANESTHETICS		
compound 347 liquid	-	2
isoflurane soln	-	2
sevoflurane soln	-	2
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
CYTRA-3 SYRUP	-	2
potassium citrate CR tab (UROKIT-K TAB equiv)	-	2
potassium citrate/citric acid soln (POLYCITRA-K equiv)	-	2
tricitrates soln (POLYCITRA-LC equiv)	-	2
ORACIT SOLN	-	4
CYSTINOSIS AGENTS		
CYSTAGON CAP (Only available through CVS Specialty 800-238-7828)	LD	5
PROCYSBI CAP	-	NC
PROCYSBI GRANULES PACKET	-	NC
GENITOURINARY IRRIGANTS		

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DrugName	Special Code	Tier
GENITOURINARY AGENTS - MISCELLANEOUS Cont.		
acetic acid solution	-	2
aminoac acid solution	-	2
neo/poly gu sol	-	2
NEO/POLY GU SOLN	-	2
sodium chloride 0.9% irr soln	-	2
SORBITOL IRRIGATION	-	2
SORBITOL/MANNITOL SOLN	-	2
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP	-	3
PENTOSAN CAP	-	NC
PROSTATIC HYPERTROPHY AGENTS		
alfuzosin SR tab (UROXATRAL equiv)	-	2
dutasteride cap (AVODART equiv)	-	2
dutasteride/tamsulosin cap (JALYN equiv)	-	2
finasteride tab (PROSCAR equiv)	-	2
silodosin cap (RAPAFLO equiv)	-	2
tamsulosin cap (FLOMAX equiv)	-	2
RAPAFLO CAP	-	3
CARDURA XL TAB	-	4
AVODART CAP	-	NC
URINARY ANALGESICS		
phenazopyridine tab (PYRIDIUM equiv)	-	2
URINARY STONE AGENTS		
THIOLA EC TAB	-	NC
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
colchicine/probenecid tab (COL-BENEMID equiv)	-	2
DUZALLO TAB	-	NC
GOUT AGENTS		
allopurinol tab (ZYLOPRIM equiv)	-	1
febuxostat tab (ULORIC equiv)	¢	2
MITIGARE CAP	-	3
ULORIC TAB	-	3
allopurinol inj	M	M
KRYSTEXXA INJ	M	M
COLCHICINE CAP	-	NC
colchicine tab (COLCRYS equiv)	-	NC
COLCRYS TAB	-	NC
GLOPERBA SOLN	-	NC
ZURAMPIC TAB	-	NC
URICOSURICS		
probenecid tab (BENEMID equiv)	-	2
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		
HEMLIBRA INJ	LPSP-PA	5

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DrugName	Special Code	Tier
HEMATOLOGICAL AGENTS - MISC. Cont.		
ADVATE INJ	M	M
ADVATE INJ 4000UNIT	M	M
BENEFIX INJ	M	M
CORIFACT KIT	M	M
FEIBA VH INJ	M	M
HEMOPIL M INJ	M	M
HUMATE-P INJ	M	M
KOGENATE FS INJ	M	M
MONOCLATE-P INJ	M	M
MONONINE INJ	M	M
NOVOSEVEN RT INJ	M	M
PROFILNINE INJ	M	M
RECOMBINATE INJ	M	M
RIASTAP	M	M
XYNTHA INJ	M	M
AFSTYLA KIT	-	NC
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR INJ	M	M
icatibant inj (FIRAZYR equiv)	M	M
COMPLEMENT INHIBITORS		
CINRYZE INJ	M	M
SOLIRIS INJ	M	M
BERINERT INJ	-	NC
HAEGARDA INJ	-	NC
RUCONEST INJ	-	NC
HEMATOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB	-	NC
HEMATORHEOLOGIC AGENTS		
pentoxifylline ER tab (TRENTAL equiv)	-	2
HUMAN PROTEIN C		
CEPROTIN INJ	M	M
PLASMA EXPANDERS		
DEXTRAN 40/D5W INJ	M	M
DEXTRAN 70 INJ	M	M
hetastarch inj	M	M
PLASMA KALLIKREIN INHIBITORS		
KALBITOR INJ	M	M
TAKHZYRO INJ	-	NC
PLASMA PROTEINS		
albuminar-5 inj	M	M
THROMBAT III INJ	M	M
PLATELET AGGREGATION INHIBITORS		
anagrelide cap (AGRYLIN equiv)	-	2
aspirin/dipyridamole cap (AGGRENEX equiv)	-	2
cilostazol tab (PLETAL equiv)	-	2

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HEMATOLOGICAL AGENTS - MISC. Cont.		
clopidogrel tab (PLAVIX equiv)	-	2
dipyridamole tab (PERSANTINE equiv)	-	2
prasugrel tab (EFFIENT equiv)	-	2
TICLOPIDINE TAB	-	2
ticlopidine tab (TICLID equiv)	-	2
BRILINTA TAB	-	4
ZONTIVITY TAB (Restricted to Cardiology Specialist)	PA	4
AGGRASTAT INJ	M	M
eptifibatide inj (INTEGRILIN equiv)	M	M
AGGRENOX CAP	-	NC
ASPIRIN/OMEPRAZOLE ER TAB	-	NC
CABLIVI INJ KIT	-	NC
CLOPIDOGREL THERAPY PACK	-	NC
YOSPRALA TAB	-	NC

PROTAMINE

PROTAMINE SULFATE SOLN	M	M
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HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

miglustat cap (ZAVESCA equiv) (Only available through Accredo 888-773-7376)	LD-PA	5
ZAVESCA CAP (Only available through Accredo 888-773-7376)	LD-PA	5
CEREZYME INJ	M	M
ELELYSO INJ	M	M
VPRIV INJ	M	M

AGENTS FOR SICKLE CELL ANEMIA

DROXIA CAP	SP	5
ENDARI POWDER PACK	-	NC
OXBRYTA TAB	-	NC
SIKLOS TAB	-	NC

COBALAMINS

cyanocobalamin inj	-	2
HYDROXOCOBALAMIN INJ	M	M
CALOMIST NASAL SPRAY	-	NC
NASCOBAL NASAL SPRAY	-	NC

FOLIC ACID/FOLATES

folic acid tab 1mg (Covered at \$0 for females only; All other members covered at generic copay)	-	6
folic acid tab 400mcg (Covered for females only)	OTC	6
folic acid tab 800mcg (Covered for females only)	OTC	6
folic acid inj (FOLIC ACID equiv)	M	M
folic acid cap 800mcg	OTC	NC

HEMATOPOIETIC GROWTH FACTORS

PROMACTA TAB 12.5MG	-	3
ARANESP INJ (Step Therapy requires trial of EPOGEN or PROCRIT)	LPSP-ST	5
DOPTELET TAB (QL= 2 tabs/day; Only available through PantherRx Pharmacy 855-726-8479)	LD-PA-QL	5
EPOGEN INJ	LPSP-PA	5
FULPHILA INJ	LPSP-PA	5

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HEMATOPOIETIC AGENTS Cont.		
LEUKINE INJ	LPSP-PA	5
MULPLETA TAB (QL= 7 tabs/fill)	LPSP-PA-QL	5
NEULASTA INJ	LPSP-PA	5
NEUMEGA INJ	LPSP-PA	5
NIVESTYM INJ	LPSP	5
PROCRIT INJ	LPSP-PA	5
PROMACTA TAB	LPSP-PA	5
UDENYCA INJ	LPSP	5
ZARXIO INJ	LPSP	5
ZIEXTENZO INJ	PSP	5
NPLATE INJ	M	M
OMONTYS INJ	M	M
GRANIX INJ	-	NC
MIRCERA INJ	-	NC
NEUPOGEN INJ	-	NC
PROMACTA POWDER	-	NC
REBLOZYL INJ	-	NC
RETACRIT INJ	-	NC
HEMATOPOIETIC MIXTURES		
multivitamin tab	-	1
B6 FOLIC ACD CAP	-	2
BP VIT 3 CAP	-	2
FERRAPLUS 90 TAB	-	2
ferrex 150 forte cap	-	2
ferrogels fo cap forte	-	2
folbee tab	-	2
folbee tab (FOLGARD RX equiv)	-	2
hemoycte-f tab	-	2
TANDEM F CAP	-	2
tricon cap (TRINSICON equiv)	-	2
FOLTRATE TAB	-	3
NEPHRON FA TAB	-	3
B-SERENE PAD	-	NC
FOLITE TAB	-	NC
folvite-d tab (GENICIN equiv)	-	NC
FOLVITE-FE TAB	-	NC
MULTIGEN FOLIC TAB	-	NC
MULTIGEN PLUS TAB	-	NC
MULTIGEN TAB	-	NC
OVEEZA CAP	-	NC
PUREFOLIX TAB	-	NC
REVESTA CAP	-	NC
IRON		
FERRETTTS IPS SOLN	-	6
ferretts tab	-	6
ferrex 150 cap	-	6

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
HEMATOPOIETIC AGENTS Cont.		
FERRIMIN 150 TAB	-	6
ferrous gluconate tab	-	6
ferrous sulfate CR tab	-	6
ferrous sulfate EC tab	OTC	6
ferrous sulfate elixir (Covered for members 1 year or younger)	OTC	6
FERROUS SULFATE LIQUID (Covered for members 1 year or younger)	OTC	6
ferrous sulfate soln (Covered for members 1 year or younger)	OTC	6
FERROUS SULFATE SYRUP (Covered for members 1 year or younger)	OTC	6
ferrous sulfate tab	-	6
IRON SUSP (Covered for members 1 year or younger)	OTC	6
NOVAFERRUM DROP 15MG/ML	-	6
PROFE CAP 180MG	OTC	6
PROFERRIN ES TAB	-	6
SLOW RELEASE IRON TAB	-	6
SM IRON TAB	-	6
wee care susp	-	6
dexferrum inj	M	M
sodium ferric gluconate complex in sucrose inj	M	M
VENOFER INJ	M	M
FERRLECIT INJ	-	NC

STEM CELL MOBILIZERS

MOZOBIL INJ	LPSP-M	M
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HEMOSTATICS

HEMOSTATICS - SYSTEMIC

aminocaproic acid soln (AMICAR equiv)	-	2
aminocaproic acid syrup (AMICAR equiv)	-	2
aminocaproic acid tab (AMICAR equiv)	-	2
tranexamic acid tab (LYSTEDA equiv)	-	2
AMICAR SOLN	-	3
AMICAR TAB	-	3
aminocaproic acid inj	M	M
tranexamic acid inj	M	M
AMICAR SYRUP	-	NC

HYPNOTICS

NON-BARBITURATE HYPNOTICS

zolpidem tab (AMBIEN equiv) (QL= 1 tab/day)	QL	2
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OREXIN RECEPTOR ANTAGONISTS

BELSOMRA TAB	-	NC
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HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS

ANTIHISTAMINE HYPNOTICS

diphenhydramine cap 50mg (BENADRYL equiv) (Only 50mg covered)	-	2
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BARBITURATE HYPNOTICS

phenobarbital elixir	-	2
phenobarbital tab	-	2
phenobarbital sodium inj	M	M

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HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS Cont.		
HYPNOTICS - TRICYCLIC AGENTS		
doxepin tab (SILENOR equiv) (QL= 1 tab/day)	QL	3
SILENOR TAB (QL= 1 tab/day)	QL	4
NON-BARBITURATE HYPNOTICS		
estazolam tab (PROSOM equiv)	-	2
eszopiclone tab (LUNESTA equiv) (QL= 1 tab/day)	QL	2
FLURAZEPAM CAP	-	2
temazepam cap 15mg (RESTORIL equiv)	-	2
temazepam cap 22.5mg (RESTORIL equiv)	-	2
temazepam cap 30mg (RESTORIL equiv)	-	2
temazepam cap 7.5mg (RESTORIL equiv)	-	2
triazolam tab (HALCION equiv)	-	2
zaleplon cap (QL= 1 cap/day)	QL	2
zaleplon cap (QL= 2 caps/day)	QL	2
zolpidem ER tab (AMBIEN CR equiv) (QL= 1 tab/day)	QL	2
zolpidem tartrate SL tab (INTERMEZZO equiv) (QL= 1 tab/day)	QL	2
EDLUAR SL TAB (QL= 1 tab/day)	QL	4
midazolam inj	M	M
AMBIEN TAB	-	NC
OREXIN RECEPTOR ANTAGONISTS		
DAYVIGO TAB	-	NC
SELECTIVE MELATONIN RECEPTOR AGONISTS		
ramelteon tab (ROZEREM equiv) (QL= 1 tab/day)	QL	2
ROZEREM TAB (QL= 1 tab/day)	QL	4
LAXATIVES		
LAXATIVE COMBINATIONS		
gavilyte-h kit	-	2
CLENPIQ SOLN	-	3
COLYTE SOLN	-	3
GOLYTELY PACKET	-	3
HALFLYTELY BOWEL PREP KIT	-	3
SUPREP SOLN (Step Therapy requires trial of CLENPIQ)	ST	3
MOVIPREP SOLN (Step Therapy requires trial of CLENPIQ)	ST	4
GAVILYTE-C SOLN (Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay)	QL	6
peg 3350/electrolytes soln (GOLYTELY/COLYTE equiv) (Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay)	QL	6
trilyte soln (NULYTELY equiv) (Covered at \$0 for members 50-75 years, all other members covered at generic copay; Limited to 2 fills/calendar year)	QL	6
PLENVU SOLN	-	NC
PREPOPIK PAK	-	NC
LAXATIVES - MISCELLANEOUS		
LACTULOSE PACK	-	2
lactulose soln	-	2
polyethylene glycol 3350 powder (MIRALAX equiv)	-	2
KRISTALOSE PACK	-	3

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LAXATIVES Cont.		
KRISTALOSE PACKET	-	3
GIALAX KIT	-	NC
SALINE LAXATIVES		
OSMOPREP TAB	-	4
VISICOL TAB	-	4
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETIC COMBINATIONS		
bupivacaine/epinephrine inj	M	M
lidocaine/epinephrine inj	M	M
ROPIVACAINE/CLONIDINE/KETOROLAC INJ	-	NC
LOCAL ANESTHETICS - AMIDES		
bupivacaine inj	M	M
lidocaine inj	M	M
LIDOCAINE INJ 4%	M	M
LIDOCAINE/DEXTROSE INJ	M	M
MEPIVACAINE INJ	M	M
polocaine inj	M	M
LOCAL ANESTHETICS - ESTERS		
chloroprocaine inj	M	M
TETRACAINE INJ	M	M
MACROLIDES		
AZITHROMYCIN		
azithromycin susp (ZITHROMAX equiv)	-	2
azithromycin tab (ZITHROMAX equiv)	-	2
ZITHROMAX POWDER PACK	-	2
ZITHROMAX POWDER PACK	-	4
azithromycin inj	M	M
CLARITHROMYCIN		
clarithromycin ER tab (BIAXIN XL equiv) (QL= 28 tabs/30 days)	QL	2
CLARITHROMYCIN SUSP	-	2
clarithromycin susp (BIAXIN equiv)	-	2
clarithromycin tab (BIAXIN equiv)	-	2
ERYTHROMYCINS		
erythromycin DR cap (ERYC equiv)	-	2
ERYTHROMYCIN EC CAP	-	2
erythromycin ethylsuccinate susp	-	2
ERYTHROMYCIN ETHYLSUCCINATE TAB	-	2
erythromycin stearate tab	-	2
erythromycin tab (ERY-TAB equiv)	-	2
erythromycin tab (ERYTHROMYCIN equiv) (all forms except PCE)	-	2
PCE TAB	-	4
ERYTHROCIN INJ	M	M
ERYPED SUSP	-	NC
erythromycin ethylsuccinate susp (ERYPED equiv)	-	NC
FIDAXOMICIN		

