Blue Cross and Blue Shield of Nebraska TraditionalRxList

June 2026

This Blue Cross and Blue Shield of Nebraska Individual Six-Tier Prescription Drug List (PDL) is regularly updated. Please visit **NebraskaBlue.com/DrugList to search medications.**

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To search for a drug name within this document, use the **Control** and **F** keys on your keyboard (Command and F on a Mac) or go to the **Edit** drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

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Introduction

The attached Blue Cross and Blue Shield of Nebraska (BCBSNE) Six-Tier Prescription Drug List shows covered drugs for a broad range of diseases.

Generic drugs are shown in lowercase, **boldface** type. Most generic drugs are followed by a corresponding brand-name drug in parentheses. Some generic products have no corresponding brand name.

Brand prescription drugs are shown in capital letters, followed by the generic name.

The BCBSNE TraditionalRxList is organized into broad categories (e.g., anti-infective drugs). Within most categories, drugs are sub-grouped by drug class (e.g., penicillins) or by use for a specific medical condition (e.g., diabetes).

Show this list to your physician and pharmacist. Physicians are encouraged to prescribe drugs on this list, when appropriate. However, decisions regarding therapy and treatment are always between you and your physicians.

The current version of this drug list is available at the BCBSNE website at **NebraskaBlue.com/DrugList,** or by calling the member services number listed on the back of your ID card. **Online pharmacy tools** are available through myNebraskaBlue.com. With these tools, BCBSNE members can find drug cost estimates or check if a particular drug is on TraditionalRxList.

How formulary drugs are selected

Drugs on this list are selected based on the recommendations of a committee made up of physicians and pharmacists from throughout the country. The committee reviews drugs regulated by the U.S. Food and Drug Administration (FDA).

Both drugs that are newly approved by the FDA as well as those that have been on the market for some time are considered. Drugs are selected based on safety, efficacy, cost and how they compare to other drugs currently on the list.

Tiers

This prescription benefit is multi-tiered, placing prescription drugs into one of six copay/coinsurance levels:

- Lowest-priced Generic Drugs (Tier 1)
- All Other Generic Drugs (Tier 2)
- Preferred Brand Drugs (Tier 3)
- Non-Preferred Brand Drugs (Tier 4)
- Preferred Specialty Drugs (Tier 5)
- Non-Preferred Specialty Drugs (Tier 6)

Note: Drugs listed with an “A” in the Drug Tier column indicate the drug may be covered at $0 costshare if you meet the criteria under the Affordable Care Act.

Affordable Care Act

Please note: some drugs may have limited or $0 cost-sharing under the Affordable Care Act. If you do not find the drug for which you are searching, contact BCBSNE to find out if the drug is available over the counter or is covered under your medical benefit.

Specialty Products

Specialty drugs are used in the treatment of medical conditions such as hepatitis, multiple sclerosis and rheumatoid arthritis. Specialty drugs may be oral or injectable medications that can either be self-administered or administered by a health care professional.

Drug manufacturers restrict where you may obtain certain drugs. These drugs are marked as “Limited Distribution.” These may require the use of a designated pharmacy to fill a prescription.

Step Therapy

Your benefit plan may include a step therapy program. This means you may need to try another proven, cost-effective medication before coverage may be available for the drug included in the program. Many brand drugs have less expensive generic or brand alternatives that might be an option for you. If a step therapy is required for a medication listed in this document, it will be noted next to the medication with a dot under the Step Therapy column.

Preauthorization

Your benefit plan may require preauthorization for certain drugs that are high cost or have the potential for misuse. This means your doctor will need to submit a preauthorization request for coverage of these medications, and the request will need to be approved before the medication will be covered under your plan. If a preauthorization is required for a medication listed in this document, it will be noted next to the medication with a dot under the Preauthorization column.

Maximum Monthly Quantity

Maximum monthly quantities help encourage medication use as intended by the FDA. Maximum monthly quantities are placed on medications in certain drug categories. For the medications listed in this document, if a maximum monthly quantity applies, it will be noted next to the medication with a dot under the Maximum Monthly Quantity column.

Limits may include: quantity of covered medication per prescription and/or quantity of covered medication in a given time period.

There may also be limits for members within a certain age range, and coverage only for members of a specific gender.

Providers

If you have any questions on the following covered drug list, please contact BCBSNE Member Services.

Abbreviation Key

aer ..... aerosol
cap ..... capsules
chew ..... chewable
conc ..... concentrate
cr ..... controlled release
dr ..... delayed release
ec ..... enteric coated
equiv ..... equivalent
er ..... extended release
gm ..... gram
inhal ..... inhaler
inj ..... injection
liqd ..... liquid
mg ..... milligram
ml ..... milliliter
nebu ..... nebulizer
odt. ..... orally disintegrating tabs
oint ..... ointment
ophth ..... ophthalmic
osm ..... osmotic release
pack ..... packets
powd ..... powder
pttw ..... twice-weekly patch
sl ..... sublingual
soln ..... solution
suppos ..... suppositories
susp ..... suspension
tab ..... tablets
td ..... transdermal
w/ ..... with

Non-discrimination and Translation Notice

Discrimination is Against the Law

Blue Cross and Blue Shield of Nebraska (BCBSNE) complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. BCBSNE does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.
BCBSNE:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Customer Service at 800-991-5840, TTY 711 between 7:30 a.m. to 6 p.m., Central time, Monday through Friday.

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

Manager, Corporate Compliance
Blue Cross and Blue Shield of Nebraska
P.O. Box 3248
Omaha, NE 68180-001
800-991-5840, TTY: 711
CivilRights@NebraskaBlue.com

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, our Manager of Corporate Compliance is available to help you.
You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at hhs.gov/sites/default/files/ocr-cr-complaint-form-package.pdf.
For quick processing, use the OCR online portal to file a complaint.

ATTENTION: This notice may have important information about your application or coverage. Look for key dates in this notice. You may need to take action by certain deadlines to keep your health coverage or get help with costs. If you or someone you're helping has questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-800-991-5840. This notice is translated as federally required.

Arabic
تنبيه: قد يتضمن هذا الإشعار معلومات مهمة عن تطبيقك أو تأمينك. ابحث عن التواريخ الرئيسية في هذا الإشعار. قد يلزمك اتخاذ إجراء قبل المواعيد النهائية المحددة للحفاظ على التأمين الصحي أو للحصول على مساعدة بشأن التكاليف. إذا كنت أنت أو أحد من تساعدهم لديكم أسئلة، فلك الحق في الحصول على مساعدة ومعلومات بلغتك وبدون تكلفة. للتحدث مع أحد المترجمين الفوريين، اتصل برقم 1-800-991-5840

Chinese Traditional
注意：本通知可能含有與您的申請或保險有關的重要資訊。在本通知中尋找重要的日期。您可能需要在某個截止日期前採取行動，以保持您的健康保險或獲得費用方面的幫助。如果您或者您正幫助的人有疑問，您有權利以您的語言免費獲得提供的幫助與資訊。致電口譯員，請撥打1-800-991-5840。

German
Achtung: Diese Mitteilung kann wichtige Informationen über Ihren Antrag oder die Versicherungsdeckung beinhalten. Beachten Sie wichtige Fristen in dieser Mitteilung. Sie müssen unter Umständen Maßnahmen innerhalb bestimmter Fristen ergreifen, um Ihren Krankenversicherungsschutz zu erhalten oder eine Kostenerstattung zu erhalten. Wenn Sie oder jemand, dem Sie helfen, Fragen hat, können Sie kostenlos Hilfe und Informationen in Ihrer Sprache erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte 1-800-991-5840 an.

Spanish (Mexico)
ATENCIÓN: Este aviso puede contener información importante sobre su solicitud o cobertura. Ponga atención a las fechas clave en este aviso. Puede ser que usted necesite realizar algunas acciones para determinadas fechas y así mantener su cobertura de salud o para obtener ayuda con los costos. Si usted o alguien a quien usted ayuda tiene alguna pregunta, tiene el derecho de recibir información y ayuda en su propio idioma sin costo. Para hablar con un intérprete, llame al 1-800-991-5840.

Farsi
توجه این اعلامیه ممکن است اطلاعات مهمی درباره درخواست یا طرح پوشش بیمه‌تان داشته باشد. تاریخ های اصلی را در این اعلامیه جستجو کنید. ممکن است لازم باشد تا موعد مقرری اقدام کنید تا پوشش بیمه درمانیتان حفظ شود یا هزینه های درمانی را دریافت کنید. اگر شما یا فردی دیگر که به او کمک می کنید، سؤالی دارید، از این حق برخوردار هستید تا راهنمایی و اطلاعات را به صورت رایگان به زبان خودتان دریافت کنید. برای صحبت کردن با یک مترجم، با شماره 1-800-991-5840 تماس بگیرید.

French (Europe)
ATTENTION : Cet avis peut contenir des informations importantes concernant votre demande ou votre garantie. Prêtez attention aux dates clés indiquées. Il vous faudra peut-être prendre des mesures avant une certaine date pour pouvoir conserver votre assurance santé ou bénéficier d'aides au paiement. Si vous ou une personne que vous aidez avez des questions, vous pouvez obtenir gratuitement de l'assistance et des informations dans votre langue. Pour parler à un interprète, appelez le 1-800-991-5840.

Japanese
ご注意：本通知書には、患者さんの申請や保険について重大な情報が含まれている可能性があります。本通知書の日付をご覧ください。医療保険を利用したり、費用についてサポートを受けるには、本通知書に従って特定の期限までに手続きしてください。患者さん、または付き添いの方が質問がある場合は、母国語で無料で支援を受けたり、情報を受け取る権利があります。通訳と話したい場合は、1-800-991-5840. まで電話をおかけください。

Karen
ဟ်သူဉ်ဟ်သး–တၢ်ဘိးဘဉ်သ့ဉ်ညါဆံၤ ဘဉ်သ့ဉ်သ့ဉ် ကအိဉ်ဒီးတၢ်ဂ့ၢ်တၢ်ကျိၤလၢ အရူဒိဉ်ဘဉ်ယး နလံာ်ပတံထိဉ်တၢ် မ့တမ့ၢ် တၢ်အုဉ်ကီၤသးန္ဉ်လီၤ.
ကွၢ်ယု မ့ၢ်နံၤမ့ၢ်သီအရူဒိဉ်လၢ လံာ်ဘိးဘဉ်သ့ဉ်ညါဆံၤအပူၤတက့ၢ်.
ဘဉ်သ့ဉ်သ့ဉ် နကဘဉ် ဟံးဂ့ၢ်ဝီလၢ မ့ၢ်နံၤလၢခံကတၢ်လၢ တၢ်ဟ်ပနီဉ်နန္ဉ်နၤ လၢနကဟ့ဉ်နတၢ်အိဉ်ဆူဉ်အိဉ်ချ့ တၢ်ဘူးတၢ်လဲတဖဉ် မ့တမ့ၢ် မၤန္ၢ်တၢ်မၤစၢၤလၢ တၢ်ပ့ၤလီၤလဲတဖဉ်နှဉ်လီၤ.
နၤ မ့တမ့ၢ် ပှၤတဂၤဂၤလၢ နမၤစၢၤမ့ၢ်အိဉ်ဒီးတၢ်သံကွၢ်အဃိ. နအိဉ်ဒီးတၢ်ခွဲးတၢ်ယာ်လၢ ကမၤန္ၢ်တၢ်မၤစၢၤဒီးတၢ်ဂ့ၢ်တၢ်ကျိၤလၢ နကျိာ်လၢ တလၫ်ဘူဉ်လၫ်စ့ၤဘဉ်နှဉ်လီၤ.
လၢနကကတိၤတၢ်ဒီး ပှၤကျိးထံတၢ်အဂိၢ်. ကိး1-800-991-5840.တက့ၢ်.

Korean
주의: 본고지에는해당신청서또는적용범위에대한중요한정보가있을수있습니다.
본고지의주요날짜를찾으십시오.해당건강보험을유지하거나비용을지원받는특정기한까지조치를취하셔야합니다.본인자신이나본인이돕고있는누군가가질문이있다면무료로모국어로된도움과정보를얻을수있는권리가있습니다.통역사와통화하려면1-800-991-5840. 번으로전화하십시오.

Kurdish
ئاگاداری
ڕەنگە ئەم ئاگادارییە زانیاری گرنگی تێدا بێت دەربارەی داواکاری یان ڕووماڵکردنەکەت.بەدوای بەرواربەرەکییەکانی ناو ئەم ئاگادارییە بگەڕێ.لەوانەیە پێویست بکات لە هەندێک دوا وادە کردارێک بکەیت بۆ ئەوەی ڕووماڵی تەندروستیت بەردەوام بێت یان یارمەتی بۆ تێچووەکانت دەست بخەیت.ئەگەر تۆ یان کەسێک کە تۆ یارمەتی دەدەیت پرسیاری هەیە، تۆ مافی دەسکەوتنی یارمەتی و زانیاریت بە زمانی خۆت بێ بەرامبەر هەیە.بۆ قسەکردن لەگەڵ وەرگێڕێک، پەیوەندی بە 18009915840. بکە.

Lao
ສິ່ງທີ່ຄວນເອົາໃຈໃສ່: ແຈ້ງການສະບັບນີ້ ອາດຈະມີຂໍ້ມູນທີ່ສຳຄັນກ່ຽວກັບການສະໝັກ ຫຼື ການຄຸ້ມຄອງສຸຂະພາບຂອງທ່ານ.
ຈົ່ງຊອກຫາວັນທີທີ່ສຳຄັນໃນແຈ້ງການສະບັບນີ້. ທ່ານອາດຈະຕ້ອງດຳເນີນການໃນຂອບເຂດເວລາໃດໜຶ່ງ
ເພື່ອຮັກສາການຄຸ້ມຄອງດ້ານສຸຂະພາບຂອງທ່ານ ຫຼື ໄດ້ຮັບການຊ່ວຍເຫຼືອທາງດ້ານຄ່ໃຊ້ປະມານ. ຖ້າຫາກທ່ານ ຫຼືບຸກຄົນທີ່ທ່ານກຳລັງຊ່ວຍເຫຼືອຢູ່ນັ້ນ ມີຄຳຖາມ,ທ່ານມີສິດໄດ້ຮັບການຊ່ວຍເຫຼືອ ແລະ ໄດ້ຮັບຂໍ້ມູນທີ່ເປັນພາສາຂອງທ່ານ ໂດຍບໍ່ເສຍຄ່າໃຊ້ຈ່າຍ. ຕ້ອງການລົມກັບນາຍແປພາສາ,
ຈົ່ງໂທຫາເບີ 1-800-991-5840.

Nepali
ध्यानाकर्षण: यो सूचनामा तपाईको निवेदन वा कभरेजको बारेमा महत्वपूर्ण जानकारी हुनसक्छ। यो सूचनामा मुख्य मितिहरू हेर्नुहोस्। तपाईको स्वास्थ्य कभरेज वा लागतमा मद्दत प्राप्त गर्न तपाईले निश्चित समयसीमा भित्र कारबाही लिनुपर्ने हुनसक्छ। तपाईं वा तपाईले सहायता गरेका कसैसँग जिज्ञासाहरू छन् भने तपाईंसँग आफ्नो भाषामा नि:शुल्क सहायता र जानकारी प्राप्त गर्ने अधिकार छ। दोभाषेसँग कुरा गर्न 1-800-991-5840.मा कल गर्नुहोस्।

Oromo
HUBAACHIISA: Beeksisi kun odeeffannoo barbaachisaa waa'ee iyyata keetii yookaan waa'ee tajaajiloota qabaachuu mala. Beeksisa kana irraa guyyoota barbaachisoo ta'an ilaali. Tajaajila fayyaa kee itti fufsiisuuf guyyoota murtaa'an irratti tarkaanfiin ati fudhattu yookaan kaffaltiidhaan gargaarsi ati argattu jiraachu mala. Yoo ati ykn namni ati gargaartu, gaaffii qabaattan, gatii malee gargaarsaa fi oddeeffanno afaan dandeessaaniin argachuun mirga keessaani. Warra afaan hikkaaniif lakkoofsa kanaan bilbilaa 1-800-991-5840.