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DrugName	Special Code	Tier
MACROLIDES Cont.		
DIFICID TAB (QL= 20 tabs/30 days; Step Therapy requires trial of vancomycin cap, vancomycin soln, or FIRVANQ SOLN)	QL-ST	3

MEDICAL DEVICES AND SUPPLIES

CONTRACEPTIVES

CERVICAL CAP	-	6
DIAPHRAGM	-	6
FEMALE CONDOMS	OTC	6

DIABETIC SUPPLIES

GLUCOCARD EXPRESSION CONTROL SOLUTION	OTC	1
GLUCOCARD EXPRESSION METER	OTC	1
GLUCOCARD SHINE CONTROL SOLUTION	OTC	1
GLUCOCARD SHINE METER	OTC	1
MULTI-LANCET DEVICE 2	OTC	1
TECHLITE LANCET 28G	OTC	1
TECHLITE LANCET 30G	OTC	1
TRUPLUS LANCET	OTC	1
LANCET DEVICE	-	3
LANCET KIT	-	3
LANCETS	-	3
CALIBRATION LIQUID	OTC	NC
DEXCOM G6 RECEIVER	-	NC
DEXCOM G6 SENSOR	-	NC
DEXCOM G6 TRANSMITTER	-	NC
DIABETIC METER	-	NC
FREESTYLE LIBRE RECEIVER	-	NC
FREESTYLE LIBRE SENSOR (10-DAY)	-	NC
FREESTYLE LIBRE SENSOR (14-DAY)	-	NC
OMNIPOD 5 PACK PODS	-	NC
OMNIPOD DASH PODS	-	NC
OMNIPOD STARTER KIT	-	NC
TRUE METRIX BLOOD GLUCOSE METER	OTC	NC
TRUE RESULT BLOOD GLUCOSE METER	OTC	NC
TRUEDRAW LANCING DEVICE	OTC	NC
TRUETEST CALIBRATION LIQUID	OTC	NC
V-GO INJ KIT	-	NC

MISC. DEVICES

ALCOHOL SWABS	-	3
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ORAL HYGIENE PRODUCTS

HURRISEAL MIS SNAP	-	NC
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PARENTERAL THERAPY SUPPLIES

B-D INSULIN SYRINGE	--OTC	3
B-D PEN NEEDLE	OTC	3
FREESTYLE INSULIN SYRINGE	-	3
NOVOFINE PEN NEEDLE	OTC	3
NOVOTWIST PEN NEEDLE	OTC	3
NOVOTWIST/NOVOFINE PEN NEEDLE	OTC	3
INSULIN SYRINGE	-	NC

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MEDICAL DEVICES AND SUPPLIES Cont.		
INSULIN SYRINGE (all other brands)	-	NC
PEN NEEDLE (all other Brands)	OTC	NC
RESPIRATORY THERAPY SUPPLIES		
AEROCHAMBER	-	2
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AJOVY INJ	-	NC
MIGRAINE COMBINATIONS		
ergotamine tartrate/caffeine tab (CAFERGOT equiv)	-	3
ACETAMINOPHEN/ISOMETHEPTENE/DICHLORAL CAP	-	NC
acetaminophen/isometheptene/dichloral cap (MIDRIN equiv)	-	NC
ISOMETHEPTENE/CAFFEINE/ACETAMINOPHEN TAB	-	NC
sumatriptan/naproxen tab (TREXIMET equiv)	-	NC
TREXIMET TAB	-	NC
MIGRAINE PRODUCTS		
dihydroergotamine mesylate nasal spray (MIGRANAL equiv) (QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2
ERGOMAR SUB	-	3
MIGRANAL SPRAY (QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4
dihydroergotamine mesylate inj (D.H.E. equiv)	-	NC
MIGRAINE PRODUCTS - MONOCLONAL ANTIBODIES		
AIMOVIG INJ (QL= 1 pack/28 days)	PA-QL	3
EMGALITY INJ (QL= 1 inj/28 days)	PA-QL	3
EMGALITY INJ 100MG/ML (QL= 3 inj/fill, 6 fills/year)	PA-QL	3
AJOVY INJ	-	NC
NURTEC ODT	-	NC
UBRELVY TAB	-	NC
SEROTONIN AGONISTS		
eletriptan tab (RELPAZ equiv) (QL= 9 tabs/30 days)	QL	2
naratriptan tab (AMERGE equiv) (QL= 9 tabs/30 days)	QL	2
rizatriptan ODT (MAXALT equiv) (QL= 9 tabs/30 days)	QL	2
rizatriptan tab (MAXALT equiv) (QL= 9 tabs/30 days)	QL	2
sumatriptan inj (IMITREX equiv) (QL= 10 inj/30 days)	QL	2
SUMATRIPTAN INJ 6MG/0.5ML (QL= 5 inj/30 days)	QL	2
sumatriptan nasal spray (IMITREX, SUMATRIPTAN equiv) (QL= 18 sprays/30 days)	QL	2
sumatriptan tab (IMITREX equiv) (QL= 9 tabs/30 days)	QL	2
sumatriptan vial inj (IMITREX equiv) (QL= 10 inj/30 days)	QL	2
zolmitriptan ODT (ZOMIG equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2
zolmitriptan tab (ZOMIG equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	2
almotriptan tab (AXERT equiv) (QL= 12 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4
ALSUMA INJ (QL= 10 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4
frovatriptan tab (FROVA equiv) (QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan, or rizatriptan)	QL-ST	4
SUMAVEL DOSEPRO INJ (QL= 6 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4
ZOMIG NASAL SPRAY (QL= 18 sprays/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan)	QL-ST	4
AXERT TAB	-	NC

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MIGRAINE PRODUCTS Cont.		
FROVA TAB	-	NC
IMITREX NASAL SPRAY, SUMATRIPTAN NASAL SPRAY	-	NC
ONZETRA XSAIL	-	NC
REYVOW TAB	-	NC
TOSYMRA SOLN	-	NC
ZECUITY PAD	-	NC
ZEMBRACE SYMTOUCH INJ	-	NC

MINERALS & ELECTROLYTES

BICARBONATES

sodium acetate inj	M	M
SODIUM BICARBONATE INJ	M	M
sodium lactate inj	M	M

CALCIUM

calcium chloride inj	M	M
calcium gluconate inj	M	M

CHLORIDE

AMMONIUM CHLORIDE INJ	M	M
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ELECTROLYTE MIXTURES

DEXTROSE/ELECTROLYTES INJ	M	M
dextrose/lactated ringers inj	M	M
DEXTROSE/NACL INJ	M	M
dextrose/ringers inj	M	M
dextrose/sodium chloride inj	M	M
isolyte-m inj	M	M
ISOLYTE-S INJ	M	M
kcl/d5w inj	M	M
KCL/D5W/LACTATED RINGERS INJ	M	M
KCL/D5W/NACL INJ	M	M
kcl/dextrose/sodium chloride inj	M	M
LACTATED RINGERS INJ	M	M
NORMOSOL-M INJ	M	M
NORMOSOL-R INJ	M	M
NORMOSOL-R/DEXTROSE INJ	M	M
PLASMA-LYTE A INJ	M	M
PLASMA-LYTE INJ	M	M
POTASSIUM CHLORIDE INJ	M	M
POTASSIUM CHLORIDE/NACL INJ	M	M
ringers inj	M	M

FLUORIDE

FLUOR-A-DAY CHEW TAB	-	3
FLUORABON SOLN (Covered at \$0 for members 5 years or younger; All other members covered at preferred brand copay)	-	6
LURIDE SOLN (Covered at \$0 for members 5 years or younger; All other members covered at non-preferred brand copay)	-	6
LURIDE TAB (Covered at \$0 for members 5 years or younger; All other members covered at non-preferred brand copay)	-	6

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SODIUM FLUORIDE LOZENGE (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6
sodium fluoride soln (LURIDE SOLN equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6
SODIUM FLUORIDE TAB (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6
sodium fluoride tab (LURIDE equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6
IODINE PRODUCTS		
IODINE STRONG SOLN	-	2
MAGNESIUM		
MAGNEBIND TAB	-	4
MAGNESIUM CHLORIDE INJ	M	M
magnesium sulfate inj	M	M
magnesium sulfate/D5W inj	M	M
MAGNESIUM SULFATE INJ	-	NC
MAGNESIUM SULFATE/D5W INJ	-	NC
MANGANESE		
MANGANESE CHLORIDE INJ	M	M
MANGANESE SULFATE INJ	M	M
PHOSPHATE		
phospha 250 neutral tab (K-PHOS NEUTRAL equiv)	-	2
POTASSIUM PHOSPHATE INJ	M	M
sodium phosphate inj	M	M
POTASSIUM		
POT/CHLORIDE EFFER TAB	-	2
potassium bicarbonate effer tab (K-LYTE equiv)	-	2
potassium chloride effer tab (K-LYTE/CL equiv)	-	2
potassium chloride ER cap (MICRO-K equiv)	-	2
potassium chloride ER tab (K-TAB equiv)	-	2
potassium chloride micro tab (K-DUR equiv)	-	2
potassium chloride powder packet (KLOR-CON equiv)	-	2
potassium chloride soln	-	2
EFFER-K TAB	-	3
KLOR-CON M15 TAB	-	4
potassium acetate inj	M	M
POTASSIUM CHLORIDE INJ	M	M
SODIUM		
normal saline flush inj	M	M
sodium chloride inj	M	M
sodium chloride inj 0.45%	M	M
TRACE MINERALS		
AMMONIUM MOLYBDATE INJ	M	M
CHROMIUM CHLORIDE INJ	M	M
COPPER SULFATE INJ	M	M
CUPRIC CHLORIDE INJ	M	M
SELENIUM INJ	M	M

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MINERALS & ELECTROLYTES Cont.		
ZINC		
zinc sulfate cap	-	2
GALZIN CAP	-	4
ZINC SULFATE INJ	M	M
ZINC TRACE INJ	M	M
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
penicillamine tab (DEPEN TITRATAB equiv)	-	2
penicillamine cap (CUPRIMINE equiv)	-	2
CUPRIMINE CAP	-	3
DEPEN TITRATAB	-	4
trientine cap (SYPRINE equiv)	PA-PSP	5
IMMUNOSUPPRESSIVE AGENTS		
everolimus tab 0.25mg, 0.5mg, 0.75mg (ZORTRESS equiv)	-	2
ZORTRESS TAB	-	4
RAPAMUNE SOLN	-	5
sirolimus soln (RAPAMUNE equiv)	-	5
ASTAGRAF XL CAP	-	NC
PROGRAF PACKET	-	NC
POTASSIUM REMOVING AGENTS		
LOKELMA PAK	PA	3
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA AUTO-INJECTOR	-	NC
BENLYSTA INJ	-	NC
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
lidocaine viscous soln	-	2
LIDOCAINE ORAL SOLN 4%	-	3
ANTIALLERGY AGENTS - MOUTH/THROAT		
APHTHASOL PASTE	-	4
ANTI-INFECTIVES - THROAT		
clotrimazole troches (MYCELEX TROCHES equiv)	-	2
nystatin susp	-	2
ORAVIG TAB	-	4
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate soln (PERIDEX equiv)	-	2
DEBACTEROL SOLN	-	NC
DENTAL PRODUCTS		
sodium fluoride gel (PREVIDENT equiv)	-	2
sodium fluoride paste (PREVIDENT equiv)	-	2
sodium fluoride rinse (PREVIDENT equiv)	-	2
sodium fluoride/potassium nitrate paste (PREVIDENT equiv)	-	2
stannous fluoride conc	-	2

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DrugName	Special Code	Tier
MOUTH/THROAT/DENTAL AGENTS Cont.		
PREVIDENT 5000 PLUS CREAM (Covered at \$0 for members 5 years or younger; All other members covered at preferred brand copay)	-	6
sodium fluoride cream (PREVIDENT 5000 PLUS equiv) (Covered at \$0 for members 5 years or younger; All other members covered at generic copay)	-	6
STEROIDS - MOUTH/THROAT		
triamcinolone in orabase paste	-	2
triamcinolone in orabase paste (KENALOG/ORABASE equiv)	-	2
THROAT PRODUCTS - MISC.		
cevimeline cap (EVOXAC equiv)	-	2
pilocarpine tab (SALAGEN equiv)	-	2
MULTIVITAMINS		
B-COMPLEX W/ FOLIC ACID		
FIBRIK CAP	-	NC
MULTIPLE VITAMINS & FLUORIDE-FOLIC ACID		
MULTIVITAMIN/FLUORIDE CHEW TAB	-	NC
MULTIPLE VITAMINS W/ MINERALS		
multivitamin/minerals tab (STROVITE equiv)	-	1
BACMIN TAB	-	4
V-C FORTE CAP	-	4
REMEDIENT CAP	-	NC
MULTIVITAMINS		
M.V.I. INJ	M	M
FOLIKA-V TAB	-	NC
PED MULTI VITAMINS W/FL & FE		
pediatric multiple vitamins/fluoride/iron soln	-	1
TRI-VIT/FLOURIDE/IRON DROPS	-	1
ESCAVITE CHEW TAB	-	4
PED MV W/ FLUORIDE		
pediatric multiple vitamins/fluoride chew tab	-	1
FLORIVA PLUS DROPS	-	2
pediatric multiple vitamins/fluoride soln	-	2
POLY-VI-FLOR SUSP	-	NC
PEDIATRIC MULTIPLE VITAMINS		
INFUVITE INJ	M	M
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA CHEW TAB	-	NC
PRENATAL VITAMINS		
MYNATAL-Z TAB	-	1
RIGHT STEP PRENATAL VITAMINS	OTC	1
CONCEPT DHA CAP	-	4
PRENATABS RX TAB	-	4
PRENATAL 19 TAB	-	4
PRENATAL VITAMINS (NON-PREFERRED)	--OTC	4
VP-PNV-DHA CAP	-	4
AZESCO TAB	-	NC

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DrugName	Special Code	Tier
MULTIVITAMINS Cont.		
CITRANATAL CAP MEDLEY	-	NC
PREGENNA TAB	-	NC
PRENARA CAP	-	NC
VITAFOL STRIPS	-	NC

MUSCULOSKELETAL THERAPY AGENTS

CENTRAL MUSCLE RELAXANTS

baclofen tab 10mg, 20mg	-	1
tizanidine tab (ZANAFLEX equiv)	-	1
carisoprodol tab (SOMA equiv)	-	2
chlorzoxazone tab	-	2
CHLORZOAZONE TAB 250MG	-	2
CHLORZOAZONE TAB 250MG, LORZONE TAB	-	2
chlorzoxazone tab 500mg	-	2
CYCLOBENZAPRINE COMPOUND KIT	-	2
cyclobenzaprine ER cap (AMRIX equiv)	-	2
cyclobenzaprine tab (FLEXERIL equiv)	-	2
metaxalone tab (SKELAXIN equiv)	-	2
methocarbamol (ROBAXIN equiv)	-	2
orphenadrine citrate ER tab (NORFLEX equiv)	-	2
tizanidine cap (ZANAFLEX equiv)	-	2
baclofen inj (LIORESAL INT equiv)	M	M
LIORESAL INT INJ	M	M
orphenadrine inj	M	M
AMRIX CAP	-	NC
BACLOFEN TAB 5MG	-	NC
FIRST BACLOFEN SUSP KIT	-	NC
SOMA TAB	-	NC

DIRECT MUSCLE RELAXANTS

dantrolene cap (DANTRIUM equiv)	-	2
revonto inj	M	M

MUSCLE RELAXANT COMBINATIONS

orphenadrine/aspirin/caffeine tab (NORGESIC FORTE equiv)	-	2
NORGESIC FORTE TAB	-	4
NORGESIC TAB FORTE	-	4
CARISOPRODOL/ASPIRIN TAB	-	NC
carisoprodol/aspirin tab (SOMA COMPOUND equiv)	-	NC
CARISOPRODOL/ASPIRIN/CODEINE TAB	-	NC
carisoprodol/aspirin/codeine tab (SOMA COMPOUND/CODEINE equiv)	-	NC
LORVATUS PHARMAPAK KIT	-	NC

VISCOSUPPLEMENTS

EUFLEXXA INJ	M	M
HYALGAN INJ	M	M
ORTHOVISC INJ	M	M
SYNVISC INJ	M	M

NASAL AGENTS - SYSTEMIC AND TOPICAL

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DrugName	Special Code	Tier
NASAL AGENTS - SYSTEMIC AND TOPICAL Cont.		
NASAL AGENT COMBINATIONS		
azelastine/fluticasone nasal spray (DYMISTA equiv)	-	NC
AZENASE PAK	-	NC
DYMISTA SPRAY	-	NC
NASAL AGENTS - MISC.		
ALZAIR NASAL SPRAY	-	NC
TICANASE PAK	-	NC
NASAL ANESTHETICS		
GOPRELTO SOLN	-	NC
NASAL ANTIALLERGY		
azelastine nasal spray 0.1% (ASTELIN equiv) (QL= 2 bottles/30 days)	QL	2
azelastine nasal spray 0.15% (ASTEPRO equiv) (QL= 2 bottles/30 days)	QL	2
olopatadine nasal spray (PATANASE equiv) (QL= 1 inhaler/30 days)	QL	2
NASAL ANTICHOLINERGICS		
ipratropium nasal spray (ATROVENT equiv) (QL= 60gm/30 days)	QL	2
NASAL ANTI-INFECTIVES		
BACTROBAN NASAL OINT	-	4
NASAL STEROIDS		
triamcinolone nasal spray (NASACORT equiv) (QL= 1 bottle/fill)	QL	1
budesonide nasal spray (RHINOCORT AQUA equiv) (QL= 1 bottle/30 days)	OTC-QL	2
FLUNISOLIDE NASAL SPRAY (NASAREL equiv) (QL= 2 bottles/30 days)	QL	2
fluticasone nasal spray (FLONASE equiv) (QL= 1 bottle/30 days)	QL	2
mometasone nasal spray (NASONEX equiv) (QL= 1 bottle/fill)	QL	2
BECONASE AQ NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4
QNASL NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4
ZETONNA NASAL SPRAY (QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone)	QL-ST	4
NASACORT OTC NASAL SPRAY	OTC	NC
NASONEX NASAL SPRAY	-	NC
SINUVA NASAL IMPLANT	-	NC
triamcinolone OTC nasal spray (NASACORT equiv)	OTC	NC
VERAMYST NASAL SPRAY	-	NC
XHANCE NASAL EXHALER	-	NC
SYMPATHOMIMETIC DECONGESTANTS		
TYZINE NASAL SOLN	-	4

NEUROMUSCULAR AGENTS

ALS AGENTS		
riluzole tab (RILUTEK equiv)	SP	5
TIGLUTIK SUSP	-	NC
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX INJ	M	M
DYSPOIN INJ	M	M
MYOBLOC INJ	M	M

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DrugName	Special Code	Tier																														
NEUROMUSCULAR AGENTS Cont.																																
XEOMIN INJ	M	M																														
NONDEPOLARIZING MUSCLE RELAXANTS																																
atracurium inj	M	M																														
cisatracurium inj	M	M																														
PANCURONIUM INJ	M	M																														
rocuronium inj	M	M																														
vecuronium inj	M	M																														
NUTRIENTS																																
CARBOHYDRATES																																
ALCOHOL INJ	M	M																														
dextrose inj	M	M																														
dextrose inj 5%, 10%	M	M																														
LIPIDS																																
INTRALIPID INJ	M	M																														
DOJOLVI ORAL LIQUID	-	NC																														
PROTEINS																																
acetylcysteine cap	-	2																														
aminosyn II inj	M	M																														
AMINOSYN INJ	M	M																														
CLINIMIX E INJ 4.25/D25	M	M																														
CLINIMIX INJ 4.25/D20	M	M																														
CLINIMIX INJ 4.25/D25	M	M																														
CLINIMIX/D10W INJ	M	M																														
cysteine hcl inj	M	M																														
FREAMINE III INJ	M	M																														
L-CYSTEINE INJ	M	M																														
premasol soln	M	M																														
OPHTHALMIC AGENTS																																
ARTIFICIAL TEARS AND LUBRICANTS																																
LACRISERT OPHTH INSERT	-	3																														
BETA-BLOCKERS - OPHTHALMIC																																
betaxolol ophth soln (BETOPTIC-S equiv)	-	2																														
CARTEOLOL OPHTH SOLN	-	2																														
carteolol ophth soln (OCUPRESS equiv)	-	2																														
dorzolamide/timolol (pf) ophth soln (COSOPT equiv)	-	2																														
LEVOBUNOLOL OPHTH SOLN	-	2																														
levobunolol ophth soln (BETAGAN equiv)	-	2																														
METIPRANOLOL OPHTH SOLN	-	2																														
timolol maleate ophth gel (TIMOPTIC-XE equiv)	-	2																														
timolol maleate ophth soln (TIMOPTIC equiv)	-	2																														
timolol maleate ophth soln 0.5% (ISTALOL equiv)	-	2																														
TIMOLOL OPHTH GEL SOLN	-	2																														
BETOPTIC-S OPHTH SOLN	-	3																														
COMBIGAN OPHTH SOLN	-	3																														
BETIMOL OPHTH SOLN	-	4																														
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OPHTHALMIC AGENTS Cont.		
CYCLOPLEGIC MYDRIATICS		
atropine ophth oint	-	2
atropine ophth soln (ISOPTO ATROPINE equiv)	-	2
cyclopentolate ophth soln (CYCLOGYL equiv)	-	2
homatropine ophth soln (ISOPTO HOMATROPINE equiv)	-	2
phenylephrine ophth soln (MYDFRIN equiv)	-	2
tropicamide ophth soln (MYDRIACYL equiv)	-	2
MIOTICS		
pilocarpine ophth soln (ISOPTO CARPINE equiv)	-	1
ISOPTO CARBACHOL OPHTH SOLN	-	3
PHOSPHOLINE OPHTH SOLN	-	3
PILOPINE HS OPHTH GEL	-	3
OPHTHALMIC - ANGIOGENESIS INHIBITORS		
EYLEA INJ	M	M
LUCENTIS INJ 0.5MG	M	M
LUCENTIS SOLN 0.3MG	M	M
MACUGEN INJ	M	M
OPHTHALMIC ADRENERGIC AGENTS		
apraclonidine ophth soln (IOPIDINE equiv)	-	2
brimonidine ophth soln 0.15% (ALPHAGAN P 0.15% equiv)	-	2
brimonidine ophth soln 0.2%	-	2
ALPHAGAN P OPHTH SOLN 0.1%	-	3
SIMBRINZA OPHTH SUSP	-	3
IOPIDINE OPHTH SOLN 1%	-	4
LUMIFY OPHTH SOLN	-	NC
OPHTHALMIC ANTI-INFECTIVES		
BACITRACIN OPHTH OINT	-	2
bacitracin/neomycin/polymyxin b ophth oint (NEOSPORIN equiv)	-	2
bacitracin/polymyxin b ophth oint (POLYSPORIN equiv)	-	2
ciprofloxacin ophth soln (CILOXAN equiv)	-	2
erythromycin ophth oint	-	2
gatifloxacin ophth soln (ZYMAXID equiv)	-	2
GENTAK OPHTH OINT	-	2
gentamicin ophth oint (GARAMYCIN equiv)	-	2
gentamicin ophth soln (GARAMYCIN equiv)	-	2
levofloxacin ophth soln (QUIXIN equiv)	-	2
moxifloxacin ophth soln (VIGAMOX OPHTH SOLN equiv)	-	2
NEOMYCIN/POLYMIXIN/GRAMICIDIN OPHTH SOLN	-	2
ofloxacin ophth soln (OCUFLOX equiv)	-	2
polymyxin b/trimethoprim ophth soln (POLYTRIM equiv)	-	2
SULFACET SODIUM OPHTH OINT 10%	-	2
sulfacetamide sodium ophth soln (BLEPH-10 equiv)	-	2
tobramycin ophth soln (TOBREX equiv)	-	2
TRIFLURIDINE OPHTH SOLN	-	2
trifluridine ophth soln (VIROPTIC equiv)	-	2
CILOXAN OPHTH OINT	-	3

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OPHTHALMIC AGENTS Cont.		
NATACYN OPHTH SUSP	-	3
TOBREX OPHTH OINT	-	3
AZASITE SOLN	-	4
ZIRGAN OPHTH GEL	-	4
BESIVANCE OPHTH SUSP	-	NC
MOXEZA OPHTH SOLN	-	NC
MOXEZA OPHTH SOLN 0.5%	-	NC
moxifloxacin hcl ophth soln 0.5% (MOXEZA equiv)	-	NC
MOXIFLOXACIN SOLN	-	NC
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS OPHTH EMULSION (QL= 60 unit dose vials/30 days)	PA-QL	3
CEQUA (PF) OPHTH SOLN	-	NC
CYCLOSPORINE OPHTH EMULSION	-	NC
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA OPHTH SOLN	-	NC
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA OPHTH SOLN	-	NC
ROCKLATAN OPHTH SOLN	-	NC
OPHTHALMIC LOCAL ANESTHETICS		
proparacaine ophth soln (ALCAINE equiv)	-	2
tetracaine ophth soln	-	2
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE OPHTH SOLN	-	NC
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE INJ	LPSP-M	M
OPHTHALMIC PHOTOENHANCERS		
PHOTREXA OP KIT	-	NC
PHOTREXA VISCOUS OPHTH SOLN	-	NC
OPHTHALMIC STEROIDS		
bacitracin/polymyxin/neomycin/hydrocortisone ophth oint (CORTISPORIN equiv)	-	2
dexamethasone ophth soln	-	2
fluorometholone ophth soln (FML LIQUIFILM equiv)	-	2
loteprednol ophth susp (LOTEMAX equiv)	-	2
neomycin/polymyxin/dexamethasone ophth oint (MAXITROL equiv)	-	2
neomycin/polymyxin/dexamethasone ophth soln (MAXITROL equiv)	-	2
NEOMYCIN/POLYMYXIN/HYDROCORTISONE OPHTH SOLN	-	2
PREDNISOLONE OPHTH SUSP	-	2
PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN	-	2
sulfacetamide sodium/prednisolone ophth soln (VASOCIDIN equiv)	-	2
SULFACETAMIDE/PREDNISOLONE OPHTH SOLN	-	2
tobramycin/dexamethasone ophth soln (TOBRADEX equiv)	-	2
ALREX OPHTH SUSP	-	3
BLEPHAMIDE S.O.P. OPHTH OINT	-	3
DUREZOL OPHTH EMULSION	-	3
FML S.O.P. OPHTH OINT	-	3

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OPHTHALMIC AGENTS Cont.		
LOTEMAX OPHTH SUSP	-	3
OZURDEX IMPLANT	-	3
PRED MILD OPHTH SOLN	-	3
PREDNISOLONE OPHTH SUSP	-	3
RETISERT IMPLANT	-	3
TOBRADEX OPHTH OINT	-	3
TOBRADEX ST OPHTH SUSP	-	3
ZYLET OPHTH SOLN	-	3
FLAREX OPHTH SUSP	-	4
LOTEMAX OPHTH OINT (QL= 14gm/365 days)	QL	4
PRED FORTE OPHTH SUSP	-	4
VEXOL OPHTH SUSP	-	4
DEXTENZA OPHTH INSERT	-	NC
INVELTYS OPHTH SUSP	-	NC
KLARITY-B DROPS	-	NC
KLARITY-L DROPS	-	NC
LOTEMAX SM GEL 0.38%	-	NC
PREDNISOLONE/MOXIFLOXACIN OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN OPHTH SUSP	-	NC
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SUSP	-	NC
PREDNISOLONE/MOXIFLOXACIN/KETOROLAC OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN/NEPAFENAC OPHTH SUSP	-	NC
PREDNISOLONE/NEPAFENAC OPHTH SUSP	-	NC

OPHTHALMICS - MISC.

azelastine ophth soln (OPTIVAR equiv)	-	2
balanced salt soln	-	2
bromfenac ophth soln (BROMDAY equiv)	-	2
BROMFENAC OPHTH SOLN 0.09% (TWICE DAILY)	-	2
BSS OPHTH SOLN	-	2
cromolyn ophth soln (CROLOM equiv)	-	2
diclofenac sodium ophth soln (VOLTAREN equiv)	-	2
dorzolamide ophth soln (TRUSOPT equiv)	-	2
epinastine ophth soln (ELESTAT equiv)	-	2
fluorescein w/proparacaine ophth soln (FLUORACAINE equiv)	-	2
FLURBIPROFEN OPHTH SOLN	-	2
flurbiprofen ophth soln (OCUFEN equiv)	-	2
ketorolac ophth soln (ACULAR (LS) equiv)	-	2
olopatadine ophth soln 0.1% (PATANOL equiv)	-	2
olopatadine ophth soln 0.2% (PATADAY equiv) (QL= 2.5ml/30 days)	QL	2
ACUVAIL OPHTH SOLN	-	3
AZOPT OPHTH SUSP	-	3
NEVANAC OPHTH SUSP (QL= 4 bottles/year)	QL	3
PROLENSA OPHTH SOLN	-	3
ALAMAST OPHTH SOLN	-	4
ALOCRILOPHTH SOLN	-	4
ALOMIDE OPHTH SOLN	-	4

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DrugName	Special Code	Tier
OPHTHALMIC AGENTS Cont.		
BEPREVE OPHTH SOLN	-	4
CYSTARAN OPHTH SOLN	-	4
EMADINE OPHTH SOLN	-	4
LASTACRAFT OPHTH SOLN (QL= 3ml/30 days)	QL	4
JETREA INJ	M	M
BROMSITE OPHTH SOLN	-	NC
PATADAY OPHTH SOLN	-	NC
PAZEO OPHTH SOLN 0.7%	-	NC
ZERVIATE OPHTH SOLN	-	NC
PROSTAGLANDINS - OPHTHALMIC		
bimatoprost ophth soln (QL= 2.5ml/30 days)	QL	2
latanoprost ophth soln (XALATAN equiv) (QL= 2.5ml/25 days)	QL	2
travoprost ophth soln (TRAVATAN Z equiv) (QL= 2.5ml/30 days)	QL	2
TRAVATAN Z DROPS (QL= 2.5ml/30 days)	QL	3
LUMIGAN OPHTH SOLN (QL= 2.5ml/25 days)	QL	4
ZIOPTAN OPHTH SOLN (QL= 2 bottles/day)	QL	4
VYZULTA SOLN	-	NC
XELPROS OPHTH EMULSION	-	NC
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
acetic acid otic soln (VOSOL equiv)	-	2
OTIC ANALGESICS		
omedia otic soln (AMERICAINE equiv)	-	2
OTIC ANTI-INFECTIVES		
CIPROFLOXACIN OTIC SOLN	-	2
ofloxacin otic soln (FLOXIN equiv)	-	4
OTIC COMBINATIONS		
MYOXIN SUS OTIC	-	2
neomycin/polymixin/hydrocortisone otic soln (CORTISPORIN equiv)	-	2
neomycin/polymixin/hydrocortisone otic susp (CORTISPORIN equiv)	-	2
oticin drop 1-0.1%	-	2
OTOZIN OTIC DROPS	-	2
pramoxine-HC AQ otic soln (CORTANE-B AQUEOUS equiv)	-	2
CIPRODEX OTIC SUSP	-	3
CIPRO HC OTIC SUSP	-	4
COLY-MYCIN S OTIC SUSP	-	4
antipyrine/benzocaine otic soln (AURALGAN equiv)	-	NC
CORTANE-B AQUEOUS OTIC SOLN	-	NC
otomax-HC otic soln (CORTANE-B equiv)	-	NC
OTOVEL OTIC SOLN, CIPROFLOXACIN/FLUOCINOLONE OTIC SOLN	-	NC
OTIC STEROIDS		
ACETASOL HC OTIC SOLN	-	2
acetic acid/hydrocortisone otic soln (VOSOL HC equiv)	-	2
fluocinolone otic oil (DERMOTIC equiv)	-	2