Russian
ВНИМАНИЕ! В данном уведомлении может содержаться важная информация о вашей заявке или страховке. В нем также указаны ключевые даты. Вам может потребоваться выполнить некоторые действия к определенному сроку для сохранения вашей медицинской страховки или получения помощи в оплате расходов. Если у вас или у человека, которому вы помогаете, возникнут вопросы, вы имеете право получить помощь и информацию на своем языке бесплатно. Чтобы поговорить с переводчиком, позвоните по номеру 1-800-991-5840.

Vietnamese
CHÚ Ý: Thông báo này có thể chứa thông tin quan trọng về đơn đăng ký hoặc bảo hiểm của quý vị. Tìm những ngày chính trong thông báo này. Quý vị có thể cần hành động trước một số thời hạn để duy trì bảo hiểm sức khỏe của mình hoặc được giúp đỡ có tính phí. Nếu quý vị hoặc người quý vị đang giúp đỡ, có thắc mắc, quý vị có quyền lấy thông tin và được trợ giúp bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi số 1-800-991-5840.

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ANTI-INFECTIVE AGENTS							
PENICILLINS							
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg, 250 mg	4						
amoxicillin (trihydrate) cap 250 mg, 500 mg	1						
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1						
amoxicillin (trihydrate) tab 500 mg, 875 mg	1						
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	1						
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)	2						
amoxicillin & k clavulanate for susp 400-57 mg/5ml	2						
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	2						
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	2						
amoxicillin & k clavulanate tab 250-125 mg	2						
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	1						
amoxicillin & k clavulanate tab 875-125 mg	1						
ampicillin cap 500 mg	1						
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	4						
dicloxacillin sodium cap 250 mg, 500 mg	2						
PENICILLIN V POTASSIUM - penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	4						
penicillin v potassium tab 250 mg, 500 mg	1						
CEPHALOSPORINS							
CEFACLOR - cefaclor cap 250 mg, 500 mg	4						
CEFADROXIL - cefadroxil tab 1 gm	4						
cefadroxil cap 500 mg	1						
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	2						
cefdinir cap 300 mg	1						
cefdinir for susp 125 mg/5ml, 250 mg/5ml	2						
CEFIXIME - cefixime for susp 100 mg/5ml	2						
cefixime for susp 200 mg/5ml (Suprax)	2						
CEFPODOXIME PROXETIL - cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	4						
cefpodoxime proxetil tab 100 mg, 200 mg	2						
cefprozil for susp 125 mg/5ml, 250 mg/5ml	2						
cefprozil tab 250 mg, 500 mg	2						
cefuroxime axetil tab 250 mg	1						
cefuroxime axetil tab 500 mg	2						
cephalexin cap 250 mg, 500 mg	1						
cephalexin cap 750 mg (Keflex)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
cephalexin for susp 125 mg/5ml, 250 mg/5ml	2						
MACROLIDES							
azithromycin for susp 100 mg/5ml (Zithromax)	2						
azithromycin for susp 200 mg/5ml (Zithromax)	1						
azithromycin tab 250 mg, 500 mg (Zithromax)	1						
azithromycin tab 600 mg	2						
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	4						
clarithromycin tab er 24hr 500 mg	2						
clarithromycin tab 250 mg, 500 mg	2						
DIFICID - fidaxomicin for susp 40 mg/ml	3						
E.E.S. 400 - erythromycin ethylsuccinate tab 400 mg	4						
ERYTHROMYCIN DR - erythromycin w/ delayed release particles cap 250 mg	4						
erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	2						
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	2						
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	2						
erythromycin tab 250 mg, 500 mg	2						
fidaxomicin tab 200 mg (Dificid)	2						
TETRACYCLINES							
demeclocycline hcl tab 150 mg, 300 mg	2						
doxycycline hyclate cap 50 mg	1						
doxycycline hyclate cap 100 mg (Vibramycin)	1						
doxycycline hyclate tab 20 mg, 100 mg	1						
doxycycline monohydrate cap 50 mg, 100 mg	1						
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	2						
doxycycline monohydrate tab 50 mg, 100 mg	1						
doxycycline monohydrate tab 75 mg, 150 mg	2						
minocycline hcl cap 50 mg	1						
minocycline hcl cap 75 mg, 100 mg	2						
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	4					•	
tetracycline hcl cap 250 mg, 500 mg	2						
FLUOROQUINOLONES							
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	4						
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	1						
ciprofloxacin hcl tab 750 mg (base equiv)	1						
levofloxacin oral soln 25 mg/ml	2						
levofloxacin tab 250 mg, 500 mg, 750 mg	1						
moxifloxacin hcl tab 400 mg (base equiv)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
OFLOXACIN - ofloxacin tab 300 mg	4						
OFLOXACIN - ofloxacin tab 400 mg	2						
AMINOGLYCOSIDES							
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	6	•			•	•	
HUMATIN - paromomycin sulfate cap 250 mg	3					•	
KITABIS PAK - tobramycin nebu soln 300 mg/5ml	4					•	
neomycin sulfate tab 500 mg	1						
TOBRAMYCIN - tobramycin nebu soln 300 mg/5ml	6				•		
tobramycin nebu soln 300 mg/5ml (Tobi)	5				•		
SULFONAMIDES							
sulfadiazine tab 500 mg	2						
ANTIMYCOBACTERIAL AGENTS							
CYCLOSERINE - cycloserine cap 250 mg	4						
ethambutol hcl tab 100 mg	2						
ethambutol hcl tab 400 mg (Myambutol)	2						
isoniazid syrup 50 mg/5ml	2						
isoniazid tab 100 mg, 300 mg	1						
PRETOMANID - pretomanid tab 200 mg	3					•	
PRIFTIN - rifapentine tab 150 mg	3						
pyrazinamide tab 500 mg	2						
rifabutin cap 150 mg (Mycobutin)	2						
rifampin cap 150 mg, 300 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	5				•	•	
ANTIFUNGALS							
CRESEMBA - isavuconazonium sulfate cap 74.5 mg, 186 mg	4						
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)	2						
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)	1						
flucytosine cap 250 mg, 500 mg (Ancobon)	2						
griseofulvin microsize susp 125 mg/5ml	2						
griseofulvin microsize tab 500 mg	2						
griseofulvin ultramicrosize tab 125 mg, 250 mg	2						
itraconazole cap 100 mg (Sporanox)	2						
ketoconazole tab 200 mg	2						
NOXAFIL - posaconazole for delayed release susp packet 300 mg	3						
nystatin tab 500000 unit	2						
posaconazole susp 40 mg/ml (Noxafil)	2						
posaconazole tab delayed release 100 mg (Noxafil)	2						
terbinafine hcl tab 250 mg	1						
voriconazole for susp 40 mg/ml (Vfend)	2						
voriconazole tab 50 mg, 200 mg (Vfend)	2						
ANTIVIRALS							

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	2						
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	2						
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	2						
acyclovir cap 200 mg	1						
acyclovir susp 200 mg/5ml (Zovirax)	2						
acyclovir tab 400 mg, 800 mg	1						
adefovir dipivoxil tab 10 mg (Hepsera)	2						
APRETUDE - cabotegravir im extended release susp 600 mg/3ml	5				•	•	•
APTIVUS - tipranavir cap 250 mg	4						
atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv) (Reyataz)	2						
BARACLUDE - entecavir oral soln 0.05 mg/ml	3						
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	3						
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	3						
darunavir tab 600 mg, 800 mg (Prezista)	2						
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	4						
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	3						
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	4						
EDURANT PED - rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	4						
efavirenz tab 600 mg (Sustiva)	2						
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla)	2						
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	2						
EFAVIRENZ/LAMIVUDINE/TENO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	2						
emtricitabine caps 200 mg (Emtriva)	2						
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg (Truvada)	2						
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada)	2						•
EMTRIVA - emtricitabine soln 10 mg/ml	4						
entecavir tab 0.5 mg, 1 mg (Baraclude)	2						
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	5	•		•	•		
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg	5	•		•	•		
etravirine tab 100 mg, 200 mg (Intelence)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	3						
famciclovir tab 125 mg, 250 mg, 500 mg	2						
fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)	2						
INTELENCE - etravirine tab 25 mg	3						
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	3						
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	3						
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	3						
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	3						
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	4						
LAGEVRIO - molnupiravir cap 200 mg	3			•			
lamivudine oral soln 10 mg/ml (Epivir)	2						
lamivudine tab 100 mg (hbv) (Epivir hbv)	2						
lamivudine tab 150 mg, 300 mg (Epivir)	2						
LEDIPASVIR/ SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	4	•		•	•		
lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra)	2						
maraviroc tab 150 mg, 300 mg (Selzentry)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
NEVIRAPINE - nevirapine susp 50 mg/5ml	4						
nevirapine tab er 24hr 400 mg (Viramune xr)	2						
nevirapine tab 200 mg	1						
NORVIR - ritonavir powder packet 100 mg	4						
oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	2						
oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	2						
PAXLOVID - nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	3			•			
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	3			•			
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	3			•			
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	5				•		
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	5				•		
PREZCOBIX - darunavir-cobicistat tab 675-150 mg, 800-150 mg	3						
PREZISTA - darunavir oral susp 100 mg/ml	3						
PREZISTA - darunavir tab 75 mg, 150 mg	3						
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	4						
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	4						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
RIBAVIRIN - ribavirin cap 200 mg	5				•		
RIBAVIRIN - ribavirin tab 200 mg	5				•		
rilpivirine hcl tab 25 mg (base equivalent) (Edurant)	2						
ritonavir tab 100 mg (Norvir)	2						
SELZENTRY - maraviroc oral soln 20 mg/ml	4						
SOFOSBUVIR/ VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	5	•		•	•		
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	5	•		•	•		
SOVALDI - sofosbuvir tab 200 mg, 400 mg	5	•		•	•		
SUNLENCA - lenacapavir sodium tab therapy pack 4 x 300 mg, 5 x 300 mg	6				•	•	
SUNLENCA - lenacapavir sodium tab 300 mg	6				•	•	
tenofovir disoproxil fumarate tab 300 mg (Viread)	2						
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	3						
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	3						
valacyclovir hcl tab 500 mg (Valtrex)	1						
valacyclovir hcl tab 1 gm (Valtrex)	2						
valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	2						
valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	2						
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	3						
VIRACEPT - nelfinavir mesylate tab 250 mg, 625 mg	4						
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	3						
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	3						
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	4						
YEZTUGO - lenacapavir sodium subcut soln 463.5 mg/1.5ml (prophylaxis)	5				•		
YEZTUGO - lenacapavir sodium tab 300 mg (prophylaxis)	5				•		
zidovudine cap 100 mg (Retrovir)	2						
zidovudine syrup 10 mg/ ml (Retrovir)	2						
zidovudine tab 300 mg	2						
ANTIMALARIALS							
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	2						
CHLOROQUINE PHOSPHATE - chloroquine phosphate tab 250 mg	2						
chloroquine phosphate tab 500 mg	2						
COARTEM - artemether-lumefantrine tab 20-120 mg	4						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
hydroxychloroquine sulfate tab 100 mg, 300 mg	1						
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	2						
hydroxychloroquine sulfate tab 400 mg	2						
mefloquine hcl tab 250 mg	1						
primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	2						
pyrimethamine tab 25 mg (Daraprim)	2						
quinine sulfate cap 324 mg (Qualaquin)	2						
ANTHELMINTICS							
albendazole tab 200 mg (Albenza)	2						
ivermectin tab 3 mg (Stromectol)	2						
praziquantel tab 600 mg (Biltricide)	2						
ANTI-INFECTIVE AGENTS - MISC.							
atovaquone susp 750 mg/5ml (Mepron)	2						
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)	6				•	•	
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	1						
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	2						
dapsone tab 25 mg, 100 mg	2						
fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)	2						
linezolid for susp 100 mg/5ml (Zyvox)	2						
linezolid tab 600 mg (Zyvox)	2						
methenamine hippurate tab 1 gm (Hiprex)	2						
metronidazole tab 250 mg	1						
metronidazole tab 500 mg (Flagyl)	1						
nitazoxanide tab 500 mg	2						
nitrofurantoin macrocrystalline cap 25 mg, 100 mg (Macrodantin)	2						
nitrofurantoin macrocrystalline cap 50 mg (Macrodantin)	1						
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	1						
nitrofurantoin susp 25 mg/5ml	2	•					
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	2						
SIVEXTRO - tedizolid phosphate tab 200 mg	4						
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	2						
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	1						
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	1						
tinidazole tab 250 mg, 500 mg	2						
trimethoprim tab 100 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
vancomycin hcl cap 125 mg (base equivalent) (Vancocin hcl)	2						
vancomycin hcl cap 250 mg (base equivalent) (Vancocin)	2						
vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent) (Firvanq)	2						
XIFAXAN - rifaximin tab 200 mg	4						
XIFAXAN - rifaximin tab 550 mg	3						
BIOLOGICALS							
VACCINES							
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	A						•
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	A						•
AFLURIA 2025-2026 - influenza virus vaccine split im susp	A						•
AFLURIA 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	A						•
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	A						•
BCG VACCINE - bcg vaccine for inj soln 50 mg	A						•
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	A						•
CAPVAXIVE - pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	A						•
COMIRNATY 2025-26 - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	A						•
COMIRNATY/5-11Y/2025-26 - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	A						•
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	A						•
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	A						•
FLUAD 2025-2026 - influenza vac type a&b surface ant adj susp pref syr 0.5 ml	A						•
FLUARIX 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	A						•
FLUBLOK 2025-2026 - influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	A						•
FLUCELVAX 2025-2026 - influenza virus vac tiss-cult subunit im susp	A						•
FLUCELVAX 2025-2026 - influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	A						•
FLULAVAL 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	A						•
FLUMIST NASAL VACCINE 202 - influenza virus vaccine live intranasal liquid	A						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
FLUZONE HIGH-DOSE 2025-20 - influenza virus vac split high-dose pf susp pref syr 0.5ml	A						•
FLUZONE 2025-2026 - influenza virus vaccine split im susp	A						•
FLUZONE 2025-2026 - influenza virus vaccine split pf susp pref syringe 0.5 ml	A						•
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	A	•					•
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	A	•					•
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	A						•
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	A						•
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	A						•
IMOVAX RABIES (H.D.C.V.) - rabies virus vaccine, hdc for inj susp	A						•
IPOL INACTIVATED IPV - poliovirus vaccine, ipv inj susp	A						•
IXIARO - japanese encephalitis vaccine inactivated adsorbed inj	A						•
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	A						•
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	A						•
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	A						•
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	A						•
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	A						•
MNEXSPIKE COVID-19 VACCIN - covid-19 mrna vaccine-moderna im susp pref syr 10 mcg/0.2ml	A						•
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	A						•
NUVAXOVID COVID-19 VACCIN - covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	A						•
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	A						•
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	A						•
PENMENVY - meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	A						•
PNEUMOVAX 23 - pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	A						•
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	A						•
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	A						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	A						•
RABAVERT - rabies vaccine, pcec for inj	A						•
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	A						•
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	A						•
ROTARIX - rotavirus vaccine, live oral susp	A						•
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	A						•
SHINGRIX - zoster vac recomb adjuvanted im susp pref syr 50 mcg/0.5ml	A						•
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	A						•
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	A						•
SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	A						•
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	A						•
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	A						•
TYPHIM VI - typhoid vi polysaccharide vacc im soln pref syr 25 mcg/0.5ml	A						•
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	A						•
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	A						•
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	A						•
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	A						•
VIVOTIF - typhoid vaccine cap delayed release	A						•
YF-VAX - yellow fever vaccine for subcutaneous suspension	A						•
TOXOIDS							
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	A						•
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	A						•
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	A						•
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	A						•
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	A						•
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	A						•
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	A						•
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	A						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	A						•
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	A						•
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	A						•
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	A						•
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	A						•
BIOLOGICALS MISC							
PALFORZIA INITIAL DOSE ES - peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 mg, 0.5 & 1 & 1.5 & 3 & 6 mg	6				•	•	
PALFORZIA LEVEL 0 - peanut powder-dnfp cap sprinkle pack 1 x 1 mg (1 mg dose)	6				•	•	
PALFORZIA LEVEL 1 - peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	6				•	•	
PALFORZIA LEVEL 10 - peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	6				•	•	
PALFORZIA LEVEL 11 (MAINT - peanut allergen powder-dnfp maintenance packet 300 mg	6	•			•	•	
PALFORZIA LEVEL 11 (TITRA - peanut allergen powder-dnfp titration packet 300 mg	6	•			•	•	
PALFORZIA LEVEL 2 - peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	6				•	•	
PALFORZIA LEVEL 3 - peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	6				•	•	
PALFORZIA LEVEL 4 - peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	6				•	•	
PALFORZIA LEVEL 5 - peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	6				•	•	
PALFORZIA LEVEL 6 - peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	6				•	•	
PALFORZIA LEVEL 7 - peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	6				•	•	
PALFORZIA LEVEL 8 - peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	6				•	•	
PALFORZIA LEVEL 9 - peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	6				•	•	
ANTINEOPLASTIC AGENTS							
ANTINEOPLASTICS							
abiraterone acetate tab 250 mg, 500 mg (Zytiga)	2	•		•	•		
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	5	•			•	•	
ALECENSA - alectinib hcl cap 150 mg (base equivalent)	5	•		•	•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
anastrozole tab 1 mg (Arimidex)	1						
AUGTYRO - repotrectinib cap 40 mg, 160 mg	6	•		•	•		
AVMAPKI FAKZYNJA CO-PACK - avutometinib cap 0.8 mg & defactinib tab 200 mg therapy pack	6	•		•	•	•	
BALVERSA - erdafitinib tab 3 mg, 4 mg, 5 mg	6	•		•	•	•	
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	5	•		•	•	•	
bexarotene cap 75 mg (Targretin)	5	•			•		
bicalutamide tab 50 mg (Casodex)	1						
BOSULIF - bosutinib cap 50 mg, 100 mg	5	•		•	•	•	
BOSULIF - bosutinib tab 100 mg, 400 mg, 500 mg	5	•		•	•	•	
BRAFTOVI - encorafenib cap 75 mg	6	•		•	•	•	
BRUKINSA - zanubrutinib cap 80 mg	5	•		•	•	•	
BRUKINSA - zanubrutinib tab 160 mg	5	•		•	•	•	
CALQUENCE - acalabrutinib maleate tab 100 mg	5	•		•	•	•	
capecitabine tab 150 mg, 500 mg (Xeloda)	5	•			•		
CAPRELSA - vandetanib tab 100 mg, 300 mg	5	•		•	•	•	
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	5	•		•	•	•	
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	5	•		•	•	•	
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	5	•		•	•	•	
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	5	•		•	•	•	
CYCLOPHOSPHAMIDE - cyclophosphamide tab 50 mg	3						
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	2						
dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)	5	•		•	•		
ELIGARD - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	5				•		
ELIGARD - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	5				•		
ELIGARD - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	5				•		
ELIGARD - leuprolide acetate for subcutaneous inj kit 7.5 mg	5				•		
ERLEADA - apalutamide tab 60 mg, 240 mg	5	•		•	•	•	
erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)	5	•		•	•		
ETOPOSIDE - etoposide cap 50 mg	3						
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)	5	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	5	•		•	•		
exemestane tab 25 mg (Aromasin)	2						
GAVRETO - pralsetinib cap 100 mg	6	•		•	•	•	
gefitinib tab 250 mg (Iressa)	5	•		•	•		
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	5	•		•	•	•	
GOMEKLI - mirdametinib cap 1 mg, 2 mg	6	•		•	•		
GOMEKLI - mirdametinib tab for oral susp 1 mg	6	•		•	•		
HERNEXEOS - zongertinib tab 60 mg	6	•		•	•	•	
HYCAMTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	5	•			•		
hydroxyurea cap 500 mg (Hydrea)	2						
IBRANCE - palbociclib cap 75 mg, 100 mg, 125 mg	5	•		•	•	•	
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	5	•		•	•	•	
IBTROZI - taletrectinib adipate cap 200 mg	6	•		•	•	•	
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	5	•		•	•	•	
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)	5	•		•	•		
IMBRUVICA - ibrutinib cap 70 mg, 140 mg	5	•		•	•	•	
IMBRUVICA - ibrutinib oral susp 70 mg/ml	5	•		•	•	•	
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	5	•		•	•	•	
INLURIYO - imlunestrant tosylate tab 200 mg	6	•		•	•	•	
INLYTA - axitinib tab 1 mg, 5 mg	5	•		•	•	•	
INREBIC - fedratinib hcl cap 100 mg	6	•		•	•	•	
ITOVEBI - inavolisib tab 3 mg, 9 mg	5	•		•	•		
IWILFIN - eflornithine hcl tab 192 mg	6	•		•	•		
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	5	•		•	•	•	
KISQALI - ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	5	•		•	•		
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	5	•		•	•		
LAZCLUZE - lazertinib mesylate tab 80 mg, 240 mg	5	•		•	•		
letrozole tab 2.5 mg (Femara)	1						
leucovorin calcium tab 5 mg, 15 mg, 25 mg	2						
LEUKERAN - chlorambucil tab 2 mg	3						
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	5				•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
lomustine cap 10 mg, 40 mg, 100 mg (Gleostine)	2						
LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 3.75 mg, 7.5 mg	5				•		
LUPRON DEPOT (3-MONTH) - leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	5				•		
LUPRON DEPOT (4-MONTH) - leuprolide acetate (4 month) for inj kit 30 mg	5				•		
LUPRON DEPOT (6-MONTH) - leuprolide acetate (6 month) for inj kit 45 mg	5				•		
LYNPARZA - olaparib tab 100 mg, 150 mg	5	•		•	•	•	
LYSODREN - mitotane tab 500 mg	5	•			•	•	
MATULANE - procarbazine hcl cap 50 mg	5	•			•	•	
megestrol acetate susp 40 mg/ml	2						
megestrol acetate tab 20 mg	1						
megestrol acetate tab 40 mg	2						
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	5	•		•	•		
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	5	•		•	•		
MEKTOVI - binimetinib tab 15 mg	6	•		•	•	•	
mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	2						
mercaptopurine tab 50 mg	2						
mesna tab 400 mg (Mesnex)	2						
METHOTREXATE SODIUM - methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	4						
methotrexate sodium for inj 1 gm	2						
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	1						
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	2						
methotrexate sodium tab 2.5 mg (base equiv)	1						
MODEYSO - dordaviprone hcl cap 125 mg	6	•		•	•	•	
MYLERAN - busulfan tab 2 mg	3						
NILUTAMIDE - nilutamide tab 150 mg	2						
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	5	•		•	•	•	
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	5	•		•	•	•	
OGSIVEO - nirogacestat hydrobromide tab 100 mg, 150 mg	5	•		•	•	•	
OJEMDA - tovorafenib for oral susp 25 mg/ml	6	•		•	•		
OJEMDA - tovorafenib tab 100 mg	6	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ORSERDU - elacestrant hydrochloride tab 86 mg, 345 mg	6	•		•	•	•	
pazopanib hcl tab 200 mg (base equiv) (Votrient)	5	•		•	•		
pomalidomide cap 1 mg (Pomalyst)	5			•	•		
pomalidomide cap 2 mg, 3 mg, 4 mg (Pomalyst)	5	•		•	•		
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	5	•		•	•	•	
REVUFORJ - revumenib citrate tab 25 mg, 110 mg, 160 mg	6	•		•	•	•	
ROMVIMZA - vimseltinib cap 14 mg, 20 mg, 30 mg	5	•		•	•		
ROZLYTREK - entrectinib cap 100 mg, 200 mg	5	•		•	•	•	
ROZLYTREK - entrectinib pellet pack 50 mg	5	•		•	•	•	
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	5	•		•	•	•	
SCEMBLIX - asciminib hcl tab 20 mg, 40 mg, 100 mg	5	•		•	•	•	
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	5	•		•	•		
STIVARGA - regorafenib tab 40 mg	5	•		•	•	•	
sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	5	•		•	•		
TABLOID - thioguanine tab 40 mg	5				•		
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	5	•		•	•		
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	5	•		•	•		
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	5	•		•	•		
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	5	•		•	•	•	
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	5	•		•	•	•	
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	1						
temozolomide cap 5 mg, 20 mg	5	•			•		
temozolomide cap 100 mg, 140 mg, 180 mg, 250 mg (Temodar)	5	•			•		
TIBSOVO - ivosidenib tab 250 mg	5	•		•	•	•	
toremifene citrate tab 60 mg (base equivalent) (Fareston)	5				•		
tretinoin cap 10 mg	5	•			•		
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	5	•		•	•	•	
VIZIMPRO - dacomitinib tab 15 mg, 30 mg, 45 mg	6	•		•	•	•	
VONJO - pacritinib citrate cap 100 mg	6	•		•	•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
VORANIGO - vorasidenib tab 10 mg, 40 mg	5	•		•	•	•	
XALKORI - crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	5	•		•	•	•	
XALKORI - crizotinib cap 200 mg, 250 mg	5	•		•	•	•	
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	6	•		•	•	•	
XTANDI - enzalutamide cap 40 mg	5	•		•	•	•	
XTANDI - enzalutamide tab 40 mg, 80 mg	5	•		•	•	•	
YONSA - abiraterone acetate micronized tab 125 mg	5	•		•	•	•	
ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	5	•		•	•	•	
ZELBORAF - vemurafenib tab 240 mg	5	•		•	•	•	
ZOLINZA - vorinostat cap 100 mg	5	•		•	•	•	
ZYDELIG - idelalisib tab 100 mg, 150 mg	5	•		•	•	•	
ZYKADIA - ceritinib tab 150 mg	5	•		•	•	•	
ENDOCRINE AND METABOLIC DRUGS							
CORTICOSTEROIDS							
budesonide delayed release particles cap 3 mg (Entocort ec)	2						
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	4						
dexamethasone elixir 0.5 mg/5ml	2						
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	4						
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	1						
fludrocortisone acetate tab 0.1 mg	1						
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	2						
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	1						
methylprednisolone tab 4 mg, 16 mg, 32 mg (Medrol)	1						
methylprednisolone tab 8 mg (Medrol)	2						
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1						
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	2						
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	2						
prednisolone soln 15 mg/5ml	2						
PREDNISONE - prednisone oral soln 5 mg/5ml	3						
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21)	1						
prednisone tab therapy pack 10 mg (48)	2						
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	1						
ANDROGEN-ANABOLIC							

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
danazol cap 50 mg, 100 mg, 200 mg	2						
METHITEST - methyltestosterone oral tab 10 mg	4	•					
testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone)	2						
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	4						
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel)	2	•		•			
testosterone td gel 12.5 mg/act (1%)	2	•		•			
testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)	2	•		•			
testosterone td soln 30 mg/act	2			•			
ESTROGENS							
ALORA - estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	4						
ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	4						
BIJUVA - estradiol-progesterone cap 0.5-100 mg, 1-100 mg	4						
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	3						
DEPO-ESTRADIOL - estradiol cypionate im in oil 5 mg/ml	4						
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg	3						
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	4						
estradiol & norethindrone acetate tab 0.5-0.1 mg	2						
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	2						
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel)	2						
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)	1						
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)	2						
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)	2						
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)	2						
estradiol valerate im in oil 20 mg/ml, 40 mg/ml (Delestrogen)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg (Premarin)	2						
EVAMIST - estradiol transdermal spray 1.53 mg/spray	4						
MENOSTAR - estradiol td patch weekly 14 mcg/24hr	4						
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	3						
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg (Femhrt)	2						
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2						
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	3						
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	3						
PREMPRO - conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	3						
CONTRACEPTIVES							
ARANELLE - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	2						
DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	4						
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)	A						•
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1						
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	2						
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	1						
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	1						
ELLA - ulipristal acetate tab 30 mg	A						•
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1						
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	2						
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg (Quartette)	2						
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique)	1						
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique)	2						
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	A						•
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	A						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
levonorgestrel tab 1.5 mg	A						•
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30n mcg	1						
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2						
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	3						
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	1						
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	1						
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	A						•
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2						
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	1						
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	A						•
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2						
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)	2						
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg (Estrostep fe)	2						
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	1						
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	1						
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)	2						
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	1						
norethindrone tab 0.35 mg	A						•
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1						
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1						
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 m mcg	1						
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 m mcg	A						•
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1						
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	A						•
OPILL - norgestrel tab 0.075 mg	A						•
TYBLUME - levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	4						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-mg	4						
PROGESTINS							
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	1						
norethindrone acetate tab 5 mg (Aygestin)	2						
progesterone cap 100 mg (Prometrium)	1						
progesterone cap 200 mg (Prometrium)	2						
progesterone im in oil 50 mg/ml	2						
ANTIDIABETICS							
acarbose tab 25 mg, 50 mg, 100 mg (Precose)	2						
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	3						
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	3						
dapagliflozin tab 5 mg, 10 mg (Farxiga)	2						
diazoxide susp 50 mg/ml (Proglycem)	2						
FARXIGA - dapagliflozin tab 5 mg, 10 mg	3						
glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	1						
GLIPIZIDE - glipizide tab 2.5 mg	4						
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	1						
glipizide tab 5 mg, 10 mg	1						
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	2						
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg	3						
glucagon for inj 1 mg	2						
glyburide tab 1.25 mg, 2.5 mg, 5 mg	1						
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	1						
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	3						
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	3						
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	3						
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	3						
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	3						
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	3			•			
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	3			•			

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	3			•			
JARDIANCE - empagliflozin tab 10 mg, 25 mg	3						
metformin hcl tab er 24hr 500 mg, 750 mg	1						
metformin hcl tab 500 mg, 850 mg, 1000 mg	1						
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	3	•		•			
nateglinide tab 60 mg, 120 mg	2						
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	3	•		•			
OZEMPIC - semaglutide tab 1.5 mg, 4 mg, 9 mg	3	•		•			
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	1						
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)	2						
repaglinide tab 0.5 mg, 1 mg	1						
repaglinide tab 2 mg	2						
RYBELSUS - semaglutide tab 3 mg, 7 mg, 14 mg	3	•		•			
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	3		•	•			
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	3						
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	3						
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	3						
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg	3						
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	3	•		•			
XIGDUO XR - dapagliflozin free bas-metformin hcl tab er 24hr 2.5-1000 mg	3						
XIGDUO XR - dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg	3						
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	3		•	•			
Rapid-Acting Insulins							
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	3						
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	3						
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
HUMALOG - insulin lispro inj soln 100 unit/ml	3						
HUMALOG - insulin lispro soln cartridge 100 unit/ml	3						
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	3						
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	3						
HUMALOG TEMPO PEN - insulin lispro soln pen-inj w/transmitter port 100 unit/ml	3						
LYUMJEV - insulin lispro-aabc inj 100 unit/ml	3						
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml	3						
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	3						
LYUMJEV TEMPO PEN - insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	3						
NOVOLOG - insulin aspart inj soln 100 unit/ml	3						
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	3						
NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml	3						
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	3						
NOVOLOG RELION - insulin aspart inj soln 100 unit/ml	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
Short-Acting Insulins							
HUMULIN R - insulin regular (human) inj 100 unit/ml	3						
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml	3						
NOVOLIN R - insulin regular (human) inj 100 unit/ml	3						
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	3						
NOVOLIN R FLEXPEN RELION - insulin regular (human) soln pen-injector 100 unit/ml	3						
NOVOLIN R RELION - insulin regular (human) inj 100 unit/ml	3						
Intermediate-Acting Insulins							
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	3						
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	3						
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	3						
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	3						
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3						
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3						
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	3						
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3						
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3						
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ml	3						
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3						
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3						
NOVOLIN 70/30 FLEXPEN REL - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3						
NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3						
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	3						
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	3						
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	3						
Basal Insulins							
INSULIN GLARGINE-YFGN - insulin glargine-yfgn inj 100 unit/ml	3						
INSULIN GLARGINE-YFGN - insulin glargine-yfgn soln pen-injector 100 unit/ml	3						
SEMGLEE - insulin glargine-yfgn inj 100 unit/ml	3						
SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml	3						
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	3						
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	3						
TRESIBA - insulin degludec inj 100 unit/ml	3						
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	3						
THYROID AGENTS							
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	4						
EVEXITHROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 45 mg (3/4 grain), 90 mg (1 1/2 grain), 75 mg (1 1/4 grain), 120 mg (2 grain), 180 mg (3 grain)	4						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
LEVOTHYROXINE SODIUM - levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	4						
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)	1						
liothyronine sodium tab 5 mcg (Cytomel)	1						
liothyronine sodium tab 25 mcg, 50 mcg (Cytomel)	2						
methimazole tab 5 mg, 10 mg (Tapazole)	1						
NIVA THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	4						
NP THYROID 120 - thyroid tab 120 mg (2 grain)	4						
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	4						
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	4						
NP THYROID 60 - thyroid tab 60 mg (1 grain)	4						
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	4						
propylthiouracil tab 50 mg	2						
RENTHYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 45 mg (3/4 grain), 90 mg (1 1/2 grain), 75 mg (1 1/4 grain), 120 mg (2 grain)	4						
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	3						
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	4						
THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	4						
TIROSINT - levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	4						
TIROSINT-SOL - levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	4						
OXYTOCICS							
methylergonovine maleate tab 0.2 mg	2						
ENDOCRINE and METABOLIC AGENTS - MISC.							