OXYTOCICS

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OXYTOCICS Cont.					
OXYTOCICS					
methylergonovine tab (METHERGINE equiv)	-	2			
methylergonovine inj (METHERGINE equiv)	M	M			
oxytocin inj (PITOCIN equiv)	M	M			
PASSIVE IMMUNIZING AGENTS					
ANTITOXINS-ANTIVENINS					
ANTIVENIN KIT LAT MACT	M	M			
ANTIVENIN MI KIT	M	M			
IMMUNE SERUMS					
CUVITRU INJ	PA-PSP	5			
HIZENTRA INJ	PA-PSP	5			
CARIMUNE INJ 3GM	M	M			
CYTOGAM INJ	M	M			
FLEBOGAMMA INJ	M	M			
GAMASTAN S/D INJ	M	M			
GAMMAGARD SD INJ	M	M			
GAMMAKED INJ	M	M			
HYPERHEP B INJ S/D	M	M			
MICRHOGAM/RHOGAM PLUS INJ	M	M			
RHOPHYLAC INJ	M	M			
MONOCLONAL ANTIBODIES					
SYNAGIS INJ	M	M			
PASSIVE IMMUNIZING AGENTS - COMBINATIONS					
HYQVIA INJ	PA-PSP	5			
PASSIVE IMMUNIZING AND TREATMENT AGENTS					
IMMUNE SERUMS					
HIZENTRA INJ	PA-PSP	5			
XEMBIFY INJ (Only available through CVS Specialty 800-237-2767)	LD-PA	5			
IMOGAM RABIES-HT INJ	M	M			
CUTAQUIG INJ	-	NC			
PENICILLINS					
AMINOPENICILLINS					
amoxicillin cap (TRIMOX equiv)	-	2			
AMOXICILLIN CHEW TAB	-	2			
amoxicillin susp (TRIMOX equiv)	-	2			
amoxicillin tab (AMOXIL equiv)	-	2			
AMPICILLIN CAP	-	2			
ampicillin cap (PRINCIPEN equiv)	-	2			
ampicillin susp (PRINCIPEN equiv)	-	2			
MOXATAG TAB	-	4			
MOXATAG TAB 775MG	-	4			
ampicillin inj	M	M			
NATURAL PENICILLINS					
PENICILLIN VK SOLN	-	2			
penicillin vk soln (VEETIDS equiv)	-	2			
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EXC M PSP SF ST	NC =Not Covered Plan Exclusion Medical Benefit Preferred Specialty Pharmacy Limited to two 15 day fills per month for first 3 months Step Therapy	LD OTC QL SMKG VAC	generic =small letters Limited Distribution Over-the-Counter Quantity Limit Smoking Cessation Vaccine Program	LPSP PA RS SP ¢	BRANDS =CAPITAL LETTERS Lumicera Preferred Specialty Pharmacy Prior Authorization Restricted to Specialist Available through Specialty Pharmacy Program RxCENTS

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PENICILLINS Cont.		
penicillin vk tab (VEETIDS equiv)	-	2
BICILLIN L-A INJ	M	M
PENICILLIN G PROCAINE INJ	M	M
PENICILLIN G SODIUM INJ	M	M
penicillin gk inj	M	M
PENICILLIN COMBINATIONS		
AMOXICILLIN/CLAVULANATE CHEW TAB	-	2
amoxicillin/clavulanate chew tab (AUGMENTIN equiv)	-	2
AMOXICILLIN/CLAVULANATE ER TAB	-	2
amoxicillin/clavulanate ER tab (AUGMENTIN XR equiv)	-	2
amoxicillin/clavulanate susp (AUGMENTIN ES equiv)	-	2
amoxicillin/clavulanate tab (AUGMENTIN equiv)	-	2
AUGMENTIN SUSP	-	3
ampicillin-sulbactam inj (UNASYN equiv)	M	M
BICILLIN C-R INJ	M	M
piperacillin/tazobactam inj (ZOSYN equiv)	M	M
TIMENTIN INJ	M	M
PENICILLINASE-RESISTANT PENICILLINS		
dicloxacillin cap (DYNAPEN equiv)	-	2
BACTOCILL/DEXTROSE INJ	M	M
nafcillin inj	M	M
oxacillin inj	M	M

PROGESTINS

DrugName	Special Code	Tier
PROGESTINS		
medroxyprogesterone tab (PROVERA equiv)	-	1
norethindrone tab (AYGESTIN equiv)	-	2
progesterone cap (PROMETRIUM equiv)	-	2
megestrol ES susp (MEGACE ES equiv)	-	4
hydroxyprogesterone inj (MAKENA equiv)	M	M
MAKENA INJ	M	M
progesterone oil inj	M	M
MEGACE ES SUSP	-	NC

PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

DrugName	Special Code	Tier
AGENTS FOR CHEMICAL DEPENDENCY		
acamprosate calcium DR tab (CAMPRAL equiv)	-	2
disulfiram tab (ANTABUSE equiv)	-	2
CAMPRAL TAB	-	4
LUCEMYRA TAB	-	NC
ANTI-CATAPLECTIC AGENTS		
XYREM SOLN (QL= 540ml/30 days; Only available through Xyrem Central Pharmacy 866-997-3688)	LD-PA-QL	5
ANTIDEMENTIA AGENTS		
donepezil ODT (ARICEPT equiv)	-	2
donepezil tab (ARICEPT equiv)	-	2
donepezil tab 23mg (ARICEPT equiv)	-	2
galantamine ER cap (RAZADYNE ER equiv)	-	2

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PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
GALANTAMINE SOLN	-	2
galantamine tab (RAZADYNE equiv)	¢	2
memantine ER cap (NAMENDA XR equiv)	-	2
memantine sol (NAMENDA equiv)	-	2
memantine tab (NAMENDA equiv)	-	2
rivastigmine cap (EXELON equiv)	-	2
rivastigmine patch (EXELON equiv)	-	2
NAMENDA XR TITRATION PACK	-	3
NAMZARIC CAP (Step Therapy requires trial of donepezil and memantine)	ST	3
NAMZARIC STARTER PACK (Step Therapy requires trial of donepezil and memantine)	ST	3
NAMENDA TAB	-	NC
COMBINATION PSYCHOTHERAPEUTICS		
CHLORDIAZEPOXIDE/AMITRIPTYLINE TAB	-	2
olanzapine/fluoxetine cap (SYMBYAX equiv)	-	2
PERPHENAZINE/AMITRIPTYLINE TAB	-	2
FIBROMYALGIA AGENTS		
SAVELLA PAK	-	3
SAVELLA TAB	-	3
HYPOACTIVE SEXUAL DESIRE DISORDER (HSDD) AGENTS		
ADDYI TAB	-	NC
VYLEESI INJ	-	NC
MOVEMENT DISORDER DRUG THERAPY		
tetrabenazine tab (XENAZINE equiv)	LPSP-PA	5
AUSTEDO TAB	-	NC
INGREZZA CAP	-	NC
INGREZZA PACK 40-80MG	-	NC
XENAZINE TAB	-	NC
MULTIPLE SCLEROSIS AGENTS		
dalfampridine ER tab (AMPYRA equiv)	LPSP	2
AMPYRA TAB	PSP	5
AUBAGIO TAB	LPSP	5
AVONEX INJ	LPSP	5
BETASERON INJ	LPSP	5
COPAXONE INJ	LPSP	5
EXTAVIA INJ	LPSP	5
GILENYA CAP	LPSP-QL	5
glatiramer inj (COPAXONE equiv)	LPSP	5
MAYZENT TAB	LPSP	5
MAYZENT TAB STARTER PACK	LPSP	5
PLEGRIDY INJ	LPSP	5
PLEGRIDY PEN INJ	LPSP	5
REBIF INJ	LPSP	5
TECFIDERA CAP	LPSP	5
TECFIDERA STARTER PACK	LPSP	5
MAVENCLAD PAK	-	NC
TYSABRI INJ	-	NC

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PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
VUMERITY CAP	-	NC
ZEPOSIA CAP	-	NC
ZEPOSIA STARTER PACK	-	NC
ZINBRYTA INJ	-	NC
POSTHERPETIC NEURALGIA (PHN) AGENTS		
GRALISE STARTER PACK	-	4
GRALISE TAB	-	4
LYRICA CR TAB	-	NC
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
LIDOTIN PAK	-	NC
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS		
fluoxetine (pmdd) tab (SARAFEM equiv)	-	NC
FLUOXETINE CAP (PMDD)	-	NC
SARAFEM TAB	-	NC
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUDEXTA CAP (QL= 2 caps/day)	PA-QL	3
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ergoloid mesylates tab (HYDERGINE equiv)	-	2
PIMOZIDE TAB	-	2
ERGOLOID MESYLATES TAB	-	4
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT TAB	-	4
SMOKING DETERRENTS		
bupropion SR tab (ZYBAN equiv) (Limited to 180 days/calendar year)	QL-SMKG	6
CHANTIX (Limited to 180 days/calendar year)	QL-SMKG	6
nicotine gum (NICORETTE equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6
NICOTINE KIT (Limited to 180 days/calendar year)	OTC-QL-SMKG	6
nicotine lozenge (COMMIT equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6
nicotine patch (NICODERM equiv) (Limited to 180 days/calendar year)	OTC-QL-SMKG	6
NICOTROL INHALER (Limited to 180 days/calendar year)	QL-SMKG	6
NICOTROL NASAL SPRAY (Limited to 180 days/calendar year)	QL-SMKG	6
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
TEGSEDI INJ (QL= 4 inj/28 days; Only available through Accredo 888-773-7376)	LD-PA-QL	5
VASOMOTOR SYMPTOM AGENTS		
BRISDELLE CAP	-	NC
paroxetine cap (BRISDELLE equiv)	-	NC
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST/PROLASTIN/ZEMAIRA INJ	M	M
GLASSIA INJ	M	M
CYSTIC FIBROSIS AGENTS		
KALYDECO PAK (QL= 2 packets/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5
KALYDECO TAB (QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5

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RESPIRATORY AGENTS - MISC. Cont.		
PULMOZYME INH SOLN	LPSP-PA	5
SYMDEKO TAB (QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416)	LD-PA-QL-SF	5
ORKAMBI GRANULES PACKET	-	NC
TRIKAFTA TAB	-	NC
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP (QL= 9 tabs/day)	LPSP-PA-QL-SF	5
ESBRIET TAB 267MG (QL= 9 tabs/day)	LPSP-PA-QL-SF	5
ESBRIET TAB 801MG (QL= 3 tabs/day)	LPSP-PA-QL-SF	5
OFEV CAP (QL= 2 caps/day; Only available through Walgreens 888-347-3416)	LD-PA-QL-SF	5
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE TAB	-	2
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA TAB	-	NC
GLYCYLCYCLINES		
tigecycline inj (TYGACIL equiv)	M	M
TYGACIL INJ	M	M
TETRACYCLINES		
doxycycline hyclate cap (VIBRAMYCIN equiv)	-	2
DOXYCYCLINE HYCLATE DR CAP	-	2
doxycycline hyclate DR tab (DORYX equiv)	-	2
doxycycline hyclate tab (VIBRATAB equiv)	-	2
doxycycline monohydrate cap (MONODOX equiv)	-	2
doxycycline monohydrate tab (ADOXA equiv)	-	2
doxycycline monohydrate tab 150mg (ADOXA equiv)	-	2
doxycycline susp (VIBRAMYCIN equiv)	-	2
minocycline cap (MINOCIN equiv)	-	2
minocycline ER tab (SOLODYN equiv)	-	2
minocycline tab (DYNACIN equiv)	-	2
morgidox cap	-	2
tetracycline cap	-	2
ALODOX KIT	-	4
demeclocycline tab (DECLOMYCIN equiv)	-	4
OCUDOX KIT	-	4
SOLODYN TAB	-	4
doxycycline hyclate inj	M	M
ACTICLATE TAB 75MG, 150MG	-	NC
DORYX MPC TAB	-	NC
doxycycline hyclate DR tab 200mg (DORYX equiv)	-	NC
doxycycline hyclate tab 75mg, 150mg (ACTICLATE equiv)	-	NC
MINOCYCLINE ER CAP	-	NC
SEYSARA TAB	-	NC
TARGADOX TAB	-	NC
THYROID AGENTS		

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ANTITHYROID AGENTS		
methimazole tab (TAPAZOLE equiv)	-	2
propylthiouracil tab	-	2
THYROID HORMONES		
SYNTHROID TAB	-	1
ARMOUR THYROID TAB, NATURE THROID TAB	-	2
liothyronine tab (CYTOMEL equiv)	-	2
np thyroid tab (ARMOUR THYROID, NATURE THROID equiv)	-	2
THYROLAR TAB	-	4
LEVOTHYROXINE INJ	M	M
levothyroxine inj (LEVOTHYROXINE equiv)	M	M
liothyronine inj (TRIOSTAT equiv)	M	M
levothyroxine tab (SYNTHROID equiv)	-	NC
TIROSINT-SOL	-	NC

TOXOIDS

TOXOID COMBINATIONS		
ADACEL/BOOSTRIX INJ	VAC	6
DIPHThERIA-TETANUS PED INJ	-	6
PENTACEL INJ	VAC	6
TETANUS/DIPHThERIA TOXOID INJ	VAC	6
TRIPEDIA INJ	-	6
KINRIX INJ	M	M
PEDIARIX INJ	M	M
TOXOIDS		
TETANUS TOXOID INJ	-	6

ULCER DRUGS

ANTISPASMODICS		
dicyclomine cap (BENTYL equiv)	-	1
dicyclomine tab (BENTYL equiv)	-	1
b-donna tab (DONNATAL equiv)	-	2
BELLADONNA ALKALOID/OPIUM SUPP	-	2
belladonna/phenobarbital tab (DONNATAL equiv)	-	2
dicyclomine soln (BENTYL equiv)	-	2
glycopyrrolate tab (ROBINUL equiv)	-	2
hyoscyamine sulfate CR tab (LEVBID equiv)	-	2
hyoscyamine sulfate elixir (LEVSIN equiv)	-	2
hyoscyamine sulfate ODT (ANASPAZ equiv)	-	2
hyoscyamine sulfate SL tab (LEVSIN equiv)	-	2
hyoscyamine sulfate soln (LEVSIN equiv)	-	2
hyoscyamine sulfate SR cap (LEVSINEX equiv)	-	2
hyoscyamine sulfate tab (LEVSIN equiv)	-	2
methscopolamine tab (PAMINE equiv)	-	2
PROPANTHELINE TAB	-	2
CANTIL TAB	-	4
CUVPOSA SOLN	-	4

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ULCER DRUGS Cont.		
SYMAX DUOTAB	-	4
ATROPEN INJ	M	M
ATROPINE SUL INJ	M	M
atropine sul inj (ATROPINE equiv)	M	M
ATROPINE SULFATE INJ	M	M
dicyclomine inj (BENTYL equiv)	M	M
glycopyrrolate inj (ROBINUL equiv)	M	M
SCOPOLAMINE INJ	M	M
chlordiazepoxide/clidinium cap (LIBRAX equiv)	-	NC
DONNATAL ELIXIR	-	NC
DONNATAL EXTENTABS	-	NC
DONNATAL TAB	-	NC
pb-belladonna elixir (DONNATAL equiv)	-	NC
H-2 ANTAGONISTS		
cimetidine tab (TAGAMET equiv)	-	1
famotidine tab (PEPCID equiv)	-	1
CIMETIDINE SOLN	-	2
famotidine susp (PEPCID equiv)	-	2
nizatidine cap (AXID equiv)	-	2
NIZATIDINE SOLN	-	2
famotidine inj (PEPCID equiv)	M	M
FAMOTIDINE PREMIXED INJ	M	M
ranitidine cap (ZANTAC equiv)	-	NC
ranitidine syrup (ZANTAC equiv)	-	NC
ranitidine tab (Rx Only) (ZANTAC equiv)	-	NC
MISC. ANTI-ULCER		
sucralfate tab (CARAFATE equiv)	-	2
PROTON PUMP INHIBITORS		
omeprazole cap (QL= 2 caps/day)	QL	1
esomeprazole cap (NEXIUM equiv) (QL= 1 cap/day)	QL	2
lansoprazole cap (PREVACID equiv) (Rx Only; QL= 2 caps/day)	QL	2
pantoprazole EC tab (PROTONIX equiv) (QL= 2 tabs/day)	QL	2
rabeprazole EC tab (ACIPHEX equiv) (QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	QL-ST	2
LANSOPRAZOLE SUSP	-	4
NEXIUM GRANULE PACK (Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	ST	4
pantoprazole inj (PROTONIX equiv)	M	M
DEXILANT CAP	-	NC
ESOMEPRAZOLE STRONTIUM CAP	-	NC
NEXIUM 24HR TAB	-	NC
PRILOSEC OTC DR TAB	OTC	NC
PROTONIX INJ	-	NC
ULCER DRUGS - PROSTAGLANDINS		
misoprostol tab (CYTOTEC equiv)	-	2
ULCER THERAPY COMBINATIONS		
lansoprazole/amoxicillin/clarithromycin kit (PREVPAC equiv)	-	2

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ST	Step Therapy	VAC	Vaccine Program	¢	RxCENTS

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DrugName	Special Code	Tier
ULCER DRUGS Cont.		
PYLERA CAP	-	3
OMECLAMOX-PAK	-	4
HELIDAC PACK	-	NC
omeprazole/sodium bicarbonate cap (ZEGERID equiv)	-	NC
omeprazole/sodium bicarbonate powder pack (ZEGERID equiv)	-	NC
ZEGERID POWDER PACK	-	NC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
GLYCATE TAB, GLYCOPYRROLATE TAB	-	NC
hyoscyamine inj (LEVSIN equiv)	-	NC
H-2 ANTAGONISTS		
NIZATIDINE CAP	-	2
RANITIDINE INJ	M	M
MISC. ANTI-ULCER		
sucralfate susp (CARAFATE equiv)	-	2
CARAFATE SUSP	-	3
PROTON PUMP INHIBITORS		
esomeprazole DR granule pack (NEXIUM equiv) (Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	ST	2
lansoprazole odt (PREVACID SOLUTAB equiv) (QL= 1 tab/day)	QL	2
NEXIUM GRANULE PACK (Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	ST	4
PREVACID SOLUTAB (QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole)	QL-ST	4
ACIPHEX SPRINKLE CAP 10MG, RABEPRAZOLE SPRINKLE CAP 10MG	-	NC
omeprazole magnesium DR tab 20mg (PRILOSEC equiv)	OTC	NC
omeprazole tab	-	NC
PRILOSEC OTC DR TAB	OTC	NC
ULCER THERAPY COMBINATIONS		
TALICIA CAP	-	NC

URINARY ANTI-INFECTIVES

URINARY ANTI-INFECTIVE COMBINATIONS		
hyophen tab (PROSED DS equiv)	-	2
phosphasal tab	-	2
ustell cap	-	2
HYOPHEN TAB	-	NC
UTA cap	-	NC
URINARY ANTI-INFECTIVES		
methenamine hippurate tab (HIPREX equiv)	-	2
methenamine mandelate tab	-	2
nitrofurantoin macrocrystals cap (MACRODANTIN equiv)	-	2
nitrofurantoin macrocrystals cap 25mg (MACRODANTIN equiv)	-	2
nitrofurantoin monohydrate cap (MACROBID equiv)	-	2
nitrofurantoin susp (FURADANTIN equiv)	-	2
MONUROL GRANULE PACK	-	4
MACRODANTIN CAP 25MG	-	NC

URINARY ANTISPASMODICS

URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLIN) (NEW)					
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DrugName	Special Code	Tier
URINARY ANTISPASMODICS Cont.		
tropium chloride SR cap (SANCTURA XR equiv)	-	2
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
oxybutynin ER tab (DITROPAN XL equiv)	-	1
oxybutynin tab (DITROPAN equiv)	-	1
darifenacin SR tab (ENABLEX equiv)	-	2
oxybutynin syrup	-	2
solifenacin tab (VESICARE equiv)	-	2
tolterodine SR cap (DETROL LA equiv)	-	2
tolterodine tab (DETROL equiv)	¢	2
tropium tab (SANCTURA equiv)	-	2
GELNIQUE	-	3
OXYTROL PATCH (QL= 8 patches/30 days)	QL	3
VESICARE TAB	-	3
GELNIQUE	-	4
TOVIAZ TAB	-	4
URINARY ANTISPASMODIC COMBINATIONS		
phenazopyridine plus tab (PYRIDIUM equiv)	-	2
URELIEF PLUS TAB	-	2
URINARY ANTISPASMODICS		
hyoscyamine tab (LEVSIN equiv)	-	2
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ TAB	-	4
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
bethanechol tab (URECHOLINE equiv)	-	2
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS (NEW)		
flavoxate tab (URISPAS equiv)	-	2

VACCINES

BACTERIAL VACCINES		
ACTHIB INJ	VAC	6
BEXSERO INJ	VAC	6
BIOTHRAX INJ	VAC	6
MENACTRA INJ	VAC	6
MENHIBRIX INJ	VAC	6
MENOMUNE INJ	VAC	6
MENVEO INJ	VAC	6
PEDVAX HIB INJ	VAC	6
PNEUMOVAX INJ (QL= 1 vaccine/lifetime)	QL-VAC	6
PREVNAR 13 INJ (QL= 1 vaccine/lifetime)	QL-VAC	6
TRUMENBA INJ	VAC	6
TYPHIM VI INJ	VAC	6
VAXCHORA SUSP	VAC	6
VIVOTIF CAP	VAC	6
MIXED VACCINE COMBINATIONS		
COMVAX INJ	VAC	6
VIRAL VACCINES		

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DrugName	Special Code	Tier
VACCINES Cont.		
AFLURIA INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
AFLURIA INJ, FLUZONE INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
CERVARIX INJ	VAC	6
ENGERIX-B INJ	VAC	6
ENGERIX-B INJ, RECOMBIVAX-HB INJ	VAC	6
FLUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUAD QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUBLOK INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUBLOK QUAD PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUCELVAX INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUCELVAX QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLULAVAL QUAD INJ, FLUZONE QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUMIST QUADRIVALENT NASAL SUSP (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUVIRIN INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUVIRIN PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE HD PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE HIGH DOSE PF INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE INTRADERMAL INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE QUADRIVALENT INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE SPLIT QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
FLUZONE/FLUARIX QUAD INJ (QL= 2 vaccines/calendar year)	QL-VAC	6
GARDASIL 9 INJ	VAC	6
GARDASIL INJ	VAC	6
HAVRIX INJ, VAQTA INJ	VAC	6
HEPLISAV-B INJ	VAC	6
IMOVAX RABIES INJ	VAC	6
INFLUENZA H1N1 INJ	VAC	6
IPOLE INJ	VAC	6
IXIARO INJ	VAC	6
JE-VAX INJ	VAC	6
M-M-R II INJ	VAC	6
PROQUAD INJ	VAC	6
RABAVERT INJ	VAC	6
ROTARIX SUS	VAC	6
ROTATEQ SUS	VAC	6
SHINGRIX INJ (Covered for members age 50 or older)	VAC	6
STAMARIL INJ	VAC	6
TWINRIX INJ	VAC	6
VARIVAX INJ	VAC	6
YF-VAX INJ	VAC	6
ZOSTAVAX INJ (Covered at Tier 4 for members 50 years through 59 years. Covered at \$0 for members 60 years or older)	VAC	6

VAGINAL AND RELATED PRODUCTS

VAGINAL CONTRACEPTIVE - PH MODULATORS

PHEXXI GEL	-	NC
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VAGINAL PRODUCTS

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DrugName	Special Code	Tier
VAGINAL PRODUCTS Cont.		
MISCELLANEOUS VAGINAL PRODUCTS		
FEM PH GEL	-	NC
INTRAROSA SUPP	-	NC
SPERMICIDES		
CONTRACEPTIVE FILM	OTC	6
CONTRACEPTIVE FOAM	OTC	6
CONTRACEPTIVE GEL	OTC	6
CONTRACEPTIVE SUPP	OTC	6
TODAY SPONGE	OTC	6
vcf vaginal gel (CONCEPTROL equiv)	OTC	6
CONCEPTROL GEL	OTC	NC
VAGINAL ANTI-INFECTIVES		
clindamycin vaginal cream (CLEOCIN equiv)	-	2
metronidazole vaginal gel (METROGEL equiv)	-	2
miconazole 3 kit	-	2
NYSTATIN VAGINAL TAB	-	2
terconazole cream (TERAZOL equiv)	-	2
TERCONAZOLE CREAM 0.8%	-	2
terconazole supp (TERAZOL equiv)	-	2
AVC VAGINAL CREAM	-	3
GYNAZOLE-1 CREAM	-	3
CLEOCIN VAGINAL SUPP	-	4
CLINDESSE VAGINAL CREAM	-	4
MICONAZOLE 3 SUPP 200MG	-	4
VAGINAL ESTROGENS		
estradiol cream (ESTRACE equiv)	-	2
estradiol vaginal tab, yuvafem vaginal tab (VAGIFEM equiv) (QL= 8 tabs/28 days (18 tabs on first fill))	QL	2
ESTRING (QL= 1 ring/90 days)	QL	3
PREMARIN VAGINAL CREAM	-	3
IMVEXXY SUPP	-	NC
VAGIFEM TAB	-	NC
VAGINAL PROGESTINS		
ENDOMETRIN INSERT	-	3
CRINONE GEL	-	5
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
epinephrine pen inj 0.15mg, 0.3mg (EPIPEN (JR) equiv) (QL= 2 inj/fill)	QL	2
SYMJEPI INJ (QL= 2 inj/fill)	QL	2
EPINEPHRINE INJ 0.15MG (QL= 2 inj/fill)	QL	3
EPINEPHRINE INJ 0.3MG (QL= 2 inj/fill)	QL	3
ADRENACLICK INJ, EPINEPHRINE INJ	-	NC
AUVI-Q INJ	-	NC
EPIPEN (JR) INJ	-	NC
VASOPRESSORS		
midodrine tab (PROAMATINE equiv)	-	2

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DrugName	Special Code	Tier
VASOPRESSORS Cont.		
dobutamine inj	M	M
dobutamine/d5w inj	M	M
DOPAMINE INJ	M	M
dopamine inj (DOPAMINE equiv)	M	M
dopamine/d5w inj	M	M
ephedrine sulfate inj	M	M
epinephrine inj (ADRENALIN equiv)	M	M
norepinephrine inj (LEVOPHED equiv)	M	M
phenylephrine inj (NEO-SYNEPHRINE equiv)	M	M
ADRENALIN INJ	-	NC
VITAMINS		
OIL SOLUBLE VITAMINS		
cholecalciferol cap 50000 unit	OTC	1
phytonadione tab (MEPHYTON equiv)	-	2
vitamin D cap ((RX Only))	-	2
MEPHYTON TAB	-	3
REPLESTA WAFER	OTC	6
THERA-D TAB	OTC	6
vitamin D cap 1000unit (Covered for members 65 years or older)	OTC	6
vitamin D cap 400unit (Covered for members 65 years or older)	OTC	6
vitamin d chew	OTC	6
VITAMIN D TAB 400UNIT (Covered for members 65 years or older)	OTC	6
vitamin d3 drops	OTC	6
vitamin d3 tab	OTC	6
vitamin k inj	M	M
ERGOCAL CAP	-	NC
PRENATAL VITAMINS		
PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	-	1
PRENATAL 19 CHEW TAB	-	4
PRENATAL VITAMINS (NON-PREFERRED)	--OTC	4
WATER SOLUBLE VITAMINS		
niacin cap	-	2
niacin CR tab (SLO-NIACIN equiv)	-	2
niacin tab	-	2
NIACIN TR TAB	-	2
niacinamide tab	-	2
POTABA POWDER PACKET	-	3
POTABA CAP	-	4
POTABA TAB	-	4
ASCORBIC ACID INJ	M	M
pyridoxine inj	M	M
thiamine inj	M	M
vitamin c inj	M	M

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Prior Authorization Drug List
Last Updated* 8/1/2020

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
ABSTRAL SL TAB	4
acarbose tab	2
ACTEMRA ACTPEN INJ	5
ACTEMRA SC INJ	5
ACTIMMUNE INJ	5
adapalene cream	2
adapalene gel	2
ADAPALENE LOTION	3
adapalene/benzoyl peroxide gel 0.1-2.5%	2
ADCIRCA TAB	5
adefovir dipivoxil tab	5
ADEMPAS TAB	5
AFINITOR DISPERZ	5
AFINITOR TAB 10MG	5
AFINITOR TAB 2.5MG, 5MG, 7.5MG	5
AIMOVIG INJ	3
AKYNZEO CAP	3
ALECENSA CAP	5
ALFERON-N INJ	5
ALINIA SUSP	3
ALINIA TAB	3
alosetron tab	5
ALUNBRIG TAB 30MG	5
ALUNBRIG TAB 90MG, 180MG	5
ambrisentan tab	5
AMCINONIDE OINT	4
AMITIZA CAP	4
APOKYN INJ	5
aprepitant cap	2
aprepitant pak	2
ARIKAYCE SUSP	5
armodafinil tab	2
AZELEX CREAM	3
BALVERSA TAB 3MG	5
BALVERSA TAB 4MG	5
BALVERSA TAB 5MG	5
BARACLUDE SOLN	5
BENZNIDAZOLE TAB	3
bexarotene cap	5
bosentan tab	5
BOSULIF TAB	5
BRUKINSA CAP	5

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Prior Authorization Drug List
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Drug Name	Tier # for Drug Copay (if prior auth is approved)
CABOMETYX TAB	5
CALQUENCE CAP	5
capecitabine tab	5
CAPRELSA TAB	5
CARBAGLU TAB	5
CAYSTON INH SOLN	5
CIALIS TAB 2.5MG, 5MG	4
CIMZIA INJ	5
CIMZIA STARTER INJ KIT	5
clobazam tab	2
clobetasol foam	4
clobetasol lotion	4
clobetasol shampoo	4
COMETRIQ KIT	5
COPIKTRA CAP	5
CORLANOR SOLN	4
CORLANOR TAB	4
COSENTYX INJ (1-PACK)	5
COSENTYX INJ (2-PACK)	5
COTELLIC TAB	5
CUVITRU INJ	5
cyclophosphamide tab	2
CYSTADANE POWDER	5
DARAPRIM TAB	5
deferasirox tab	5
deferasirox tab 180mg	5
deferasirox tab 90mg, 360mg	5
diclofenac gel	4
DIFFERIN LOTION	3
DIFFERIN OTC GEL 0.1%	2
DOPTELET TAB	5
DUPIXENT INJ	5
DUPIXENT PEN INJ	5
EGRIFTA INJ	5
EMGALITY INJ	3
EMGALITY INJ 100MG/ML	3
ENBREL INJ 25MG	5
ENBREL INJ 50MG	5
ENBREL MINI INJ	5
ENBREL SURECLICK INJ 50MG	5
entecavir tab	2
EPANED PREMIXED SOLN	4