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ACTHAR - corticotropin inj gel 80 unit/ml	6	•			•	•	
alendronate sodium tab 10 mg, 35 mg	1						
alendronate sodium tab 70 mg (Fosamax)	1						
cabergoline tab 0.5 mg	2						
calcitonin (salmon) nasal soln 200 unit/act	2						
calcitriol cap 0.25 mcg (Rocaltrol)	1						
calcitriol cap 0.5 mcg (Rocaltrol)	2						
carglumic acid soluble tab 200 mg (Carbaglu)	5				•		
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	2						
CRENESSITY - crinecerfont cap 25 mg, 50 mg, 100 mg	6				•	•	
CRENESSITY - crinecerfont oral soln 50 mg/ml	6				•	•	
DESMOPRESSIN ACETATE - desmopressin acetate nasal spray soln 0.01%	2						
desmopressin acetate inj 4 mcg/ml (Ddavp)	2						
desmopressin acetate nasal spray soln 0.01% (refrigerated)	2						
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)	2						
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)	2						
GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	5	•			•		
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	5	•			•		
ibandronate sodium tab 150 mg (base equivalent) (Boniva)	1						
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)	5	•			•	•	
ISTURISA - osilodrostat phosphate tab 1 mg, 5 mg	6	•			•	•	
JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	2	•				•	
JYNARQUE - tolvaptan tab 15 mg, 30 mg	2	•				•	
KERENDIA - finerenone tab 10 mg, 20 mg, 40 mg	3	•		•			
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	2						
levocarnitine tab 330 mg (Carnitor)	2						
LUPRON DEPOT-PED (1-MONTH - leuprolide acetate for inj pediatric kit 7.5 mg, 11.25 mg, 15 mg	5				•		
LUPRON DEPOT-PED (3-MONTH - leuprolide acetate (3 month) for inj pediatric kit 11.25 mg, 30 mg	5				•		
LUPRON DEPOT-PED (6-MONTH - leuprolide acet (6 month) for im inj pediatric kit 45 mg	5				•		
MYALEPT - metreleptin for subcutaneous inj 11.3 mg	4	•				•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
MYCAPSSA - octreotide acetate cap delayed release 20 mg	6				•	•	
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	5				•	•	
NITYR - nitisinone tab 2 mg, 5 mg, 10 mg	5				•	•	
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	6				•		
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	5				•		
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	5				•		
OMNITROPE - somatropin for inj 5.8 mg	5	•			•	•	
OMNITROPE - somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	5	•			•	•	
OPFOLDA - miglustat (gaa deficiency) cap 65 mg	6				•	•	
ORFADIN - nitisinone susp 4 mg/ml	5				•	•	
ORILISSA - elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	3						
PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm	6				•	•	
raloxifene hcl tab 60 mg (Evista)	2						
risedronate sodium tab 30 mg	2						
risedronate sodium tab 35 mg, 150 mg (Actonel)	2						
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	5	•			•	•	
sapropterin dihydrochloride tab 100 mg (Kuvan)	5	•			•	•	
SEPHIENCE - sepiapterin powder packet 250 mg, 1000 mg	6	•			•	•	
SIGNIFOR - pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	6				•	•	
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	5				•		
sodium phenylbutyrate tab 500 mg (Buphenyl)	5				•		
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	6				•	•	
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	4						
teriparatide soln pen-inj 560 mcg/2.24ml (Forteo)	5	•			•		
tolvaptan (hyponatremia) tab 15 mg, 30 mg (Samsca)	5	•			•		
TRYNGOLZA - olezarsen sod subcut soln auto-inject 80 mg/0.8ml (base eq)	6				•	•	
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	5	•		•	•	•	
VYKAT XR - diazoxide choline tab er 24hr 25 mg, 75 mg, 150 mg	6	•			•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
YORVIPATH - palopegteriparatide pen-inj 168 mcg/0.56ml (teriparatide eq), 294 mcg/0.98ml (teriparatide eq), 420 mcg/1.4ml (teriparatide eq)	6	•			•	•	
CARDIOVASCULAR AGENTS							
CARDIOTONICS							
DIGOXIN - digoxin oral soln 0.05 mg/ml	4						
digoxin oral soln 0.05 mg/ml (Digoxin)	2						
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)	2						
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	1						
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	4						
ANTIANGINAL AGENTS							
isosorbide dinitrate tab 5 mg (Isordil titradose)	2						
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	2						
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	1						
isosorbide mononitrate tab 10 mg, 20 mg	1						
NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	4						
NITRO-TIME - nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	4						
nitroglycerin oint 2%	2						
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	1						
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	2						
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	2						
ranolazine tab er 12hr 500 mg, 1000 mg	2						
BETA BLOCKERS							
acebutolol hcl cap 200 mg, 400 mg	2						
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	1						
betaxolol hcl tab 10 mg, 20 mg	2						
bisoprolol fumarate tab 5 mg	1						
bisoprolol fumarate tab 10 mg	2						
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	1						
labetalol hcl tab 100 mg	1						
labetalol hcl tab 200 mg, 300 mg	2						
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)	1						
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	1						
metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	1						
nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	1						
pindolol tab 5 mg, 10 mg	2						
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	3						
propranolol hcl cap er 24hr 60 mg, 80 mg (Inderal la)	1						
propranolol hcl cap er 24hr 120 mg, 160 mg (Inderal la)	2						
propranolol hcl tab 10 mg, 20 mg, 40 mg, 80 mg	1						
propranolol hcl tab 60 mg	2						
PROPRANOLOL HYDROCHLORIDE - propranolol hcl oral soln 20 mg/5ml	4						
sotalol hcl (afib/afl) tab 80 mg, 120 mg (Betapace af)	1						
sotalol hcl (afib/afl) tab 160 mg (Betapace af)	2						
sotalol hcl tab 80 mg, 120 mg (Betapace)	1						
sotalol hcl tab 160 mg (Betapace)	2						
sotalol hcl tab 240 mg	2						
CALCIUM CHANNEL BLOCKERS							
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1						
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	2						
diltiazem hcl cap er 24hr 120 mg	1						
diltiazem hcl cap er 24hr 180 mg, 240 mg	2						
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg (Cardizem cd)	1						
diltiazem hcl coated beads cap er 24hr 300 mg (Cardizem cd)	2						
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg (Tiazac)	1						
diltiazem hcl extended release beads cap er 24hr 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	2						
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	1						
diltiazem hcl tab 90 mg	2						
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1						
nifedipine cap 10 mg, 20 mg	2						
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	1						
nifedipine tab er 24hr osmotic release 30 mg, 60 mg (Procardia xl)	1						
nifedipine tab er 24hr osmotic release 90 mg (Procardia xl)	2						
nimodipine cap 30 mg	2						
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	2						
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
verapamil hcl tab 40 mg, 80 mg, 120 mg	1						
ANTIARRHYTHMICS							
amiodarone hcl tab 100 mg	2						
amiodarone hcl tab 200 mg	1						
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	2						
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	2						
flecainide acetate tab 50 mg	1						
flecainide acetate tab 100 mg, 150 mg	2						
mexiletine hcl cap 150 mg, 200 mg, 250 mg	2						
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	3						
NORPACE CR - disopyramide phosphate cap er 12hr 100 mg, 150 mg	4						
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	2						
propafenone hcl tab 150 mg	1						
propafenone hcl tab 225 mg, 300 mg	2						
quinidine gluconate tab er 324 mg	2						
QUINIDINE SULFATE - quinidine sulfate tab 200 mg, 300 mg	4						
ANTIHYPERTENSIVES							
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	1						
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	1						
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	2						
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	2						
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	2						
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	1						
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	1						
benazepril & hydrochlorothiazide tab 5-6.25 mg	2						
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	2						
benazepril hcl tab 5 mg	1						
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)	1						
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	2						
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	2						
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	2						
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1						
clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	2						
clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	2						
clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)	2						
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	1						
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1						
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	1						
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	1						
eplerenone tab 25 mg, 50 mg (Inspra)	2						
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	2						
fosinopril sodium tab 10 mg, 20 mg, 40 mg	1						
guanfacine hcl tab 1 mg, 2 mg	2						
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1						
irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)	1						
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	1						
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	1						
lisinopril tab 2.5 mg, 5 mg, 10 mg, 30 mg, 40 mg (Zestril)	1						
lisinopril tab 20 mg (Prinivil)	1						
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	1						
losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	1						
METHYLDOPA - methyldopa tab 500 mg	4						
methyldopa tab 250 mg	2						
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	2						
minoxidil tab 2.5 mg, 10 mg	1						
moexipril hcl tab 7.5 mg, 15 mg	2						
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	1						
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	2						
PERINDOPRIL ERBUMINE - perindopril erbumine tab 2 mg, 8 mg	4						
perindopril erbumine tab 4 mg	2						
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	2						
prazosin hcl cap 1 mg, 2 mg (Minipress)	1						
prazosin hcl cap 5 mg (Minipress)	2						
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	1						
QUINAPRIL/ HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	2						
QUINAPRIL/ HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 20-25 mg	4						
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	1						
telmisartan tab 20 mg, 80 mg (Micardis)	1						
telmisartan tab 40 mg (Micardis)	2						
TELMISARTAN/ AMLODIPINE - telmisartan-amlodipine tab 40-5 mg, 40-10 mg	4						
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1						
trandolapril tab 1 mg, 2 mg, 4 mg	1						
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	1						
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg (Diovan hct)	1						
valsartan-hydrochlorothiazide tab 320-12.5 mg, 320-25 mg (Diovan hct)	2						
VECAMYL - mecamylamine hcl tab 2.5 mg	6				•	•	
DIURETICS							
acetazolamide cap er 12hr 500 mg	2						
acetazolamide tab 125 mg	1						
acetazolamide tab 250 mg	2						
amiloride hcl tab 5 mg	1						
AMILORIDE/ HYDROCHLOROTHIA - amiloride & hydrochlorothiazide tab 5-50 mg	4						
bumetanide tab 0.5 mg (Bumex)	1						
bumetanide tab 1 mg	1						
bumetanide tab 2 mg	2						
chlorthalidone tab 25 mg, 50 mg	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ethacrynic acid tab 25 mg (Edecrin)	2						
FUROSCIX - furosemide subcutaneous cartridge kit 80 mg/10ml	6	•			•	•	
FUROSEMIDE - furosemide oral soln 10 mg/ml	1						
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	1						
hydrochlorothiazide cap 12.5 mg	1						
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1						
indapamide tab 1.25 mg, 2.5 mg	1						
methazolamide tab 25 mg, 50 mg	2						
metolazone tab 2.5 mg	1						
metolazone tab 5 mg, 10 mg	2						
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	2						
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	1						
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	1						
triamterene & hydrochlorothiazide cap 37.5-25 mg	1						
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	1						
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	1						
triamterene cap 50 mg, 100 mg (Dyrenium)	2						
VASOPRESSORS							
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	3						
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	2						
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	2						
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	2						
ANTIHYPERLIPIDEMICS							
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	1			•			
cholestyramine light powder 4 gm/dose (Questran light)	2						
cholestyramine powder 4 gm/dose (Questran)	2						
colesevelam hcl tab 625 mg (Welchol)	2						
colestipol hcl granule packets 5 gm (Colestid flavored)	2						
colestipol hcl granules 5 gm (Colestid flavored)	2						
colestipol hcl tab 1 gm (Colestid)	2						
ezetimibe tab 10 mg (Zetia)	1						
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	2			•			
fenofibrate micronized cap 67 mg, 134 mg, 200 mg	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
fenofibrate tab 48 mg, 145 mg (Tricor)	1						
fenofibrate tab 54 mg, 160 mg	1						
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	2			•			
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	2			•			
gemfibrozil tab 600 mg (Lopid)	1						
lovastatin tab 10 mg	1			•			
lovastatin tab 20 mg, 40 mg	1			•			•
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	3	•					
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)	2						
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	1			•			•
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	3	•		•			
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	3	•		•			
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	1			•			
simvastatin tab 5 mg	1			•			
simvastatin tab 10 mg, 20 mg, 40 mg, 80 mg (Zocor)	1			•			
VASCEPA - icosapent ethyl cap 0.5 gm, 1 gm	2						
CARDIOVASCULAR AGENTS - MISC.							
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	6	•		•	•	•	
ATTRUBY - acoramidis hcl tab pack 356 mg (712 mg twice daily)	5	•			•	•	
bosentan tab for oral susp 32 mg (Tracleer)	5	•		•	•		
bosentan tab 62.5 mg, 125 mg (Tracleer)	5	•		•	•		
CAMZYOS - mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	6	•			•	•	
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	3					•	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	3						
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)	2						
OPSUMIT - macitentan tab 10 mg	5	•		•	•	•	
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	6	•			•	•	
ORENITRAM TITRATION KIT M - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0	6	•		•	•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)	2						
sildenafil citrate tab 20 mg (Revatio)	5				•		
tadalafil tab 2.5 mg, 5 mg (Cialis)	1						
tadalafil tab 20 mg (pah) (Adcirca)	5	•		•	•		
TYVASO - treprostinil inhalation solution 0.6 mg/ml	6	•		•	•	•	
TYVASO DPI MAINTENANCE KI - treprostinil inh powder 16 mcg/cartridge, 32 mcg/cartridge, 48 mcg/cartridge, 64 mcg/cartridge, 80 mcg/cartridge, 112 x 32mcg & 112 x 64mcg, 112 x 48mcg & 112 x 64mcg	6	•		•	•	•	
TYVASO DPI TITRATION KIT - treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	6	•		•	•	•	
TYVASO REFILL KIT - treprostinil inhalation solution 0.6 mg/ml	6	•		•	•	•	
TYVASO STARTER KIT - treprostinil inhalation solution 0.6 mg/ml	6	•		•	•	•	
UPTRAVI - selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	5	•		•	•	•	
UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	5	•		•	•	•	
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	3	•					
VYNDAMAX - tafamidis cap 61 mg	5	•			•		
WINREVAIR - sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	6	•			•	•	
YUTREPIA - treprostinil sodium inhal cap 26.5 mcg, 53 mcg, 79.5 mcg, 106 mcg	6	•			•	•	
ERECTLIE DYSFUNCTION							
tadalafil tab 2.5 mg, 5 mg (Cialis)	1						
RESPIRATORY AGENTS							
ANTIHISTAMINES							
carbinoxamine maleate tab 4 mg	2						
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	4						
cyproheptadine hcl syrup 2 mg/5ml	1						
cyproheptadine hcl tab 4 mg	1						
desloratadine tab 5 mg (Clarinex)	1						
levocetirizine dihydrochloride tab 5 mg	1						
promethazine hcl oral soln 6.25 mg/5ml	1						
promethazine hcl suppos 12.5 mg, 25 mg	2						
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	1						
PROMETHEGAN - promethazine hcl suppos 50 mg	4						
NASAL AGENTS - SYSTEMIC and TOPICAL							
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1			•			