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EPANED SOLN	4
EPCLUSA TAB	5
EPIDIOLEX SOLN	5
EPIDUO FORTE GEL	3
EPOGEN INJ	5
ERIVEDGE CAP	5
ERLEADA TAB	5
erlotinib tab	5
ESBRIET CAP	5
ESBRIET TAB 267MG	5
ESBRIET TAB 801MG	5
ETOPOSIDE CAP	2
everolimus tab	5
EXJADE TAB	5
FARYDAK CAP	5
FASENRA PEN INJ	5
fentanyl citrate lollipop	2
FERRIPROX SOLN	5
FERRIPROX TAB	5
FETZIMA CAP	4
FETZIMA TITRATION PACK	4
FORTEO INJ	5
FULPHILA INJ	5
FYCOMPA TAB	4
FYCOMPA SUSP	4
GALAFOLD CAP	5
GATTEX KIT	5
GENOTROPIN INJ, HUMATROPE INJ, ZOMACTON INJ	5
GILOTRIF TAB	5
HARVONI TAB	5
HEMLIBRA INJ	5
HIZENTRA INJ	5
HUMIRA INJ 10MG	5
HUMIRA INJ 20MG	5
HUMIRA INJ 40MG	5
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK	5
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK	5
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK	5
HUMIRA PEN INJ 40MG	5
HYCAMTIN CAP	5
HYQVIA INJ	5
IBRANCE CAP	5

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Prior Authorization Drug List
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Drug Name	Tier # for Drug Copay (if prior auth is approved)
IBRANCE TAB	5
ICLUSIG TAB	5
IMBRUVICA CAP 140MG	5
IMBRUVICA CAP 70MG	5
IMBRUVICA TAB	5
INCRELEX INJ	5
INLYTA TAB	5
INTRON-A INJ	5
IRESSA TAB	5
JADENU SPRINKLE	5
JADENU TAB 180MG	5
JADENU TAB 90MG, 360MG	5
JAKAFI TAB	5
KALYDECO PAK	5
KALYDECO TAB	5
KEVZARA INJ	5
KISQALI PAK	5
KISQALI TAB	5
KORLYM TAB	5
KUVAN POWDER PACK	5
KUVAN TAB	5
LATUDA TAB	4
LATUDA TAB 80MG	4
LAZANDA NASAL SPRAY	4
LEDIPASVIR/SOFOSBUVIR TAB	5
LENVIMA CAP	5
LETAIRIS TAB	5
LEUKINE INJ	5
lidocaine/prilocaine cream	2
linezolid susp	2
linezolid tab	2
LINZESS CAP	3
LOKELMA PAK	3
LONSURF TAB	5
LORBRENA TAB 100MG	5
LORBRENA TAB 25MG	5
LUPRON DEPOT-PED INJ	5
LYNPARZA CAP	5
LYNPARZA TAB	5
MATULANE CAP	5
MAVYRET TAB	5
MEKINIST TAB 0.5MG	5

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
MEKINIST TAB 2MG	5
miglustat cap	5
modafinil tab	2
MODERIBA TAB	2
MOVANTIK TAB	3
MULPLETA TAB	5
MYLERAN TAB	5
NERLYNX TAB	5
NEULASTA INJ	5
NEUMEGA INJ	5
NEXAVAR TAB	5
NINLARO CAP	5
nitisinone cap	5
NUBEQA TAB	5
NUCALA INJ	5
NUDEXTA CAP	3
NUTROPIN AQ INJ, OMNITROPE INJ	5
octreotide inj	2
ODOMZO CAP	5
OFEV CAP	5
OPSUMIT TAB	5
ORENCIA CLICK INJ	5
ORENCIA SC INJ 125MG/ML	5
ORENCIA SC INJ 50MG/0.4ML	5
ORENCIA SC INJ 87.5MG/0.7ML	5
ORFADIN CAP	5
ORLISSA TAB 150MG	5
ORLISSA TAB 200MG	5
OTEZLA STARTER PACK	5
OTEZLA TAB	5
phenoxybenzamine cap	5
PIQRAY TAB	5
PRALUENT INJ	3
PROCRIT INJ	5
PROMACTA TAB	5
PULMOZYME INH SOLN	5
pyrimethamine tab	5
QBRELIS SOLN	4
REBETOL SOLN	5
REPATHA INJ	3
REPATHA PUSHTRONEX INJ	3
RESTASIS OPHTH EMULSION	3

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary cont.
Prior Authorization Drug List
Last Updated* 8/1/2020

Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
RIBAPAK TAB	2
ribavirin cap	2
ribavirin inh soln	5
ribavirin tab	2
ribavirin tab 400mg	2
ribavirin tab 600mg	2
RINVOQ ER TAB	5
ROZLYTREK CAP	5
RUBRACA TAB	5
RYDAPT CAP	5
SABRIL POWDER PACK	5
SABRIL TAB	5
SAIZEN INJ, SEROSTIM INJ, ZORBTIVE INJ	5
SAMSCA TAB	5
SANDOSTATIN LAR INJ KIT	5
SIGNIFOR INJ	5
sildenafil tab 20mg	2
SIVEXTRO TAB	4
SKYRIZI INJ	5
SOFOBUVIR/VELPATASVIR TAB	5
SOMATULINE INJ	5
SOMAVERT INJ	5
SPRYCEL TAB	5
STELARA INJ	5
STIMATE NASAL SOLN	5
STIVARGA TAB	5
SUCRAID SOLN	5
SUNOSI TAB	3
SUPPRELIN LA KIT	5
SUTENT CAP	5
SYLATRON INJ	5
SYMDEKO TAB	5
SYNAREL NASAL SOLN	5
tadalafil tab (PAH)	5
tadalafil tab 2.5mg, 5mg	2
TAFINLAR CAP	5
TALTZ INJ	5
TALZENNA CAP 0.25MG	5
TALZENNA CAP 1MG	5
TARCEVA TAB	5
TASIGNA CAP	5
TEGSEDI INJ	5

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary cont.
Prior Authorization Drug List
Last Updated* 8/1/2020

Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
temozolomide cap	5
temsirolimus soln	5
testosterone cypionate inj	2
tetrabenazine tab	5
THALOMID CAP	5
TIBSOVO TAB	5
tobramycin neb soln	5
tolvaptan tab	5
TORISEL SOLN	5
TRACLEER TAB 32MG	5
TRACLEER TAB 62.5MG, 125MG	5
tretinoin cap	5
tretinoin cream	2
tretinoin gel	2
TRETIN-X CREAM	4
trientine cap	5
TRINTELLIX TAB	4
TRULANCE TAB	3
TURALIO CAP	5
TYKERB TAB	5
TYMLOS INJ	5
TYVASO INH SOLN	5
TYZEKA TAB	5
UCERIS RECTAL FOAM	4
UPTRAVI TAB	5
VALCHLOR GEL	5
valganciclovir soln	5
valganciclovir tab	2
VANTAS KIT	5
VELTASSA POWDER	4
VENTAVIS INH SOLN	5
VERZENIO TAB	5
vigabatrin powder pack	5
vigabatrin tab	5
VITRAKVI CAP 100MG	5
VITRAKVI CAP 25MG	5
VITRAKVI SOLN	5
VIZIMPRO TAB	5
voriconazole susp	2
voriconazole tab	2
VOSEVI TAB	5
VOTRIENT TAB	5

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary cont.
Prior Authorization Drug List
Last Updated* 8/1/2020

Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
VYNDAMAX CAP	5
VYNDAQEL CAP	5
XALKORI CAP	5
XEMBIFY INJ	5
XIFAXAN TAB 550MG	4
XOLAIR INJ	5
XOSPATA TAB	5
XTANDI CAP	5
XULTOPHY INJ	3
XYREM SOLN	5
ZAVESCA CAP	5
ZEJULA CAP	5
ZELBORAF TAB	5
ZOLADEX IMPLANT	5
ZOLINZA CAP	5
ZONTIVITY TAB	4
ZYDELIG TAB	5
ZYKADIA CAP	5
ZYKADIA TAB	5
ZYTIGA TAB 250MG	5
ZYTIGA TAB 500MG	5

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Last Updated* 8/1/2020
RxCents (Cost Savings Enabled by Tablet Splitting)

Tablet splitting helps control prescription drug benefit costs and can provide significant savings for members. Participation in the program is voluntary. Through this program, members pay up to one-half of their usual copayment on a select group of prescription drugs. Drugs included in this program are based on the following criteria:

- The drug product is on the formulary.
- The drug product is recognized as an appropriate product to split by the Pharmacy & Therapeutics Committee.
- The drug is flat priced (i.e. various strengths of the medication must be comparably priced).
- The medication must have once-daily dosing.

An example of the savings that can be realized through this program is illustrated below:

	Product & Strength	Quantity	Member Copay	Member Annual Savings
Without Tablet Splitting	Drug A 40 mg tab	30	\$15.00	
With Tablet Splitting	Drug A 80 mg tab	15	\$7.50	\$90

As the example illustrates, tablet splitting allows members to receive the same dose in a fewer number of tablets; thus, the overall

RxCents Program Medications

aliskiren tab	amlodipine/valsartan tab	BYSTOLIC TAB	febuxostat tab
galantamine tab	JANUVIA TAB	LATUDA TAB	LATUDA TAB 80MG
rasagiline tab	tolterodine tab		

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Last Updated* 8/1/2020
Over-the-Counter (OTC)

• The following OTC drugs are a covered benefit with a prescription

Over-the-Counter (OTC) Medications

aspirin chew tab 81mg	ASPIRIN EC TAB 325mg	aspirin ec tab 81mg	aspirin effer tab
aspirin tab	aspirin tab 325mg	aspirin tab 81mg	B-D INSULIN SYRINGE
B-D PEN NEEDLE	budesonide nasal spray	cholecalciferol cap 50000 unit	CONTRACEPTIVE FILM
CONTRACEPTIVE FOAM	CONTRACEPTIVE GEL	CONTRACEPTIVE SUPP	DIFFERIN OTC GEL 0.1%
ENTRE-B SUSP	FEMALE CONDOMS	ferrous sulfate EC tab	ferrous sulfate elixir
FERROUS SULFATE LIQUIII	ferrous sulfate soln	FERROUS SULFATE SYRUP	folic acid tab 400mcg
folic acid tab 800mcg	GLUCOCARD EXPRESSION CONTROL SOLUTION	GLUCOCARD EXPRESSION METER	GLUCOCARD EXPRESSION TEST STRIP
GLUCOCARD SHINE CONTROL SOLUTION	GLUCOCARD SHINE METER	GLUCOCARD SHINE TEST STRIP	guaifenesin/codeine syrup
IRON SUSP	levonorgestrel tab 0.75mg	levonorgestrel tab 1.5mg	loratadine cap
MULTI-LANCET DEVICE 2	nicotine gum	NICOTINE KIT	nicotine lozenge
nicotine patch	NOVOFINE PEN NEEDLE	NOVOTWIST PEN NEEDLE	NOVOTWIST/NOVOFINE PEN NEEDLE
PLAN B TAB	PRENATAL VITAMINS (NON-PREFERRED)	PROFE CAP 180MG	REPLESTA WAFER
RIGHT STEP PRENATAL VITAMINS	TECHLITE LANCET 28G	TECHLITE LANCET 30G	THERA-D TAB
TODAY SPONGE	TRUPLUS LANCET	vcf vaginal gel	vitamin D cap 1000unit
vitamin D cap 400unit	vitamin d chew	VITAMIN D TAB 400UNIT	vitamin d3 drops
vitamin d3 tab			

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Last Updated* 8/1/2020
Mandatory Specialty Pharmacy (MSP)

- Navitus utilizes a specialty pharmacy, experienced in handling specialty drugs, to coordinate personalized support for members impacted by chronic illnesses and complex diseases.
- Specialty drugs are only available for a one month supply due to their high cost and use.
- The following drugs are required to be filled through a Specialty Pharmacy provider.

Mandatory Specialty Pharmacy (MSP) Medications

ACTIMMUNE INJ	ADEMPAS TAB	ALUNBRIG TAB 30MG	ALUNBRIG TAB 90MG, 180MG
ambrisentan tab	APOKYN INJ	ARIKAYCE SUSP	BALVERSA TAB 3MG
BALVERSA TAB 4MG	BALVERSA TAB 5MG	bosentan tab	BRUKINSA CAP
CALQUENCE CAP	CAPRELSA TAB	CARBAGLU TAB	CAYSTON INH SOLN
COMETRIQ KIT	COPIKTRA CAP	CYSTAGON CAP	DARAPRIM TAB
DOPTELET TAB	EPIDIOLEX SOLN	FERRIPROX SOLN	FERRIPROX TAB
GALAFOLD CAP	GILOTRIF TAB	ICLUSIG TAB	IMBRUVICA CAP 140MG
IMBRUVICA CAP 70MG	IMBRUVICA TAB	IRESSA TAB	KALYDECO PAK
KALYDECO TAB	KORLYM TAB	KUVAN POWDER PACK	KUVAN TAB
LENVIMA CAP	LETAIRIS TAB	LONSURF TAB	LYNPARZA CAP
LYNPARZA TAB	LYSODREN TAB	miglustat cap	NERLYNX TAB
nitisinone cap	OFEV CAP	OPSUMIT TAB	ORFADIN CAP
pyrimethamine tab	REMODULIN INJ 10MG/ML	REMODULIN INJ 1MG/ML	REMODULIN INJ 2.5MG/ML
REMODULIN INJ 5MG/ML	RUBRACA TAB	SABRIL POWDER PACK	SABRIL TAB
SIGNIFOR INJ	SOMAVERT INJ	SYMDEKO TAB	TEGSEDI INJ
TIBSOVO TAB	TRACLEER TAB 32MG	TRACLEER TAB 62.5MG, 125MG	treprostinil inj 10mg/ml
treprostinil inj 1mg/ml	treprostinil inj 2.5mg/ml	treprostinil inj 5mg/ml	TURALIO CAP
TYVASO INH SOLN	UPTRAVI TAB	VALCHLOR GEL	VENTAVIS INH SOLN
vigabatrin powder pack	vigabatrin tab	VITRAKVI CAP 100MG	VITRAKVI CAP 25MG
VITRAKVI SOLN	XEMBIFY INJ	XOSPATA TAB	XYREM SOLN
ZAVESCA CAP	ZEJULA CAP	ZYDELIG TAB	

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Last Updated* 8/1/2020
Step Therapy (ST)

- The following drugs are covered on the formulary with a Step Therapy.

Step Therapy (ST) Medications

Drug Name	Step Therapy Requirements
ADMELOG INJ, INSULIN LISPRO INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
ADMELOG SOLOSTAR INJ, INSULIN LISPRO KWIKPEN INJ (JUNIOR)	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
almotriptan tab	QL= 12 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ALSUMA INJ	QL= 10 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ANDRODERM PATCH	Step therapy requires trial of ANDROGEL equiv
APIDRA INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
APIDRA SOLOSTAR INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
ARANESP INJ	Step Therapy requires trial of EPOGEN or PROCRT
AXIRON SOLN	Step therapy requires trial of ANDROGEL equiv
BECONASE AQ NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
DIFICID TAB	QL= 20 tabs/30 days; Step Therapy requires trial of vancomycin cap, vancomycin soln, or FIRVANQ SOLN
dihydroergotamine mesylate nasal spray	QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
EDARBI TAB	Step Therapy requires trial of telmisartan, irbesartan, candesartan, losartan or valsartan
EDARBYCLOR TAB	Step Therapy requires trial of telmisartan/hct, irbesartan/hct, candesartan/hct, losartan/hct or valsartan/hct
esomeprazole DR granule pack	Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
FANAPT TAB	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
FORTESTA GEL 2%	Step therapy requires trial of ANDROGEL equiv
frovatriptan tab	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan, or rizatriptan
HUMALOG INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
HUMALOG KWIKPEN INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
HUMALOG MIX INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
HUMALOG MIX KWIKPEN INJ, INSULIN LISPRO PROTAMINE INJ	Step Therapy requires trial of NOVOLOG or INSULIN ASPART
HUMALOG PEN INJ	Step Therapy requires trial of NOVOLOG
HUMULIN MIX INJ	Step Therapy requires trial of NOVOLIN
HUMULIN MIX PEN INJ	Step Therapy requires trial of NOVOLIN
HUMULIN R INJ	Step Therapy requires trial of NOVOLIN
LEVEMIR FLEXTOUCH INJ	Step therapy requires trial of LANTUS
LEVEMIR INJ	Step therapy requires trial of LANTUS

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Step Therapy (ST)

- The following drugs are covered on the formulary with a Step Therapy.