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
fluticasone propionate nasal susp 50 mcg/act	1			•			
ipratropium bromide nasal soln 0.03% (21 mcg/ spray), 0.06% (42 mcg/ spray)	2			•			
olopatadine hcl nasal soln 0.6% (Patanase)	2			•			
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act	4	•					
COUGH/COLD/ALLERGY							
acetylcysteine inhal soln 10%, 20%	2						
HYDROCODONE POLISTIREX/CH - hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	4						
HYPERSAL - sodium chloride soln nebu 7%	4						
NEBUSAL - sodium chloride soln nebu 3%	2						
PULMOSAL - sodium chloride soln nebu 7%	1						
SODIUM CHLORIDE - sodium chloride soln nebu 3%	2						
SODIUM CHLORIDE - sodium chloride soln nebu 7%	1						
ANTIASTHMATIC and BRONCHODILATOR AGENTS							
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	3			•			
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	2			•			
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	1						
albuterol sulfate soln nebu 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	2						
albuterol sulfate syrup 2 mg/5ml	1						
albuterol sulfate tab 2 mg, 4 mg	2						
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	3			•			
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	3			•			
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	3			•			
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	3			•			
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	3			•			
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	3			•			
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	4			•			

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	3			•			
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	3			•			
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	2						
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	3			•			
cromolyn sodium soln nebu 20 mg/2ml	2						
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	3			•			
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	5	•			•	•	
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	2			•			
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)	2			•			
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	3			•			
ipratropium bromide hfa inhal aerosol 17 mcg/act (Atrovent hfa)	2						
ipratropium bromide inhal soln 0.02%	1						
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	2						
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	2						
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)	2						
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	1						
montelukast sodium tab 10 mg (base equiv) (Singulair)	1						
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	5	•			•	•	
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml	5	•			•	•	
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	3			•			
roflumilast tab 250 mcg, 500 mcg (Daliresp)	2						
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	3			•			

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
SPIRIVA RESPIMAT - tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act	3			•			
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	3			•			
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	2			•			
terbutaline sulfate tab 2.5 mg, 5 mg	2						
TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	5	•			•	•	
THEO-24 - theophylline cap er 24hr 100 mg, 200 mg	4						
theophylline elixir 80 mg/15ml	2						
theophylline soln 80 mg/15ml	2						
theophylline tab er 12hr 300 mg, 450 mg	2						
theophylline tab er 24hr 400 mg, 600 mg	2						
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	3			•			
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	2			•			
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	5	•			•	•	
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	5	•			•	•	
zafirlukast tab 10 mg, 20 mg (Accolate)	2						
zileuton tab er 12hr 600 mg	2						
RESPIRATORY AGENTS - MISC.							
ALYFTREK - vanzacaftor-tezacaftor-deutivacaftor tab 4-20-50 mg, 10-50-125 mg	5	•			•	•	
BRINSUPRI - brensocatib tab 10 mg, 25 mg	4	•				•	
JASCAYD - nerandomilast tab 9 mg, 18 mg	6				•	•	
KALYDECO - ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	5	•		•	•	•	
KALYDECO - ivacaftor tab 150 mg	5	•		•	•	•	
PIRFENIDONE - pirfenidone tab 534 mg	6	•		•	•		
pirfenidone cap 267 mg (Esbriet)	5	•		•	•		
pirfenidone tab 267 mg, 801 mg (Esbriet)	5	•		•	•		
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	5				•		
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	5	•		•	•	•	
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	5	•		•	•	•	
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	5	•		•	•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg &ivacaftor 150 mg tbpk	5	•		•	•	•	
GASTROINTESTINAL AGENTS							
LAXATIVES							
GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	4						
lactulose solution 10 gm/15ml	2						
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	1						•
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)	2						
peg 3350-kcl-sod bicarb-nacl for soln 420 gm (Nulytely)	2						•
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	4						
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	2						
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	4						
ANTIDIARRHEALS							
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	1						
MOTOFEN - difenoxin w/ atropine tab 1-0.025 mg	4						
ULCER DRUGS							
cimetidine hcl soln 300 mg/5ml	2						
dexlansoprazole cap delayed release 30 mg, 60 mg (Dexilant)	2						
dicyclomine hcl cap 10 mg	1						
dicyclomine hcl oral soln 10 mg/5ml	2						
dicyclomine hcl tab 20 mg	1						
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)	1						
famotidine for susp 40 mg/5ml	2						
famotidine tab 40 mg (Pepcid)	1						
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	2						
glycopyrrolate tab 1 mg, 2 mg	2						
lansoprazole cap delayed release 15 mg, 30 mg (Prevacid)	1						
methscopolamine bromide tab 2.5 mg, 5 mg	2						
misoprostol tab 100 mcg, 200 mcg (Cytotec)	1						
NIZATIDINE - nizatidine cap 300 mg	4						
nizatidine cap 150 mg	2						
omeprazole cap delayed release 10 mg, 20 mg, 40 mg	1						
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	1						
rabeprazole sodium ec tab 20 mg (Aciphex)	1						
sucralfate tab 1 gm (Carafate)	2						
ANTIEMETICS							