Step Therapy (ST) Medications

Drug Name	Step Therapy Requirements
LIVALO TAB	Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
MIGRANAL SPRAY	QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
MOVIPREP SOLN	Step Therapy requires trial of CLENPIQ
NAMZARIC CAP	Step Therapy requires trial of donepezil and memantine
NAMZARIC STARTER PACK	Step Therapy requires trial of donepezil and memantine
NEXIUM GRANULE PACK	Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
paliperidone ER tab	QL= 1 tab/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
paliperidone ER tab 6mg	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
PREVACID SOLUTAB	QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
QNASL NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
rabeprazole EC tab	QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
risedronate DR tab	QL= 4 tabs/28 days; Step Therapy requires trial of alendronate, ibandronate or FOSAMAX+D
SAPHRIS SL TAB	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT	Step Therapy requires trial of ADVAIR, BREO, DULERA, or FLUTICASONE/SALMETEROL
SUMAVEL DOSEPRO INJ	QL= 6 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
SUPREP SOLN	Step Therapy requires trial of CLENPIQ
TESTIM GEL	Step therapy requires trial of ANDROGEL equiv
testosterone gel 2%	Step therapy requires trial of ANDROGEL equiv
TESTOSTERONE GEL, VOGELXO GEL	Step therapy requires trial of ANDROGEL equiv
testosterone soln	Step therapy requires trial of ANDROGEL equiv
ZETONNA NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
zolmitriptan ODT	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
zolmitriptan tab	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ZOMIG NASAL SPRAY	QL= 18 sprays/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Smoking Cessation Agents
Last Updated* 8/1/2020

Drug Name	Tier # for Drug Copay
bupropion SR tab(Limited to 180 days/calendar year)	6
CHANTIX(Limited to 180 days/calendar year)	6
nicotine gum(Limited to 180 days/calendar year)	6
NICOTINE KIT(Limited to 180 days/calendar year)	6
nicotine lozenge(Limited to 180 days/calendar year)	6
nicotine patch(Limited to 180 days/calendar year)	6
NICOTROL INHALER(Limited to 180 days/calendar year)	6
NICOTROL NASAL SPRAY(Limited to 180 days/calendar year)	6

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
abacavir/lamivudine/zidovudine tab	QL= 2 tabs/day
ABILIFY DISCMELT	QL= 2 tabs/day
ABILIFY SOLN	QL= 900ml/30 days
abiraterone tab 250mg	QL= 4 tabs/day
ABSTRAL SL TAB	QL= 120 tabs/30 days
ACTEMRA ACTPEN INJ	QL= 2 inj/28 days
ACTEMRA SC INJ	QL= 2 inj/28 days
ADVAIR DISKUS INHALER	QL= 1 inhaler/30 days
ADVAIR HFA INHALER	QL= 1 inhaler/30 days
AFLURIA INJ	QL= 2 vaccines/calendar year
AFLURIA INJ, FLUZONE INJ	QL= 2 vaccines/calendar year
AIMOVIJ INJ	QL= 1 pack/28 days
AKYNZEO CAP	QL= 1 tab/fill
albuterol neb soln 0.083%	QL= 3 boxes/30 days
albuterol neb soln 0.5%	QL= 5 boxes/30 days
albuterol neb soln 0.63mg	QL= 5 boxes/30 days
albuterol neb soln 1.25mg	QL= 5 boxes/30 days
ALINIA SUSP	QL= 60ml/3 days
ALINIA TAB	QL= 6 tabs/3 days
almotriptan tab	QL= 12 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ALSUMA INJ	QL= 10 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ALUNBRIG TAB 30MG	QL= 4 tabs/day; Only available through Biologics 800-850-4306
ALUNBRIG TAB 90MG, 180MG	QL= 1 tab/day; Only available through Biologics 800-850-4306
amphetamine/dextroamphetamine ER cap	QL= 1 cap/day
amphetamine/dextroamphetamine tab	QL= 2 tabs/day
ANZEMET TAB	QL= 5 tabs/30 days
APLENZIN TAB	QL= 1 tab/day
aprepitant cap	QL= 3 caps/fill
aprepitant pak	QL= 3 caps/fill
ARCAPTA NEOHALER	QL= 1 inhaler/30 days
ARIKAYCE SUSP	QL= 1 vial/day; Only available through Maxor Pharmacy 800-658-6046
aripiprazole ODT	QL= 2 tabs/day
aripiprazole soln	QL= 900ml/30 days
aripiprazole tab	QL= 1 tab/day
aripiprazole tab 2mg	QL= 2 tabs/day
aripiprazole tab 5mg	QL= 2 tabs/day
armodafinil tab	QL= 1 tab/day
ASMANEX HFA INHALER	QL= 2 inhalers/30 days
ASMANEX INHALER	QL= 2 inhalers/30 days
atomoxetine cap	QL= 1 cap/day
ATRIPLA TAB	QL= 1 tab/day
ATROVENT HFA INHALER	QL= 2 inhalers/30 days

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

- The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
azelastine nasal spray 0.1%	QL= 2 bottles/30 days
azelastine nasal spray 0.15%	QL= 2 bottles/30 days
BALVERSA TAB 3MG	QL= 3 tabs/day; Only available through US Bioservices 888-518-7246
BALVERSA TAB 4MG	QL= 2 tabs/day; Only available through US Bioservices 888-518-7246
BALVERSA TAB 5MG	QL= 1 tab/day; Only available through US Bioservices 888-518-7246
BAQSIMI NASAL POWDER	QL= 2 inhalations/fill
BAXDELA TAB	QL= 2 tabs/day; Restricted to Infectious Disease Specialist
BECONASE AQ NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
bimatoprost ophth soln	QL= 2.5ml/30 days
BINOSTO TAB	QL= 4 tabs/ 28 days
BREO ELLIPTA INHALER	QL= 1 inhaler/30 days
BROVANA NEB SOLN	QL= 2 nebs/day
BRUKINSA CAP	QL= 4 caps/day; Only available through Biologics 800-850-4306
budesonide inh susp	QL= 2 nebs/day
budesonide nasal spray	QL= 1 bottle/30 days
bupropion ER tab	QL= 2 tabs/day
bupropion SR tab	Limited to 180 days/calendar year
bupropion SR tab 150mg	QL= 2 tabs/day
bupropion XL tab	QL= 1 tab/day
butorphanol nasal spray	QL= 2 bottles/30 days
BYETTA INJ	QL= 1 pen/30 days
CABOMETYX TAB	QL= 1 tab/day
calcitonin nasal spray	QL= 1 bottle/30 days
CALQUENCE CAP	QL= 2 caps/day; Only available through Lumicera Pharmacy 855-847-3553
CHANTIX	Limited to 180 days/calendar year
CIMZIA INJ	QL= 2 inj/28 days
CIMZIA STARTER INJ KIT	QL= 1 kit/plan year
citalopram soln	QL= 600ml/30 days
citalopram tab	QL= 1 tab/day
clarithromycin ER tab	QL= 28 tabs/30 days
clozapine tab	QL= 9 tabs/day
COMBIVENT INHALER	QL= 2 inhalers/30 days
COMBIVENT RESPIMAT INHALER	QL= 2 inhalers/30 days
COMPLERA TAB	QL= 1 tab/day
COPIKTRA CAP	QL= 2 caps/day; Only available through Diplomat Pharmacy 877-977-9118
COSENTYX INJ (1-PACK)	QL= 1 inj/28 days
COSENTYX INJ (2-PACK)	QL= 2 inj/28 days
COTELLIC TAB	QL= 3 tabs/day
DARAPRIM TAB	QL= 3 tabs/day; Only available through Walgreens 888-347-3416
DAYTRANA PATCH	QL= 1 patch/day
DEPO-PROVERA SC INJ 104MG	QL= 1 inj/90 days
desvenlafaxine ER tab	QL= 4 tabs/day

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

- The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
dexmethylphenidate ER cap	QL= 1 cap/day
dexmethylphenidate tab	QL= 2 tabs/day
dextroamphetamine ER cap 10mg	QL= 6 tabs/day
dextroamphetamine ER cap 15mg	QL= 4 caps/day
dextroamphetamine ER cap 5mg	QL= 3 caps/day
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL	QL= 2 packs/fill
diclofenac gel	QL= 300gm/30 days
diclofenac soln 1.5%	QL= 3 bottles/fill
DIFICID TAB	QL= 20 tabs/30 days; Step Therapy requires trial of vancomycin cap, vancomycin soln or FIRVANQ SOLN
dihydroergotamine mesylate nasal spray	QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
DOPTELET TAB	QL= 2 tabs/day; Only available through PantherRx Pharmacy 855-726-8479
doxepin tab	QL= 1 tab/day
DULERA INHALER	QL= 1 inhaler/30 days
DUPIXENT INJ	QL= 2 inj/28 days
DUPIXENT PEN INJ	QL= 2 inj/28 days
EDLUAR SL TAB	QL= 1 tab/day
eletriptan tab	QL= 9 tabs/30 days
ELIQUIS TAB, ELIQUIS STARTER PACK	QL= 2 tabs/day
ELLA TAB	QL= 2 tabs/365 days
EMGALITY INJ	QL= 1 inj/28 days
EMGALITY INJ 100MG/ML	QL= 3 inj/fill, 6 fills/year
ENBREL INJ 25MG	QL= 8 inj/28 days
ENBREL INJ 50MG	QL= 4 inj/28 days
ENBREL MINI INJ	QL= 4 inj/28 days
ENBREL SURECLICK INJ 50MG	QL= 4 inj/28 days
enoxaparin inj	Limited to 35 day supply/180 days
ENTRESTO TAB	QL= 2 tabs/day
EPCLUSA TAB	QL= 1 tab/ day
EPINEPHRINE INJ 0.15MG	QL= 2 inj/fill
EPINEPHRINE INJ 0.3MG	QL= 2 inj/fill
epinephrine pen inj 0.15mg, 0.3mg	QL= 2 inj/fill
ERLEADA TAB	QL= 4 tabs/day
ESBRIET CAP	QL= 9 tabs/day
ESBRIET TAB 267MG	QL= 9 tabs/day
ESBRIET TAB 801MG	QL= 3 tabs/day
escitalopram soln	QL= 600ml/30 days
escitalopram tab	QL= 1 tab/day
escitalopram tab 10mg	QL= 1.5 tabs/day
esomeprazole cap	QL= 1 cap/day
estradiol vaginal tab, yuvafem vaginal tab	QL= 8 tabs/28 days (18 tabs on first fill)

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
ESTRING	QL= 1 ring/90 days
eszopiclone tab	QL= 1 tab/day
famciclovir tab 125mg	QL= 1 tab/day
famciclovir tab 250mg	QL= 2 tabs/day
famciclovir tab 500mg	QL= 21 tabs/30 days
FANAPT TAB	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
FARYDAK CAP	QL= 6 caps/21 days
FASENRA PEN INJ	QL= 1 inj/56 days
fentanyl patch	QL= 10 patches/30 days
FETZIMA CAP	QL= 1 cap/day
FETZIMA TITRATION PACK	QL= 1 cap/day
FLOVENT DISKUS INHALER	QL= 1 inhaler/30 days
FLOVENT HFA INHALER	QL= 2 inhalers/30 days
FLUAD INJ	QL= 2 vaccines/calendar year
FLUAD QUAD INJ	QL= 2 vaccines/calendar year
FLUBLOK INJ	QL= 2 vaccines/calendar year
FLUBLOK QUAD PF INJ	QL= 2 vaccines/calendar year
FLUCELVAX INJ	QL= 2 vaccines/calendar year
FLUCELVAX QUAD INJ	QL= 2 vaccines/calendar year
FLULAVAL QUAD INJ, FLUZONE QUAD INJ	QL= 2 vaccines/calendar year
FLUMIST QUADRIVALENT NASAL SUSP	QL= 2 vaccines/calendar year
FLUNISOLIDE NASAL SPRAY	QL= 2 bottles/30 days
fluoxetine cap 10mg	QL= 1 cap/day
fluoxetine cap 20mg	QL= 3 caps/day
fluoxetine cap 40mg	QL= 2 caps/day
fluoxetine soln	QL= 600ml/30 days
fluoxetine tab 10mg	QL= 1 tab/day
fluoxetine tab 20mg	QL= 3 tabs/day
FLUOXETINE TAB 60MG	QL= 1 tab/day
fluoxetine weekly cap	QL= 4 caps/28 days
fluticasone nasal spray	QL= 1 bottle/30 days
FLUVIRIN INJ	QL= 2 vaccines/calendar year
FLUVIRIN PF INJ	QL= 2 vaccines/calendar year
fluvoxamine tab 100mg	QL= 3 tabs/day
fluvoxamine tab 25mg, 50mg	QL= 2 tabs/day
FLUZONE HD PF INJ	QL= 2 vaccines/calendar year
FLUZONE HIGH DOSE PF INJ	QL= 2 vaccines/calendar year
FLUZONE INTRADERMAL INJ	QL= 2 vaccines/calendar year
FLUZONE QUADRIVALENT INJ	QL= 2 vaccines/calendar year
FLUZONE SPLIT QUAD INJ	QL= 2 vaccines/calendar year
FLUZONE/FLUARIX QUAD INJ	QL= 2 vaccines/calendar year

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

- The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
FORFIVO XL TAB	QL= 1 tab/day
FORTICAL NASAL SPRAY	QL= 1 bottle/30 days
FRAGMIN INJ	Limited to 35 day supply/180 days
frovatriptan tab	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan, or rizatriptan
GALAFOLD CAP	QL= 15 caps/30 days; Only available through Walgreens 888-347-3416
GAVILYTE-C SOLN	Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay
GILENYA CAP	
GILOTRIF TAB	QL= 1 tab/day; Only available through Accredo 888-773-7376
GLYXAMBI TAB	QL= 1 tab/day
granisetron tab	QL= 14 tabs/fill
GRANISOL SOLN	QL= 60ml/fill
GVOKE INJ	QL= 2 inj/fill
GVOKE PFS INJ	QL= 2 inj/fill
HARVONI TAB	QL= 1 tab/ day
HUMIRA INJ 10MG	QL= 2 syringes/28 days
HUMIRA INJ 20MG	QL= 2 syringes/28 days
HUMIRA INJ 40MG	QL= 2 syringes/28 days
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK	QL= 1 pack/fill, 1 fill/plan year
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK	QL= 1 pack/fill, 1 fill/plan year
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK	QL= 1 pack/fill, 1 fill/plan year
HUMIRA PEN INJ 40MG	QL= 2 pens/28 days
ibandronate tab 150mg	QL= 1 tab/28 days
IBRANCE CAP	QL= 21 caps/28 days
IBRANCE TAB	QL= 1 tabs/day
IMBRUVICA CAP 140MG	QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118
IMBRUVICA CAP 70MG	QL= 1 cap/day; Only available through Diplomat Pharmacy 877-977-9118
IMBRUVICA TAB	QL= 1 tab/day; Only available through Diplomat Pharmacy 877-977-9118
ipratropium nasal spray	QL= 60gm/30 days
ipratropium neb soln	QL= 125 nebs/30 days
JENTADUETO TAB	QL= 2 tabs/day
JENTADUETO XR TAB	QL= 2 tabs/day
KADIAN CAP	QL= 2 caps/day
KALYDECO PAK	QL= 2 packets/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416
KALYDECO TAB	QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416
ketorolac tab	QL= 20 tabs/30 days
KEVZARA INJ	QL= 2 inj/28 days

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
KISQALI PAK	QL= 91 tabs/28 days
KISQALI TAB	QL= 63 tabs/28 days
lansoprazole cap	Rx Only; QL= 2 caps/day
lansoprazole odt	QL= 1 tab/day
LASTACRAFT OPHTH SOLN	QL= 3ml/30 days
latanoprost ophth soln	QL= 2.5ml/25 days
LATUDA TAB	QL= 1 tab/day
LATUDA TAB 80MG	QL= 2 tabs/day
LAZANDA NASAL SPRAY	QL= 15 bottles/30 days
LEDIPASVIR/SOFOSBUVIR TAB	QL= 1 tab/ day
LENVIMA CAP	QL= 3 caps/day; Only available through Accredo 888-773-7376
letrozole tab	QL= 1 tab/day
LEVALBUTEROL INHALER, XOPENEX HFA INHALER	QL= 2 inhalers/30 days
levalbuterol neb soln	QL= 6 nebs/day
levonorgestrel tab 0.75mg	QL= 4 tabs/365 days
levonorgestrel tab 1.5mg	QL= 2 tabs/365 days
linezolid susp	QL= 600ml/28 days
linezolid tab	QL= 28 tabs/30 days
LORBRENA TAB 100MG	QL= 1 tab/day
LORBRENA TAB 25MG	QL= 3 tabs/day
LOTEMAX OPHTH OINT	QL= 14gm/365 days
LUMIGAN OPHTH SOLN	QL= 2.5ml/25 days
LYNPARZA CAP	QL= 16 caps/day; Only available through Biologics 800-850-4306
LYNPARZA TAB	QL= 4 tabs/day; Only available through Biologics 800-850-4306
MAVYRET TAB	QL= 3 tabs/day
medroxyprogesterone inj	QL= 1 inj/90 days
methamphetamine tab	QL= 5 tabs/day
methylphenidate CD cap 10mg, 20mg, 30mg	QL= 2 caps/day
methylphenidate CD cap 40mg	QL= 1 cap/day
methylphenidate CD cap 50mg	QL= 1 cap/day
methylphenidate CD cap 60mg	QL= 1 cap/day
methylphenidate ER cap 10mg, 20mg, 30mg	QL= 2 caps/day
methylphenidate ER cap 40mg	QL= 1 cap/day
methylphenidate ER tab 10mg	QL= 2 tabs/day
methylphenidate ER tab 18mg	QL= 1 tab/day
METHYLPHENIDATE ER TAB 18mg, 27mg, 36mg, 54mg	QL= 1 tab/day
methylphenidate ER tab 20mg	QL= 3 tabs/day
methylphenidate ER tab 27mg	QL= 1 tab/day
methylphenidate ER tab 36mg	QL= 2 tabs/day

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
methylphenidate ER tab 54mg	QL= 1 tab/day
methylphenidate tab	QL= 3 tabs/day
MIGRANAL SPRAY	QL= 8 sprays/fill; 2 fills/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
modafinil tab	QL= 2 tabs/day
mometasone nasal spray	QL= 1 bottle/fill
MORPHINE SULFATE ER BEAD CAP	QL= 1 cap/day
morphine sulfate ER cap	QL= 2 caps/day
morphine sulfate ER tab	QL= 2 tabs/day
MULPLETA TAB	QL= 7 tabs/fill
naratriptan tab	QL= 9 tabs/30 days
NATROBA SUSP	QL= 1 bottle/fill
NERLYNX TAB	QL=6 tabs/day
NEVANAC OPHTH SUSP	QL= 4 bottles/year
nicotine gum	Limited to 180 days/calendar year
NICOTINE KIT	Limited to 180 days/calendar year
nicotine lozenge	Limited to 180 days/calendar year
nicotine patch	Limited to 180 days/calendar year
NICOTROL INHALER	Limited to 180 days/calendar year
NICOTROL NASAL SPRAY	Limited to 180 days/calendar year
NUBEQA TAB	QL= 4 tabs/day
NUCALA INJ	QL= 1 inj/28 days
NUCYNTA ER TAB	QL= 2 tabs/day
NUCYNTA TAB	QL= 6 tabs/day
NUDEXTA CAP	QL= 2 caps/day
NUVARING	QL= 1 ring/28 days
OFEV CAP	QL= 2 caps/day; Only available through Walgreens 888-347-3416
olanzapine ODT	QL= 1 tab/day
olanzapine tab	QL= 1 tab/day
olopatadine nasal spray	QL= 1 inhaler/30 days
olopatadine ophth soln 0.2%	QL= 2.5ml/30 days
omeprazole cap	QL= 2 caps/day
ondansetron ODT	QL= 15 tabs/30 days
ondansetron soln	QL= 150ml/30 days
ONDANSETRON TAB	QL= 1 tab/30 days
ondansetron tab 24mg	QL= 1 tab/30 days
ondansetron tab 4mg, 8mg	QL= 15 tabs/30 days
ORENCIA CLICK INJ	QL= 4 inj/28 days
ORENCIA SC INJ 125MG/ML	QL= 4 inj/28 days
ORENCIA SC INJ 50MG/0.4ML	QL= 4 inj/28 days
ORENCIA SC INJ 87.5MG/0.7ML	QL= 4 inj/28 days
ORILISSA TAB 150MG	QL=1 tab/day
ORILISSA TAB 200MG	QL= 2 tabs/day

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
oseltamivir cap	QL= 10 caps/ 180 days
oseltamivir cap 30mg	QL= 20 caps/ 180 days
oseltamivir susp	QL= 180ml/180 days
OTEZLA STARTER PACK	QL= 1 pack/ 28 days
OTEZLA TAB	QL= 2 tabs/day
OXYCODONE/IBUPROFEN TAB	
OXYCONTIN CR TAB	QL= 4 tabs/day
oxymorphone ER tab	QL= 2 tabs/day
oxymorphone tab 10mg	QL= 8 tabs/day
oxymorphone tab 5mg	QL= 16 tabs/day
OXYTROL PATCH	QL= 8 patches/30 days
OZEMPIC INJ	QL= 1 pack/28 days
paliperidone ER tab	QL= 1 tab/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
paliperidone ER tab 6mg	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
pantoprazole EC tab	QL= 2 tabs/day
paroxetine ER tab 12.5mg	QL= 1 tab/day
paroxetine ER tab 25mg, 37.5mg	QL= 2 tabs/day
paroxetine tab 10mg	QL= 1.5 tabs/day
paroxetine tab 20mg, 40mg	QL= 1 tab/day
paroxetine tab 30mg	QL= 2 tabs/day
PAXIL SUSP	QL= 15ml/day
peg 3350/electrolytes soln	Covered at \$0 for members 50-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay
PERFOROMIST NEB SOLN	QL= 2 nebs/day
PLAN B ONE-STEP	QL= 2 tabs/365 days
PLAN B TAB	QL= 4 tabs/365 days
PNEUMOVAX INJ	QL= 1 vaccine/lifetime
POTIGA TAB	QL= 3 tabs/day
PRADAXA CAP	QL= 2 caps/day
PRALUENT INJ	QL= 2 inj/28 days
PREVACID SOLUTAB	QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
PREVNAR 13 INJ	QL= 1 vaccine/lifetime
PROAIR HFA INHALER	
pyrimethamine tab	QL= 3 tabs/day; Only available through Walgreens 888-347-3416
QNASL NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
quetiapine tab	QL= 2 tabs/day
quetiapine tab 25mg	QL= 3 tabs/day
quetiapine tab 50mg	QL= 3 tabs/day
quetiapine XR tab	QL= 2 tabs/day
QUILLIVANT XR SUSP	QL= 360ml/30 days

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
rabeprazole EC tab	QL= 1 tab/day; Step Therapy requires trial of omeprazole, pantoprazole or lansoprazole
ramelteon tab	QL= 1 tab/day
RELENZA DISKHALER	QL= 1 inhaler/180 days
REPATHA INJ	QL= 2 inj/28 days
REPATHA PUSHTRONEX INJ	QL= 1 inj/28 days
RESTASIS OPHTH EMULSION	QL= 60 unit dose vials/30 days
RINVOQ ER TAB	QL= 1 tab/day
risedronate DR tab	QL= 4 tabs/28 days; Step Therapy requires trial of alendronate, ibandronate or FOSAMAX+D
risperidone ODT	QL= 2 tabs/day
risperidone soln	QL= 240ml/30 days
risperidone tab	QL= 2 tabs/day
rizatriptan ODT	QL= 9 tabs/30 days
rizatriptan tab	QL= 9 tabs/30 days
ROZEREM TAB	QL= 1 tab/day
ROZLYTREK CAP	QL= 3 caps/day
RUBRACA TAB	QL= 4 tabs/day; Only available through Avella Pharmacy (877) 546-5779
RYBELSUS TAB	QL=1 tab/day
SANCUSO	QL= 1 patch/30 days
SANTYL OINT	QL= 90gm/30 days
SAPHRIS SL TAB	QL= 2 tabs/day; Step Therapy requires trial of risperidone, olanzapine, quetiapine, ziprasidone
SEREVENT DISKUS INHALER	QL= 1 inhaler/30 days
sertraline tab 100mg	QL= 2 tabs/day
sertraline tab 25mg, 50mg	QL= 1.5 tabs/day
SIGNIFOR INJ	QL= 2 vials/day; Only available through Accredo 888-773-7376
SILENOR TAB	QL= 1 tab/day
SIVEXTRO TAB	QL= 6 tabs/fill
SKYRIZI INJ	QL= 2 inj/84 days
SOFOSBUVIR/VELPATASVIR TAB	QL= 1 tab/ day
SPIRIVA HANDIHALER	QL= 1 inhaler/30 days
STELARA INJ	QL= 1 inj/84 days
STRIBILD TAB	QL= 1 tab/day
STRIVERDI RESPIMAT INHALER	QL= 1 inhaler/30 days
sumatriptan inj	QL= 10 inj/30 days
SUMATRIPTAN INJ 6MG/0.5ML	QL= 5 inj/30 days
sumatriptan nasal spray	QL= 18 sprays/30 days
sumatriptan tab	QL= 9 tabs/30 days
sumatriptan vial inj	QL= 10 inj/30 days
SUMAVEL DOSEPRO INJ	QL= 6 inj/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
SUNOSI TAB	QL= 1 tab/day
SYMDEKO TAB	QL= 2 tabs/day; Only available through Maxor Pharmacy 800-658-6046 or Walgreens 888-347-3416

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
SYMJEPI INJ	QL= 2 inj/fill
TALTZ INJ	QL= 1 inj/28 days
TALZENNA CAP 0.25MG	QL= 3 caps/day
TALZENNA CAP 1MG	QL= 1 cap/day
TEGSEDI INJ	QL= 4 inj/28 days; Only available through Accredo 888-773-7376
TIBSOVO TAB	QL= 2 tabs/day; Only available through Diplomat Pharmacy 877-977-9118
TRADJENTA TAB	QL= 1 tab/day
tramadol ER tab	QL= 1 tab/day
TRAMADOL ER/CONZIP CAP 100MG, 200MG, 300MG	QL= 1 cap/day
tramadol tab	QL= 8 tabs/day
tramadol/acetaminophen tab	QL= 8 tabs/day
TRAVATAN Z DROPS	QL= 2.5ml/30 days
travoprost ophth soln	QL= 2.5ml/30 days
triamcinolone nasal spray	QL= 1 bottle/fill
TRIJARDY XR TAB 10-5-1000MG, 25-5-1000MG	QL= 1 tab/day
TRIJARDY XR TAB 5-25-1000MG, 12.5-2.5-1000MG	QL= 2 tabs/day
trilyte soln	Covered at \$0 for members 50-75 years, all other members covered at generic copay Limited to 2 fills/calendar year
TRINTELLIX TAB	QL= 1 tab/day
TRULICITY INJ	QL= 4 pens/28 days
TURALIO CAP	QL= 4 caps/day; Only available through Biologics 800-850-4306
TYVASO INH SOLN	QL= 1 ampule/day; Only available through Accredo 888-773-7376
UPTRAVI TAB	QL= 2 tabs/day; Only available through Accredo 888-773-7376
valacyclovir tab	QL= 2 tabs/day
valacyclovir tab 1000mg	QL= 3 tabs/day
VARUBI TAB	QL= 2 tabs/day; Restricted to Oncology or Hematology Specialist
venlafaxine ER cap 150mg	QL= 2 caps/day
venlafaxine ER cap 37.5mg	QL= 1 cap/day
venlafaxine ER cap 75mg	QL= 3 caps/day
venlafaxine tab	QL= 5 tabs/day
VENTAVIS INH SOLN	QL= 9 ampules/day; Only available through Accredo 888-773-7376
VENTOLIN HFA INHALER	QL= 2 inhalers/30 days
VERZENIO TAB	QL=2 tabs/day
VICTOZA INJ	QL= 9ml/30 days
VIIBRYD TAB	QL= 1 tab/day
VIMPAT TAB	QL= 2 tabs/day
VITRAKVI CAP 100MG	QL= 2 caps/day; Only available through US Bioservices 888-518-7246
VITRAKVI CAP 25MG	QL= 6 caps/day; Only available through US Bioservices 888-518-7246
VITRAKVI SOLN	QL= 10ml/day; Only available through US Bioservices 888-518-7246
VIZIMPRO TAB	QL= 1 tab/day

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Vantage Health Plan, Inc. 2019 Commercial/Marketplace Formulary Cont.
Last Updated* 8/1/2020
Quantity Limit (QL)

- The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
VOSEVI TAB	QL= 1 tab/day
VYNDAMAX CAP	QL= 1 cap/day
VYNDAQEL CAP	QL= 4 caps/day
VYVANSE CAP	QL= 1 cap/day
VYVANSE CHEW TAB	QL= 1 cap/day
wixela inhub inhaler	QL= 1 inhaler/30 days
XALKORI CAP	QL= 2 caps/day
XIFAXAN TAB 200MG	QL= 9 tabs/3 days
XIFAXAN TAB 550MG	QL= 2 tabs/day; Quantities up to 3 tabs/day for the treatment of IBS-D allowed via PA
XIGDUO XR TAB 2.5-1000MG, 5-1000MG	QL= 2 tabs/day
XIGDUO XR TAB 5-500MG, 10-500MG, 10-1000MG	QL= 1 tab/day
XOSPATA TAB	QL= 3 tabs/day; Only available through Diplomat Pharmacy 877-977-9118
XTAMPZA ER CAP	QL= 120 caps/30 days
XULTOPHY INJ	QL= 15ml/30 days
XYREM SOLN	QL= 540ml/30 days; Only available through Xyrem Central Pharmacy 866-997-3688
zaleplon cap	QL= 1 cap/day
ZEJULA CAP	QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118
ZETONNA NASAL SPRAY	QL= 1 bottle/30 days; Step therapy requires trial of flunisolide, fluticasone, triamcinolone nasal or mometasone
ZIOPTAN OPHTH SOLN	QL= 2 bottles/day
ziprasidone cap	QL= 2 caps/day
zolmitriptan ODT	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
zolmitriptan tab	QL= 9 tabs/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
zolpidem ER tab	QL= 1 tab/day
zolpidem tab	QL= 1 tab/day
zolpidem tartrate SL tab	QL= 1 tab/day
ZOMIG NASAL SPRAY	QL= 18 sprays/30 days; Step Therapy requires trial of naratriptan, sumatriptan or rizatriptan
ZUPLENZ SL FILM	QL= 10 films/30 days
ZYKADIA CAP	QL= 5 caps/day
ZYKADIA TAB	QL= 3 tabs/day
ZYTIGA TAB 250MG	QL= 4 tabs/day
ZYTIGA TAB 500MG	QL= 2 tabs/day

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