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ANZEMET - dolasetron mesylate tab 50 mg	4						
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	2						
aprepitant capsule 40 mg, 125 mg	2						
aprepitant capsule 80 mg (Emend)	2						
dronabinol cap 2.5 mg, 5 mg, 10 mg (Marinol)	2						
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	3						
granisetron hcl tab 1 mg	2						
meclizine hcl tab 25 mg	1						
ONDANSETRON HCL - ondansetron hcl tab 24 mg	4						
ondansetron hcl oral soln 4 mg/5ml	2						
ondansetron hcl tab 4 mg (Zofran)	1						
ondansetron hcl tab 8 mg	1						
ondansetron orally disintegrating tab 4 mg, 8 mg	1						
scopolamine td patch 72hr 1 mg/3days (Transderm-scop)	2						
trimethobenzamide hcl cap 300 mg	2						
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	3					•	
DIGESTIVE AIDS							
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	3						
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	3						
GASTROINTESTINAL AGENTS- MISC.							
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)	2						
balsalazide disodium cap 750 mg (Colazal)	2						
BYLVAY - odevixibat cap 400 mcg, 1200 mcg	6	•		•	•	•	
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 200 mcg, 600 mcg	6	•		•	•	•	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	2						
calcium acetate (phosphate binder) tab 667 mg	2						
CIMZIA - certolizumab pegol prefilled syringe kit 200 mg/ml	6	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 200 mg/ml	6	•		•	•		
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	2						
CTEXLI - chenodiol (basds) tab 250 mg	5				•		
DIPENTUM - olsalazine sodium cap 250 mg	4						
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	5	•		•	•	•	
ferric citrate tab 1 gm (210 mg ferric iron) (Auryxia)	2						
FOSRENOL - lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	4						
IQIRVO - elafibranor tab 80 mg	6	•			•	•	
lactulose (encephalopathy) solution 10 gm/15ml	1						
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)	2						
LIVDELZI - seladelpar lysine cap 10 mg	6	•			•		
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	2	•		•			
mesalamine cap er 24hr 0.375 gm (Apriso)	2						
MESALAMINE DR - mesalamine cap dr 400 mg	2						
mesalamine enema 4 gm	2						
mesalamine suppos 1000 mg (Canasa)	2						
mesalamine tab delayed release 800 mg	2						
mesalamine tab delayed release 1.2 gm (Lialda)	2						
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	2						
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	1						
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	3	•		•			
OMVOH - mirikizumab-mrkz subcutaneous auto-inj 100 mg/ml & 200mg/2ml	5	•		•	•	•	
OMVOH - mirikizumab-mrkz subcutaneous pref syr 100 mg/ml & 200mg/2ml	5	•		•	•	•	
OMVOH - mirikizumab-mrkz subcutaneous sol prefill syringe 200 mg/2ml	5			•	•		
OMVOH - mirikizumab-mrkz subcutaneous soln auto-injector 200 mg/2ml	5			•	•		
sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)	2						
sevelamer carbonate tab 800 mg (Renvela)	2						
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	5	•		•	•		
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
sulfasalazine tab 500 mg (Azulfidine)	1						
SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	3	•		•			
TREMFYA - guselkumab soln auto-injector 200 mg/2ml	5	•		•	•		
TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	5	•		•	•		
TREMFYA INDUCTION PACK FO - guselkumab soln auto-injector 200 mg/2ml	5	•		•	•		
TRULANCE - plecanatide tab 3 mg	3	•		•			
ursodiol cap 300 mg	2						
ursodiol tab 250 mg (Urso 250)	2						
ursodiol tab 500 mg (Urso forte)	2						
VIBERZI - eluxadoline tab 75 mg, 100 mg	4						
ZYMFENTRA 1-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	6	•		•	•	•	
ZYMFENTRA 2-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	6	•		•	•	•	
ZYMFENTRA 2-SYRINGE - infliximab-dyyb soln prefilled syringe kit 120 mg/ml	6	•		•	•	•	
GENITOURINARY AGENTS							
URINARY ANTISPASMODICS							
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	2						
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)	2						
flavoxate hcl tab 100 mg	2						
mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)	2						
MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml	3						
MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg	3						
oxybutynin chloride solution 5 mg/5ml	1						
oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)	1						
oxybutynin chloride tab er 24hr 15 mg	1						
oxybutynin chloride tab 5 mg	1						
solifenacin succinate tab 5 mg, 10 mg (Vesicare)	1						
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)	2						
tolterodine tartrate tab 1 mg, 2 mg (Detrol)	2						
trospium chloride cap er 24hr 60 mg	2						
trospium chloride tab 20 mg	2						
VAGINAL PRODUCTS							
clindamycin phosphate vaginal cream 2% (Cleocin)	2						
CLINDESSE - clindamycin phosphate (one dose) vaginal cream 2%	4						
ENCARE - nonoxynol-9 vaginal suppos 100 mg	A						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
estradiol vaginal cream 0.01% (Estrace)	2						
estradiol vaginal tab 10 mcg (Vagifem)	2						
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	3						
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	4						
metronidazole vaginal gel 0.75%	2						
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	4						
NUVESSA - metronidazole vaginal gel 1.3%	4						
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	A						•
PHEXX - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	A						•
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	4						
terconazole vaginal cream 0.4%, 0.8%	2						
terconazole vaginal suppos 80 mg	2						
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	A						•
VANDAZOLE - metronidazole vaginal gel 0.75%	4						
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	A						•
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	A						•
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	A						•
GENITOURINARY AGENTS - MISC.							
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	1						
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg	3					•	
dutasteride cap 0.5 mg (Avodart)	1						
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	2						
ELMIRON - pentosan polysulfate sodium caps 100 mg	4						
finasteride tab 5 mg (Proscar)	1						
K-PHOS NO 2 - potassium & sodium acid phosphates tab 305-700 mg	3						
potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)	2						
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	2						
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	2						
silodosin cap 4 mg, 8 mg (Rapaflo)	2						
SODIUM CITRATE AND CITRIC - sodium citrate & citric acid soln 500-334 mg/5ml	2						
SODIUM CITRATE/CITRIC ACI - sodium citrate & citric acid soln 500-334 mg/5ml	2						
tamsulosin hcl cap 0.4 mg (Flomax)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
VANRAFIA - atrasentan hcl tab 0.75 mg	6				•	•	
CENTRAL NERVOUS SYSTEM DRUGS							
ANTIANXIETY AGENTS							
alprazolam tab er 24hr 0.5 mg, 1 mg, 3 mg (Xanax xr)	1						
alprazolam tab er 24hr 2 mg (Xanax xr)	2						
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	1						
buspirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg	1						
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	1						
clorazepate dipotassium tab 3.75 mg, 15 mg	2						
clorazepate dipotassium tab 7.5 mg (Tranxene t)	2						
diazepam conc 5 mg/ml	2						
diazepam oral soln 1 mg/ml	1						
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	1						
hydroxyzine hcl syrup 10 mg/5ml	2						
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	1						
HYDROXYZINE PAMOATE - hydroxyzine pamoate cap 100 mg	4						
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)	1						
lorazepam conc 2 mg/ml	2						
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	1						
meprobamate tab 200 mg, 400 mg	2						
oxazepam cap 10 mg, 15 mg, 30 mg	2						
ANTIDEPRESSANTS							
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	1						
amitriptyline hcl tab 150 mg	2						
amoxapine tab 25 mg	1						
amoxapine tab 50 mg, 100 mg, 150 mg	2						
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	1						
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	1						
bupropion hcl tab 75 mg, 100 mg	1						
citalopram hydrobromide oral soln 10 mg/5ml	2						
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	1						
clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	2						
desipramine hcl tab 10 mg (Norpramin)	1						
desipramine hcl tab 25 mg (Norpramin)	2						
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	2						
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
DOXEPIN HCL - doxepin hcl conc 10 mg/ml	1						
doxepin hcl cap 10 mg, 25 mg, 50 mg	1						
doxepin hcl cap 75 mg, 100 mg, 150 mg	2						
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)	1						
EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	4						
escitalopram oxalate soln 5 mg/5ml (base equiv)	2						
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)	1						
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg	4						
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)	1						
fluoxetine hcl solution 20 mg/5ml	2						
fluoxetine hcl tab 10 mg	1						
fluoxetine hcl tab 20 mg	2						
fluvoxamine maleate tab 25 mg, 50 mg	1						
fluvoxamine maleate tab 100 mg	2						
imipramine hcl tab 10 mg, 25 mg, 50 mg	1						
MARPLAN - isocarboxazid tab 10 mg	4						
mirtazapine orally disintegrating tab 15 mg (Remeron soltab)	1						
mirtazapine orally disintegrating tab 30 mg, 45 mg (Remeron soltab)	2						
mirtazapine tab 7.5 mg	2						
mirtazapine tab 15 mg, 30 mg (Remeron)	1						
mirtazapine tab 45 mg	1						
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	4						
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	1						
nortriptyline hcl soln 10 mg/5ml	2						
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	1						
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	4						
protriptyline hcl tab 5 mg, 10 mg	2						
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	2						
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	1						
tranylcypromine sulfate tab 10 mg (Parnate)	2						
trazodone hcl tab 50 mg, 100 mg, 150 mg	1						
trimipramine maleate cap 25 mg, 50 mg, 100 mg	2						
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	1						
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	2						
ZURZUVAE - zuranolone cap 20 mg, 25 mg, 30 mg	3	•					
ANTIPSYCHOTICS							
aripiprazole oral solution 1 mg/ml	2						
aripiprazole orally disintegrating tab 10 mg, 15 mg	2						
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg (Abilify)	1						
aripiprazole tab 30 mg (Abilify)	2						
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	2						
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	4						
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	2						
clozapine orally disintegrating tab 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg	2						
clozapine tab 25 mg (Clozaril)	1						
clozapine tab 50 mg, 100 mg, 200 mg (Clozaril)	2						
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	4						
FANAPT TITRATION PACK A - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	4						
FANAPT TITRATION PACK B - iloperidone tab 1 mg & 2 mg & 6 mg & 8 mg titration pak	4						
FANAPT TITRATION PACK C - iloperidone tab 1 mg & 2 mg & 6 mg titration pak	4						
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	2						
FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	4						
haloperidol lactate oral conc 2 mg/ml	2						
haloperidol tab 0.5 mg, 1 mg	1						
haloperidol tab 2 mg, 5 mg, 10 mg, 20 mg	2						
LITHIUM CARBONATE - lithium carbonate cap 150 mg, 300 mg, 600 mg	4						
lithium carbonate cap 150 mg, 600 mg (Lithium carbonate)	1						
lithium carbonate cap 300 mg	1						
lithium carbonate tab er 300 mg (Lithobid)	1						
lithium carbonate tab er 450 mg	1						
lithium carbonate tab 300 mg	1						
lithium oral solution 8 meq/5ml	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	2						
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	2						
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	2						
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg (Zyprexa)	1						
olanzapine tab 20 mg (Zyprexa)	2						
paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega)	2						
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	2						
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	1						
prochlorperazine suppos 25 mg	2						
quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg (Seroquel xr)	1						
quetiapine fumarate tab er 24hr 300 mg, 400 mg (Seroquel xr)	2						
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	1						
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	3						
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	4						
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	2						
risperidone soln 1 mg/ml (Risperdal)	2						
risperidone tab 0.25 mg	1						
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal)	1						
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	4						
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	2						
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	2						
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	2						
HYPNOTICS							
BELSOMRA - suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	4		•	•			
estazolam tab 1 mg, 2 mg	2						
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	1			•			
HETLIOZ LQ - tasimelteon oral susp 4 mg/ml	6	•		•	•	•	
PHENOBARBITAL - phenobarbital elixir 20 mg/5ml	2						
PHENOBARBITAL - phenobarbital tab 15 mg, 16.2 mg, 30 mg, 60 mg, 100 mg	1						
PHENOBARBITAL - phenobarbital tab 32.4 mg, 64.8 mg, 97.2 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ramelteon tab 8 mg (Rozerem)	2						
tasimelteon capsule 20 mg (Hetlioz)	5	•			•		
temazepam cap 15 mg, 30 mg (Restoril)	1						
zaleplon cap 5 mg, 10 mg	1			•			
zolpidem tartrate tab er 6.25 mg (Ambien cr)	1			•			
zolpidem tartrate tab er 12.5 mg (Ambien cr)	2			•			
zolpidem tartrate tab 5 mg, 10 mg (Ambien)	1			•			
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ ANOREXIANTS							
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	2						
amphetamine-dextroamphetamine tab 5 mg (Adderall)	1						
amphetamine-dextroamphetamine tab 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)	2						
armodafinil tab 50 mg (Nuvigil)	1						
armodafinil tab 150 mg, 200 mg, 250 mg (Nuvigil)	2						
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)	2						
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	2						
clonidine hcl tab er 12hr 0.1 mg (Kapvay)	2						
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	2						
dexmethylphenidate hcl tab 2.5 mg, 5 mg (Focalin)	1						
dexmethylphenidate hcl tab 10 mg (Focalin)	2						
dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg (Dexedrine)	2						
dextroamphetamine sulfate oral solution 5 mg/5ml	2						
dextroamphetamine sulfate tab 5 mg, 10 mg	2						
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)	1						
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)	2						
lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)	2						
methamphetamine hcl tab 5 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	2						
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	2						
methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	2						
methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)	2						
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)	2						
methylphenidate hcl tab er 10 mg, 20 mg	2						
methylphenidate hcl tab 5 mg, 10 mg (Ritalin)	1						
methylphenidate hcl tab 20 mg (Ritalin)	2						
modafinil tab 100 mg, 200 mg (Provigil)	2						
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	3	•					
WAKIX - pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	6	•			•	•	
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.							
acamprosate calcium tab delayed release 333 mg	2						
AQNEURSA - levacetylleucine for susp packet 1 gm	6	•			•	•	
AUSTEDO - deutetrabenazine tab 6 mg, 9 mg, 12 mg	6	•		•	•		
AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 24 mg, 30 mg, 36 mg, 42 mg, 48 mg	6	•		•	•		
AUSTEDO XR PATIENT TITRAT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	6	•		•	•		
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	5	•		•	•		
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	5	•		•	•		
BETASERON - interferon beta-1b for inj kit 0.3 mg	5	•		•	•		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	A						•
CHLORDIAZEPOXIDE/ AMITRIPT - chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	4						
dalfampridine tab er 12hr 10 mg (Ampyra)	2						
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	2			•	•		
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	2			•	•		
disulfiram tab 250 mg, 500 mg	2						
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	1						
donepezil hydrochloride tab 5 mg, 10 mg (Aricept)	1						
donepezil hydrochloride tab 23 mg (Aricept)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	2			•	•		
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	2						
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	2						
GILENYA - fingolimod hcl cap 0.25 mg (base equiv)	6	•		•	•		
glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	5			•	•		
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	6	•			•	•	
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	6	•			•	•	
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	6	•			•	•	
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	5	•		•	•		
lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)	2	•					
LUMRYZ - sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	6	•			•	•	
LUMRYZ STARTER PACK - sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak	6	•			•	•	
memantine hcl oral solution 2 mg/ml	2						
memantine hcl tab 5 mg, 10 mg (Namenda)	1						
MEMANTINE HCL TITRATION P - memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	2						
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak (Savella titration pa)	2						
milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg (Savella)	2						
nicotine polacrilex gum 2 mg, 4 mg	A						•
nicotine polacrilex lozenge 2 mg, 4 mg	A						•
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	A						•
NICOTINE TRANSDERMAL SYST - nicotine td patch 24 hr kit 21-14-7 mg/24hr	A						•
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	A						•
PERPHENAZINE/ AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	4						
pimozide tab 1 mg, 2 mg	2						
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	5	•		•	•	•	
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	5	•		•	•	•	
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	5	•		•	•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	5	•		•	•	•	
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	5	•		•	•	•	
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	5	•		•	•		
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	5	•		•	•		
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	5	•		•	•		
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	5	•		•	•		
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	2						
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	2						
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	3						
SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	3						
sodium oxybate oral solution 500 mg/ml (Xyrem)	5				•	•	
teriflunomide tab 7 mg, 14 mg (Aubagio)	5			•	•		
tetrabenazine tab 12.5 mg, 25 mg (Xenazine)	5				•		
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	A						•
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	A						•
VUMERITY - diroximel fumarate capsule delayed release 231 mg	5	•		•	•	•	
WAINUA - eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	6	•			•	•	
ZEPOSIA - ozanimod hcl cap 0.92 mg	5	•		•	•		
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	5	•		•	•		
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	5	•		•	•		
ANALGESICS AND ANESTHETICS							
ANALGESICS - NON-NARCOTIC							
aspirin chew tab 81 mg	A						•
aspirin tab delayed release 81 mg	A						•
butalbital-acetaminophen tab 50-325 mg	2						
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)	1						
butalbital-aspirin-caffeine cap 50-325-40 mg	2						
diflunisal tab 500 mg	2						
JOURNAVX - suzetrigine tab 50 mg	4						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
TENCON - butalbital-acetaminophen tab 50-325 mg	4						
ANALGESICS - NARCOTIC							
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	1						
acetaminophen w/ codeine tab 300-30 mg	1						
acetaminophen w/ codeine tab 300-60 mg	2						
ACETAMINOPHEN/CODEINE - acetaminophen w/ codeine soln 120-12 mg/5ml	4						
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	3						
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	2						
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)	2						
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	2						
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	2						
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	2						
butorphanol tartrate nasal soln 10 mg/ml	2			•			
CODEINE SULFATE - codeine sulfate tab 15 mg, 60 mg	4						
codeine sulfate tab 30 mg (Codeine sulfate)	2						
DISKETS - methadone hcl tab for oral susp 40 mg	2						
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (Duragesic)	2						
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	4						
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen soln 10-300 mg/15ml	4						
HYDROCODONE BITARTRATE/AC - hydrocodone-acetaminophen tab 2.5-325 mg	3						
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2						
hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg	1						
hydrocodone-ibuprofen tab 7.5-200 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
HYDROCODONE/ IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg	4						
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	2						
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	2						
hydromorphone hcl tab 2 mg, 4 mg (Dilaudid)	1						
hydromorphone hcl tab 8 mg (Dilaudid)	2						
methadone hcl conc 10 mg/ml (Methadose)	2						
methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)	2						
methadone hcl tab for oral susp 40 mg	2						
methadone hcl tab 5 mg	1						
methadone hcl tab 10 mg	2						
MORPHINE SULFATE - morphine sulfate tab 15 mg, 30 mg	3						
MORPHINE SULFATE ER - morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	4						
morphine sulfate oral soln 10 mg/5ml	1						
morphine sulfate oral soln 20 mg/5ml (Morphine sulfate)	2						
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	2						
morphine sulfate tab er 15 mg (Ms contin)	1						
morphine sulfate tab er 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)	2						
morphine sulfate tab 15 mg (Morphine sulfate)	1						
morphine sulfate tab 30 mg (Morphine sulfate)	2						
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3						
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	2						
oxycodone hcl soln 5 mg/5ml	2						
oxycodone hcl tab 5 mg (Roxicodone)	1						
oxycodone hcl tab 10 mg	1						
oxycodone hcl tab 15 mg, 30 mg (Roxicodone)	2						
oxycodone hcl tab 20 mg	2						
oxycodone w/ acetaminophen tab 2.5-325 mg, 7.5-325 mg, 10-325 mg (Percocet)	2						
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)	1						
oxymorphone hcl tab 5 mg, 10 mg	2						
OXYMORPHONE HYDROCHLORIDE - oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	4						
TRAMADOL HCL ER - tramadol hcl tab er 24hr biphasic release 200 mg, 300 mg	4						
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
tramadol hcl tab 50 mg (Ultram)	1						
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	1						
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	3			•			
ANALGESICS - ANTI-INFLAMMATORY							
ADALIMUMAB-AATY CD/UC/HS - adalimumab-aaty auto-injector kit 80 mg/0.8ml	5	•		•	•		
ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	5	•		•	•		
ADALIMUMAB-AATY 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	5	•		•	•		
ADALIMUMAB-AATY 2-SYRINGE - adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	5	•		•	•		
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml, 80 mg/0.8ml	5	•		•	•		
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml	5	•		•	•		
ARCALYST - rilonacept for inj 220 mg	6	•		•	•	•	
celecoxib cap 50 mg, 100 mg, 200 mg (Celebrex)	1						
celecoxib cap 400 mg (Celebrex)	2						
diclofenac potassium tab 50 mg	2						
diclofenac sodium tab delayed release 25 mg	2						
diclofenac sodium tab delayed release 50 mg, 75 mg	1						
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	2						
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	2						
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	5	•		•	•		
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	5	•		•	•		
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	5	•		•	•		
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	5	•		•	•		
etodolac cap 200 mg, 300 mg	2						
etodolac tab er 24hr 400 mg, 500 mg, 600 mg	2						
etodolac tab 400 mg (Lodine)	2						
etodolac tab 500 mg	2						
FLURBIPROFEN - flurbiprofen tab 50 mg	4						
FLURBIPROFEN - flurbiprofen tab 100 mg	2						
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	5	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
HADLIMA PUSHTOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	5	•		•	•		
ibuprofen tab 400 mg, 600 mg, 800 mg	1						
indomethacin cap er 75 mg	1						
indomethacin cap 25 mg, 50 mg	1						
ketorolac tromethamine tab 10 mg	1						
KEVZARA - sarilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	6	•		•	•		
KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	6	•		•	•		
leflunomide tab 10 mg, 20 mg (Arava)	2						
MECLOFENAMATE SODIUM - meclofenamate sodium cap 50 mg, 100 mg	4						
mefenamic acid cap 250 mg	2	•					
meloxicam tab 7.5 mg, 15 mg (Mobic)	1						
nabumetone tab 500 mg, 750 mg	1						
naproxen sodium tab 275 mg, 550 mg	2						
naproxen tab 250 mg, 375 mg	1						
naproxen tab 500 mg (Naprosyn)	1						
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	6	•		•	•		
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	6	•		•	•		
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	5	•		•	•		
OTEZLA - apremilast tab 20 mg, 30 mg	5	•		•	•		
OTEZLA XR - apremilast tab er 24hr 75 mg	5	•		•	•		
OTEZLA/OTEZLA XR 28 DAY T - apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	5	•		•	•		
oxaprozin tab 600 mg (Daypro)	2						
piroxicam cap 10 mg, 20 mg (Feldene)	2						
RASUVO - methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml	3						
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	5	•		•	•	•	
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	5	•		•	•	•	
SIMLANDI - adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	5	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	5	•		•	•		
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	•		•	•		
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	5	•		•	•		
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	5	•		•	•		
sulindac tab 150 mg, 200 mg	1						
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	5	•		•	•		
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	5	•		•	•		
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	5	•		•	•		
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	5	•		•	•		
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	5	•		•	•		
MIGRAINE PRODUCTS							
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	3						
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	3						
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	3						
almotriptan malate tab 6.25 mg, 12.5 mg	2			•			
CAFERGOT - ergotamine w/ caffeine tab 1-100 mg	4			•			
dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)	2			•			
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	2			•			
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	3						
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	3						
ERGOMAR - ergotamine tartrate sl tab 2 mg	4			•			
ERGOTAMINE TARTRATE/CAFFE - ergotamine w/ caffeine tab 1-100 mg	4			•			
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge)	2			•			
NURTEC - rimegepant sulfate tab disint 75 mg	4	•					
REYVOW - lasmiditan succinate tab 50 mg, 100 mg	4	•					
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1			•			
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	1			•			
rizatriptan benzoate tab 5 mg (base equivalent)	1			•			

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	1			•			
sumatriptan nasal spray 20 mg/act (Imitrex)	2			•			
sumatriptan succinate inj 6 mg/0.5ml (Imitrex)	2			•			
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	2			•			
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)	1			•			
UBRELVY - ubrogepant tab 50 mg, 100 mg	4	•					
zolmitriptan tab 2.5 mg, 5 mg (Zomig)	2			•			
GOUT AGENTS							
allopurinol tab 100 mg, 300 mg (Zyloprim)	1						
colchicine tab 0.6 mg (Colcrys)	2						
colchicine w/ probenecid tab 0.5-500 mg	2						
febuxostat tab 40 mg, 80 mg (Uloric)	2						
probenecid tab 500 mg	2						
NEUROMUSCULAR DRUGS							
ANTICONVULSANTS							
CARBAMAZEPINE - carbamazepine chew tab 200 mg	4						
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	2						
carbamazepine chew tab 100 mg	2						
carbamazepine susp 100 mg/5ml (Tegretol)	2						
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	2						
carbamazepine tab 200 mg (Tegretol)	2						
clobazam suspension 2.5 mg/ml (Onfi)	2						
clobazam tab 10 mg, 20 mg (Onfi)	2						
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	2						
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	1						
diazepam rectal gel delivery system 2.5 mg	2						
diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial)	2						
DILANTIN - phenytoin sodium extended cap 30 mg, 100 mg	4						
DILANTIN INFATABS - phenytoin chew tab 50 mg	4						
DILANTIN-125 - phenytoin susp 125 mg/5ml	4						
divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	2						
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	1						
divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	2						
EPIDIOLEX - cannabidiol soln 100 mg/ml	3	•				•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom)	2						
ethosuximide cap 250 mg (Zarontin)	2						
ethosuximide soln 250 mg/5ml (Zarontin)	2						
felbamate susp 600 mg/5ml (Felbatol)	2						
felbamate tab 400 mg, 600 mg (Felbatol)	2						
gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	1						
gabapentin oral soln 250 mg/5ml (Neurontin)	2						
gabapentin tab 600 mg, 800 mg (Neurontin)	1						
lacosamide oral solution 10 mg/ml (Vimpat)	2						
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	2						
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	2						
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	2						
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	1						
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	2						
levetiracetam oral soln 100 mg/ml (Keppra)	2						
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	2						
levetiracetam tab 250 mg, 500 mg (Keppra)	1						
levetiracetam tab 750 mg, 1000 mg (Keppra)	2						
methsuximide cap 300 mg (Celontin)	2						
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	4						
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	2						
oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg (Oxtellar xr)	2						
oxcarbazepine tab 150 mg (Trileptal)	1						
oxcarbazepine tab 300 mg, 600 mg (Trileptal)	2						
phenytoin chew tab 50 mg (Dilantin infatabs)	2						
phenytoin sodium extended cap 100 mg (Dilantin)	2						
phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	2						
phenytoin susp 125 mg/5ml (Dilantin-125)	2						
pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica)	1						
pregabalin soln 20 mg/ml (Lyrica)	2						
PRIMIDONE - primidone tab 125 mg	4						
primidone tab 50 mg (Mysoline)	1						
primidone tab 250 mg (Mysoline)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
TIAGABINE HYDROCHLORIDE - tiagabine hcl tab 12 mg, 16 mg	2						
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr)	2						
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr)	2						
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	2						
topiramate sprinkle cap 50 mg	2						
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	1						
valproate sodium oral soln 250 mg/5ml (base equiv)	2						
valproic acid cap 250 mg	2						
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml	4						
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	4						
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	4						
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml	4						
vigabatrin powd pack 500 mg (Sabril)	5				•	•	
vigabatrin tab 500 mg (Sabril)	5				•	•	
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	4						
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	4						
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	4						
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	4						
zonisamide cap 25 mg (Zonegran)	1						
zonisamide cap 50 mg	1						
zonisamide cap 100 mg (Zonegran)	2						
ANTIPARKINSON AGENTS							
amantadine hcl cap 100 mg	2						
amantadine hcl soln 50 mg/5ml	2						
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml	6	•			•	•	
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	5	•			•		
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	1						
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)	2						
bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)	2						
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	2						
carbidopa & levodopa tab 10-100 mg (Sinemet)	1						
carbidopa & levodopa tab 25-100 mg (Sinemet)	2						
carbidopa & levodopa tab 25-250 mg	2						
carbidopa tab 25 mg (Lodosyn)	2						
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)	2						
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)	2						
carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)	2						
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)	2						
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)	2						
carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)	2						
DUOPA - carbidopa-levodopa enteral susp 4.63-20 mg/ml	4					•	
entacapone tab 200 mg (Comtan)	2						
NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	4						
ONAPGO - apomorphine hcl soln cartridge 98 mg/20ml	6	•			•		
pramipexole dihydrochloride tab 0.125 mg, 0.5 mg, 0.75 mg, 1 mg (Mirapex)	1						
pramipexole dihydrochloride tab 0.25 mg, 1.5 mg	1						
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	2						
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	1						
selegiline hcl cap 5 mg	2						
selegiline hcl tab 5 mg	2						
tolcapone tab 100 mg (Tasmar)	2						
TRIHEXYPHENIDYL HCL - trihexyphenidyl hcl oral soln 0.4 mg/ml	4						
trihexyphenidyl hcl tab 2 mg, 5 mg	1						
VYALEV - foscarbidopa-foslevodopa subcutaneous inj 12-240 mg/ml	6	•			•		
NEUROMUSCULAR AGENTS							
DAYBUE - trofinetide oral soln 200 mg/ml	6	•			•	•	
DAYBUE STIX - trofinetide oral powder packet 5000 mg, 6000 mg, 8000 mg	6	•		•	•	•	
DUVYZAT - givinostat hcl oral susp 8.86 mg/ml	6	•			•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
RADICAVA ORS - edaravone oral susp 105 mg/5ml	6	•			•	•	
RADICAVA ORS STARTER KIT - edaravone oral susp 105 mg/5ml	6	•			•	•	
riluzole tab 50 mg (Rilutek)	2						
MUSCULOSKELETAL THERAPY AGENTS							
baclofen tab 10 mg, 20 mg	1						
chlorzoxazone tab 500 mg	2						
cyclobenzaprine hcl tab 5 mg, 10 mg	1						
dantrolene sodium cap 25 mg, 50 mg (Dantrium)	2						
dantrolene sodium cap 100 mg	2						
metaxalone tab 400 mg	2						
metaxalone tab 800 mg (Skelaxin)	2						
methocarbamol tab 500 mg, 750 mg	1						
orphenadrine citrate tab er 12hr 100 mg	2						
SOHONOS - palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	6	•			•	•	
tizanidine hcl tab 2 mg (base equivalent)	1						
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	1						
ANTIMYASTHENIC AGENTS							
FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	6	•			•	•	
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	2						
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	2						
pyridostigmine bromide tab 60 mg (Mestinon)	2						
NUTRITIONAL PRODUCTS							
VITAMINS							
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	1						
phytonadione tab 5 mg (Mephyton)	2						
MULTIVITAMINS							
PRENATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	3						
PRENATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	3						
PRENATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	3						
PRENATAL-U - prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	3						
SE-NATAL 19 - prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	3						
SE-NATAL 19 - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	3						
TRINATE - prenatal vit w/ fe fumarate-fa tab 28-1 mg	3						
MINERALS and ELECTROLYTES							
FLORICAL - sodium fluoride w/ calcium carb cap 8.3-364 mg	A						•
FLORICAL - sodium fluoride w/ calcium carb tab 8.3-364 mg	A						•
FLORIVA - sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	4						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
FLUORIDE - sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	1						•
K-PHOS - potassium phosphate monobasic tab 500 mg	4						
K-PHOS NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	4						
MONOCAL - sodium monofluorophosphate-calcium carb tab 22.75-625 mg	A						•
PHOSPHA 250 NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2						
PHOSPHO-TRIN K500 - potassium phosphate monobasic tab 500 mg	2						
PHOSPHO-TRIN 250 NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2						
PHOSPHOROUS - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2						
potassium chloride cap er 8 meq, 10 meq	1						
POTASSIUM CHLORIDE ER - potassium chloride tab er 15 meq	4						
potassium chloride microencapsulated crys er tab 10 meq, 20 meq	1						
potassium chloride microencapsulated crys er tab 15 meq	2						
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	2						
potassium chloride powder packet 20 meq	2						
potassium chloride tab er 8 meq (600 mg)	1						
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)	1						
SODIUM FLUORIDE - sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	1						•
SODIUM FLUORIDE - sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	A						•
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	3						•
HEMATOLOGICAL AGENTS							
HEMATOPOIETIC AGENTS							
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	6				•		
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	6				•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
carbonyl iron susp 15 mg/1.25ml (elemental iron)	A						•
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	5	•		•	•	•	
cyanocobalamin inj 1000 mcg/ml	1						
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)	5				•		
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta)	5				•		
EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	5				•		
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe)	A						•
folic acid cap 0.8 mg	A						•
folic acid tab 400 mcg, 800 mcg	A						•
folic acid tab 1 mg	1						
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	5	•			•		
GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5				•		
GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	5				•		
HYDROXOCOBALAMIN - hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	4						
IRON CHEWS PEDIATRIC - carbonyl iron chew tab 15 mg (elemental iron)	A						•
MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	4						
NEULASTA - pegfilgrastim inj 4 mg/0.4ml	5	•			•		
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	5	•			•		
NEULASTA ONPRO KIT - pegfilgrastim soln prefill syr/infusion dev 6 mg/0.6ml	5	•			•		
NEUPOGEN - filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	5				•		
NEUPOGEN - filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	5				•		
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	5				•		
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5				•		
PROCRIT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	5				•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	5				•		
SIKLOS - hydroxyurea tab 100 mg, 1000 mg	4	•					
XOLREMDI - mavorixafor cap 100 mg	6	•			•	•	
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5				•		
ANTICOAGULANTS							
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	2						
ELIQUIS - apixaban cap sprinkle 0.15 mg	3						
ELIQUIS - apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	3						
ELIQUIS - apixaban tab for oral susp 0.5 mg	3						
ELIQUIS - apixaban tab 2.5 mg, 5 mg	3						
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	3						
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)	2						
enoxaparin sodium inj 300 mg/3ml (Lovenox)	2						
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	2						
FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	4						
FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	4						
HEPARIN SODIUM - heparin sodium (porcine) pf inj 5000 unit/ml	4						
heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	2						
heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	2						
PRADAXA - dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	4						
rivaroxaban for susp 1 mg/ml (Xarelto)	2						
rivaroxaban tab 2.5 mg (Xarelto)	2						
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1						
XARELTO - rivaroxaban for susp 1 mg/ml	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
XARELTO - rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	3						
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	3						
HEMOSTATICS							
tranexamic acid tab 650 mg (Lysteda)	2						
HEMATOLOGICAL AGENTS - MISC.							
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	5	•			•		
ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	5	•			•		
anagrelide hcl cap 0.5 mg (Agrylin)	2						
anagrelide hcl cap 1 mg	2						
ANDEMBRY - garadacimab-gxii soln auto-injector 200 mg/1.2ml	5				•		
aspirin-dipyridamole cap er 12hr 25-200 mg	2						
BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	5	•			•		
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit	6	•			•	•	
cilostazol tab 50 mg, 100 mg	1						
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	1						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
DAWNZERA - donidalorsen sodium subcutaneous soln auto-inj 80 mg/0.8ml	5				•		
dipyridamole tab 25 mg, 50 mg, 75 mg	2						
FABHALTA - iptacopan hcl cap 200 mg	5	•			•	•	
FEIBA - antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	5				•		
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	6	•		•	•	•	
HEMOFIL M - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	5	•			•		
HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	5	•			•		
HYMPAVZI - marstacimab-hncq subcutaneous soln auto-inj 150 mg/ml	6	•			•		
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	5	•			•	•	
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	5	•			•	•	
pentoxifylline tab er 400 mg	2						
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	2						
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg	5	•			•	•	

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	5	•			•	•	
RECOMBINATE - antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	5	•			•		
RIASTAP - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	5				•	•	
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	5	•			•		
RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	4	•				•	
ticagrelor tab 60 mg, 90 mg (Brilinta)	2						
WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	5				•		
WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	5				•		
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	5	•			•		
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	5	•			•		
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	5	•			•		
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	5	•			•		
ZONTIVITY - vorapaxar sulfate tab 2.08 mg (base equivalent)	4						
TOPICAL PRODUCTS							
OPHTHALMIC AGENTS							
ALOCRIL - nedocromil sodium ophth soln 2%	4						
APRACLONIDINE - apraclonidine hcl ophth soln 0.5% (base equivalent)	4						
ATROPINE SULFATE - atropine sulfate ophth soln 1%	4						
atropine sulfate ophth soln 1% (Atropine sulfate)	2						
AZASITE - azithromycin ophth soln 1%	4						
azelastine hcl ophth soln 0.05%	1						
BACITRACIN/POLYMYXIN B - bacitracin-polymyxin b ophth oint	1						
bepotastine besilate ophth soln 1.5% (Bepreve)	2						
BESIFLOXACIN HYDROCHLORID - besifloxacin hcl ophth susp 0.6% (base equiv)	3						
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)	3						
BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	4						
bimatoprost ophth soln 0.03%	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
brimonidine tartrate ophth soln 0.2%	1						
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)	2						
brinzolamide ophth susp 1% (Azopt)	2						
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	2	•					
CARTEOLOL HCL - carteolol hcl ophth soln 1%	4						
ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)	1						
CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	4						
CYCLOGYL - cyclopentolate hcl ophth soln 0.5%, 2%	4						
CYCLOMYDRIL - cyclopentolate w/ phenylephrine ophth soln 0.2-1%	4						
cyclopentolate hcl ophth soln 1% (Cyclogyl)	1						
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)	6				•	•	
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate ophth soln 0.1%	4						
diclofenac sodium ophth soln 0.1%	1						
difluprednate ophth emulsion 0.05% (Durezol)	2						
dorzolamide hcl ophth soln 2% (Trusopt)	1						
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	1						
epinastine hcl ophth soln 0.05%	2						
erythromycin ophth oint 5 mg/gm	1						
FLAREX - fluorometholone acetate ophth susp 0.1%	4						
fluorometholone ophth susp 0.1% (Fml liquifilm)	2						
FLURBIPROFEN SODIUM - flurbiprofen sodium ophth soln 0.03%	4						
gatifloxacin ophth soln 0.5% (Zymaxid)	2						
gentamicin sulfate ophth soln 0.3%	1						
ketorolac tromethamine ophth soln 0.4% (Acular ls)	2						
ketorolac tromethamine ophth soln 0.5% (Acular)	1						
latanoprost ophth soln 0.005% (Xalatan)	1						
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	4						
LOTEMAX - loteprednol etabonate ophth oint 0.5%	4						
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	4						
loteprednol etabonate ophth gel 0.5% (Lotemax)	2						
loteprednol etabonate ophth susp 0.2% (Alrex)	2						
loteprednol etabonate ophth susp 0.5% (Lotemax)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
MAXIDEX - dexamethasone ophth susp 0.1%	4						
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	2						
NATACYN - natamycin ophth susp 5%	3						
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	1						
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	1						
NEOMYCIN/POLYMYXIN/BACITR - bacitracin-polymyxin-neomycin-hc ophth oint 1%	2						
NEOMYCIN/POLYMYXIN/BACITR - neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	2						
NEOMYCIN/POLYMYXIN/GRAMIC - neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	4						
ofloxacin ophth soln 0.3% (Ocuflox)	1						
OXERVATE - cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	6				•	•	
pilocarpine hcl ophth soln 1%, 2%, 4% (Isopto carpine)	2						
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	1						
prednisolone acetate ophth susp 1% (Pred forte)	2						
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	4						
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%	4						
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	3						
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth soln 10%	2						
SULFACETAMIDE SODIUM/PRED - sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	4						
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	2						
timolol maleate ophth soln 0.25%, 0.5% (Timoptic)	1						
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%	4						
tobramycin ophth soln 0.3% (Tobrex)	1						
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	2						
travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)	2						
TRIFLURIDINE - trifluridine ophth soln 1%	3						
ZERVIATE - cetirizine hcl ophth soln 0.24% (base equiv)	4						
OTIC AGENTS							
acetic acid otic soln 2%	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)	2						
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)	2						
CIPROFLOXACIN/FLUOCINOLON - ciprofloxacin-fluocinolone aceton (pf) otic soln 0.3-0.025%	4						
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	2						
hydrocortisone w/ acetic acid otic soln 1-2%	2						
neomycin-polymyxin-hc otic soln 1%	2						
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	2						
ofloxacin otic soln 0.3%	2						
OTOVEL - ciprofloxacin-fluocinolone aceton (pf) otic soln 0.3-0.025%	4						
MOUTH/THROAT/DENTAL AGENTS							
cevimeline hcl cap 30 mg (Evoxac)	2						
chlorhexidine gluconate soln 0.12% (Peridex)	1						
CLINPRO 5000 - sodium fluoride paste 1.1%	1						•
clotrimazole troche 10 mg	2						
DENTA 5000 PLUS - sodium fluoride cream 1.1%	1						•
DENTA 5000 PLUS SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
DENTAGEL - sodium fluoride gel 1.1% (0.5% f)	1						•
EASYGEL - stannous fluoride gel 0.4%	A						•
FLUORIDEX DAILY DEFENSE - sodium fluoride paste 1.1%	1						•
FLUORIDEX DAILY RENEWAL - stannous fluoride conc 0.63%	2						•
FLUORIDEX ENHANCED WHITEN - sodium fluoride paste 1.1%	1						•
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
FLUORIMAX 5000 - sodium fluoride paste 1.1%	1						•
FLUORIMAX 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
JUST RIGHT 5000 - sodium fluoride paste 1.1%	1						•
lidocaine hcl viscous soln 2%	1						
nystatin susp 100000 unit/ml	1						
PARODONTAX - stannous fluoride paste 0.454%	A						•
PERIOMED - stannous fluoride conc 0.63%	A						•
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	2						
PREVIDENT 5000 ENAMEL PRO - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
PREVIDENT 5000 SENSITIVE - sodium fluoride-potassium nitrate gel 1.1-5%	3						•

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
SENSODYNE COMPLETE PROTEC - stannous fluoride paste 0.454%	A						•
SENSODYNE RAPID RELIEF - stannous fluoride paste 0.454%	A						•
SENSODYNE REPAIR & PROTEC - stannous fluoride paste 0.454%	A						•
SENSODYNE SENSITIVITY & G - stannous fluoride paste 0.454%	A						•
SENSODYNE SENSITIVITY GUM - stannous fluoride paste 0.454%	A						•
SF - sodium fluoride gel 1.1% (0.5% f)	1						•
SF 5000 PLUS - sodium fluoride cream 1.1%	1						•
SODIUM FLUORIDE - sodium fluoride cream 1.1%	1						•
SODIUM FLUORIDE - sodium fluoride gel 1.1% (0.5% f)	1						•
SODIUM FLUORIDE - sodium fluoride rinse 0.2%	1						•
SODIUM FLUORIDE 5000 PLUS - sodium fluoride cream 1.1%	1						•
SODIUM FLUORIDE 5000 PPM - sodium fluoride gel 1.1% (0.5% f)	1						•
SODIUM FLUORIDE 5000 PPM - sodium fluoride paste 1.1%	1						•
SODIUM FLUORIDE 5000 PPM - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
SODIUM FLUORIDE/ POTASSIUM - sodium fluoride-potassium nitrate gel 1.1-5%	3						•
triamcinolone acetonide dental paste 0.1%	2						
ANORECTAL AGENTS							
ANUCORT-HC - hydrocortisone acetate suppos 25 mg	2						
ANUSOL-HC - hydrocortisone acetate suppos 25 mg	2						
CORTIFOAM - hydrocortisone acetate perianal foam 10% (90 mg/dose)	3						
HEMMOREX-HC - hydrocortisone acetate suppos 25 mg	2						
HYDROCORTISONE - hydrocortisone perianal cream 1%	4						
HYDROCORTISONE ACETATE - hydrocortisone acetate suppos 25 mg	2						
hydrocortisone enema 100 mg/60ml (Cortenema)	2						
hydrocortisone perianal cream 2.5% (Anusol-hc)	2						
nitroglycerin oint 0.4% (Rectiv)	2						
PROCTOCORT - hydrocortisone perianal cream 1%	4						
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	4						
DERMATOLOGICALS							
acitretin cap 10 mg, 25 mg (Soriatane)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
acitretin cap 17.5 mg	2						
acyclovir oint 5% (Zovirax)	2						
ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	5	•			•	•	
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	5	•			•	•	
ALCLOMETASONE DIPROPIONAT - alclometasone dipropionate oint 0.05%	4						
alclometasone dipropionate cream 0.05%	2						
ALTRENO - tretinoin lotion 0.05%	4	•					
azelaic acid gel 15% (Finacea)	2						
BETAMETHASONE DIPROPIONAT - betamethasone dipropionate augmented gel 0.05%	4						
betamethasone dipropionate augmented cream 0.05% (Diprolene af)	1						
betamethasone dipropionate augmented lotion 0.05%	2						
betamethasone dipropionate augmented oint 0.05% (Diprolene)	2						
betamethasone dipropionate cream 0.05%	2						
betamethasone dipropionate lotion 0.05%	2						
betamethasone dipropionate oint 0.05%	2						
BETAMETHASONE VALERATE - betamethasone valerate lotion 0.1% (base equivalent)	2						
betamethasone valerate cream 0.1% (base equivalent)	2						
betamethasone valerate oint 0.1% (base equivalent)	2						
BIMZELX - bimekizumab-bkzx subcutaneous soln auto-injector 160 mg/ml, 320 mg/2ml	6	•		•	•		
BIMZELX - bimekizumab-bkzx subcutaneous soln prefilled syr 160 mg/ml, 320 mg/2ml	6	•		•	•		
brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)	2						
CALCIPOTRIENE - calcipotriene soln 0.005% (50 mcg/ml)	4						
calcipotriene cream 0.005% (Dovonex)	2						
CIBINQO - abrocitinib tab 50 mg, 100 mg, 200 mg	5	•			•		
ciclopirox gel 0.77%	2						
ciclopirox olamine cream 0.77% (base equiv) (Loprox)	1						
ciclopirox olamine susp 0.77% (base equiv)	2	•					
ciclopirox shampoo 1% (Loprox shampoo)	2						
ciclopirox solution 8% (Penlac Nail Lacquer)	2						
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
clindamycin phosphate gel 1% (twice-daily)	2						
clindamycin phosphate lotion 1% (Cleocin-t)	2						
clindamycin phosphate soln 1%	2						
clindamycin phosphate swab 1%	2						
clobetasol propionate cream 0.05% (Temovate)	2						
clobetasol propionate emollient base cream 0.05%	2						
clobetasol propionate foam 0.05%	2						
clobetasol propionate gel 0.05%	2						
clobetasol propionate oint 0.05% (Temovate)	2						
clobetasol propionate soln 0.05%	2						
CLOCORTOLONE PIVALATE - clocortolone pivalate cream 0.1%	2						
clotrimazole w/ betamethasone cream 1-0.05%	2						
CORDRAN - flurandrenolide tape 4 mcg/sqcm	4						
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	5	•		•	•	•	
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	5	•		•	•	•	
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	5	•		•	•	•	
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	5	•		•	•	•	
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml	5	•		•	•	•	
CROTAN - crotamiton lotion 10%	4						
desonide cream 0.05% (Desowen)	2						
desonide oint 0.05%	2						
desoximetasone cream 0.25% (Topicort)	2						
desoximetasone oint 0.25% (Topicort)	2						
diclofenac sodium soln 1.5%	2	•		•			
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	5	•		•	•		
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	5	•		•	•		
EBGLYSS - lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml	5	•			•	•	
EBGLYSS - lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml	5	•			•	•	
econazole nitrate cream 1%	2						
ENSTILAR - calcipotriene-betamethasone dipropionate foam 0.005-0.064%	3						
ERY - erythromycin pads 2%	4						
ERYTHROMYCIN - erythromycin gel 2%	2	•					

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
erythromycin soln 2%	2						
FILSUVEZ - birch triterpenes gel 10%	6	•			•	•	
finasteride tab 1 mg (Propecia)	1						
fluocinolone acetonide cream 0.01%	2						
fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	2						
fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	2						
fluocinolone acetonide oint 0.025% (Synalar)	2						
fluocinolone acetonide soln 0.01% (Synalar)	2						
fluocinonide cream 0.05%	2						
fluocinonide cream 0.1% (Vanos)	2						
fluocinonide emulsified base cream 0.05%	2						
fluocinonide gel 0.05%	2						
fluocinonide oint 0.05%	2						
fluocinonide soln 0.05%	2						
FLUOROURACIL - fluorouracil soln 2%	4						
fluorouracil cream 5% (Efudex)	2			•			
fluorouracil soln 5%	2						
fluticasone propionate cream 0.05%	2						
fluticasone propionate oint 0.005%	2						
gentamicin sulfate cream 0.1%	2						
gentamicin sulfate oint 0.1%	2						
halobetasol propionate cream 0.05%	2						
HYDROCORTISONE - hydrocortisone lotion 2.5%	4						
hydrocortisone cream 2.5%	1						
hydrocortisone oint 2.5%	1						
hydrocortisone valerate cream 0.2%	2						
HYFTOR - sirolimus gel 0.2%	4	•				•	
imiquimod cream 5% (Aldara)	2						
isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)	2						
ivermectin cream 1% (Soolantra)	2						
ketoconazole cream 2%	2						
ketoconazole shampoo 2%	1						
LEQSELVI - deuruxolitinib phosphate tab 8 mg (base equiv)	6	•		•	•		
lidocaine hcl soln 4%	2						
lidocaine oint 5%	1						
lidocaine patch 5% (Lidoderm)	2	•		•			
lidocaine-prilocaine cream 2.5-2.5%	1						
LITFULO - ritlecitinib tosylate cap 50 mg (base equiv)	6	•		•	•	•	
malathion lotion 0.5% (Ovide)	2						
METHOXSALEN - methoxsalen rapid cap 10 mg	4						
metronidazole cream 0.75% (Metrocream)	2						
metronidazole gel 0.75%	2						
metronidazole gel 1% (Metrogel)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
mometasone furoate cream 0.1%	2						
mometasone furoate oint 0.1%	1						
mometasone furoate solution 0.1% (lotion)	2						
mupirocin oint 2%	1	•					
NAFTIFINE HYDROCHLORIDE - naftifine hcl cream 1%	4						
NATROBA - spinosad susp 0.9%	4						
NEMLUVIO - nemolizumab-ilto for subcutaneous auto-injector 30 mg	5	•			•	•	
nystatin cream 100000 unit/gm	1						
nystatin oint 100000 unit/gm	1						
nystatin topical powder 100000 unit/gm	2						
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	2						
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	1						
oxiconazole nitrate cream 1% (Oxistat)	2						
penciclovir cream 1% (Denavir)	2	•					
permethrin cream 5% (Elimite)	2						
PODOFILOX - podofilox soln 0.5%	4						
SANTYL - collagenase oint 250 unit/gm	4						
SELARSDI - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	•		•	•		
SELARSDI - ustekinumab-aekn subcutaneous soln 45 mg/0.5ml	5	•		•	•		
SELENIUM SULFIDE - selenium sulfide lotion 2.5%	1						
silver sulfadiazine cream 1% (Silvadene)	1						
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	5	•		•	•		
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	5	•		•	•		
SOTYKTU - deucravacitinib tab 6 mg	5	•		•	•		
SPEVIGO - spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml, 300 mg/2ml	6	•			•		
SPINOSAD - spinosad susp 0.9%	4						
STEQEYMA - ustekinumab-stba soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	•		•	•		
sulfacetamide sodium lotion 10% (acne) (Klaron)	2						
SULFAMYLON - mafenide acetate cream 85 mg/gm	4						
tacrolimus oint 0.03%, 0.1% (Protopic)	2						
tazarotene cream 0.05%, 0.1% (Tazorac)	2	•					
tazarotene gel 0.05%, 0.1% (Tazorac)	2						
TREMFYA - guselkumab soln pen-injector 100 mg/ml	5	•		•	•		
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	5	•		•	•		

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	5	•		•	•		
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	2	•					
tretinoin gel 0.01% (Retin-a)	2	•					
TRIAMCINOLONE ACETONIDE - triamcinolone acetonide lotion 0.025%	2						
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	1						
triamcinolone acetonide lotion 0.1%	2						
triamcinolone acetonide oint 0.025%, 0.1%, 0.5%	1						
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	5				•	•	
YESINTEK - ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	•		•	•		
YESINTEK - ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	5	•		•	•		
ZELSUVMI - berdazimer sodium gel 10.3%	4						
MISCELLANEOUS PRODUCTS							
ANTIDOTES							
CHEMET - succimer cap 100 mg	3						
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)	5				•		
deferiprone tab 500 mg, 1000 mg (Ferriprox)	5				•		
FERRIPROX - deferiprone oral soln 100 mg/ml	6				•	•	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	3						
naloxone hcl inj 0.4 mg/ml	1						
naloxone hcl inj 4 mg/10ml	2						
naloxone hcl soln prefilled syringe 0.4 mg/ml, 2 mg/2ml	2						
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	4						
naltrexone hcl tab 50 mg	2						
OPVEE - nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	3						
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	3						
ZURNAI - nalmefene hcl soln auto-injector 1.5 mg/0.5ml (base equiv)	3						
DIAGNOSTIC PRODUCTS							
CONTOUR BLOOD GLUCOSE TES - glucose blood test strip	3						
CONTOUR NEXT BLOOD GLUCOS - glucose blood test strip	3						
CONTOUR PLUS BLOOD GLUCOS - glucose blood test strip	3						
FREESTYLE INSULINX BLOOD - glucose blood test strip	3						
FREESTYLE LITE TEST STRIP - glucose blood test strip	3						
FREESTYLE PRECISION NEO B - glucose blood test strip	3						
FREESTYLE TEST STRIPS - glucose blood test strip	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
OPTIUMEZ TEST STRIPS - glucose blood test strip	3						
PRECISION XTRA BLOOD GLUC - glucose blood test strip	3						
MEDICAL DEVICES							
BD SWABS SINGLE USE - alcohol swabs	4						
CONTOUR HIGH CONTROL - blood glucose calibration - liquid - high	3						
CONTOUR LOW CONTROL - blood glucose calibration - liquid - low	3						
CONTOUR NEXT CONTROL LEVE - blood glucose calibration - liquid - normal, - low	3						
CONTOUR NORMAL CONTROL - blood glucose calibration - liquid - normal	3						
CONTOUR PLUS CONTROL SOLU - blood glucose calibration - liquid	3						
CURITY ALCOHOL PREPS/ MEDI - alcohol swabs	4						
DEXCOM G6 RECEIVER - continuous glucose system receiver	3		•	•			
DEXCOM G6 SENSOR - continuous glucose system sensor	3	•	•	•			
DEXCOM G6 TRANSMITTER - continuous glucose system transmitter	3		•	•			
DEXCOM G7 RECEIVER - continuous glucose system receiver	3		•	•			
DEXCOM G7 SENSOR - continuous glucose system sensor	3	•	•	•			
DEXCOM G7 15 DAY SENSOR - continuous glucose system sensor	3	•	•	•			
FC2 FEMALE CONDOM - condoms - female	A						•
FREESTYLE CONTROL SOLUTIO - blood glucose calibration - liquid	3						
FREESTYLE LIBRE 14 DAY/RE - continuous glucose system receiver	3		•	•			
FREESTYLE LIBRE 14 DAY/SE - continuous glucose system sensor	3	•	•	•			
FREESTYLE LIBRE 2 PLUS/SE - continuous glucose system sensor	3	•	•	•			
FREESTYLE LIBRE 2/ READER/ - continuous glucose system receiver	3		•	•			
FREESTYLE LIBRE 2/ SENSOR/ - continuous glucose system sensor	3	•	•	•			
FREESTYLE LIBRE 3 PLUS/SE - continuous glucose system sensor	3	•	•	•			
FREESTYLE LIBRE 3/ READER/ - continuous glucose system receiver	3		•	•			
FREESTYLE LIBRE 3/ SENSOR/ - continuous glucose system sensor	3	•	•	•			
FREESTYLE LIBRE/ READER/FL - continuous glucose system receiver	3		•	•			
ILET INSULIN INFUSION KIT - insulin infusion pump supplies	3						
ILET INSULIN PUMP - insulin infusion pump - device	3						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ILET STARTER KIT - CONTAC - insulin infusion pump supplies	3						
ILET STARTER KIT - INSET - insulin infusion pump supplies	3						
INSULIN PEN NEEDLES-VARIOUS	3						
INSULIN SYRINGES-VARIOUS	3						
LANCET DEVICES-VARIOUS	3						
LANCETS KIT-VARIOUS	3						
LANCETS MISC-VARIOUS	3						
LANCETS-VARIOUS	3						
MEDISENSE GLUCOSE KETONE - blood glucose calibration - liquid	3						
MEDISENSE HIGH/MID/LOW CO - blood glucose calibration - liquid	3						
OMNIPOD DASH INTRO KIT (G - insulin infusion disposable pump kit	3	•					
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	3	•					
OMNIPOD 5 DEXCOM G7G6 INT - insulin infusion disposable pump kit	3	•					
OMNIPOD 5 DEXCOM G7G6 POD - insulin infusion disposable pump reservoir	3	•					
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump kit	3	•					
OMNIPOD 5 LIBRE2 PLUS G6 - insulin infusion disposable pump reservoir	3	•					
PRECISION GLUCOSE KETONE - blood glucose calibration - liquid	3						
TWIIST REFILL KIT - insulin infusion disposable pump reservoir kit	3	•					
TWIIST REFILL KIT/ INFUSIO - insulin infusion disposable pump reservoir/infus set kit	3	•					
TWIIST STARTER KIT - insulin infusion disposable pump kit	3	•					
V-GO 20 - insulin infusion disposable pump kit 20 unit/24hr	3	•					
V-GO 30 - insulin infusion disposable pump kit 30 unit/24hr	3	•					
V-GO 40 - insulin infusion disposable pump kit 40 unit/24hr	3	•					
ASSORTED CLASSES							
ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg	4						
azathioprine tab 50 mg (Imuran)	2						
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	6	•		•	•	•	
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	6	•		•	•	•	
cyclosporine cap 25 mg, 100 mg (Sandimmune)	2						
cyclosporine modified cap 25 mg, 100 mg (Neoral)	2						
cyclosporine modified cap 50 mg	2						
cyclosporine modified oral soln 100 mg/ml (Neoral)	2						

Drug Name	Drug Tier	Prior Authorization	Step Therapy	Dispensing Limits	Specialty	Limited Distribution	ACA
ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	6				•	•	
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	2						
lenalidomide caps 2.5 mg (Revlimid)	5	•		•	•		
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	5	•		•	•		
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	3						
LUPKYNIS - voclosporin cap 7.9 mg	6	•			•	•	
mycophenolate mofetil cap 250 mg (Cellcept)	2						
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	2						
mycophenolate mofetil tab 500 mg (Cellcept)	2						
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	2						
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	3						
penicillamine tab 250 mg (Depen titratabs)	2						
PROGRAF - tacrolimus cap 0.5 mg, 1 mg, 5 mg	4						
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	4						
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	4						
sirolimus oral soln 1 mg/ml (Rapamune)	2						
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)	2						
sodium polystyrene sulfonate powder	2						
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	2						
THALOMID - thalidomide cap 50 mg, 100 mg	5	•		•	•	•	
VELTASSA - patiromer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	3						
VIJOICE - alpelisib (pros) oral granules packet 50 mg	6	•			•		
VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	6	•			•		
VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	6	•			•		
VYVGART HYTRULO - efgartigimod alf-hyalur-qvfc pref syr 1000-10000 mg-unit/5ml	6	•			•	•	

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