Welcome to the Liberty Formulary

Capital Rx

At Capital Rx, your health is our top priority. We prepared the Liberty Formulary (drug list) to ensure that you have access to a robust offering that meets your needs. This list of drugs is covered by your pharmacy prescription benefit. Some drugs on this list that display as covered on the formulary, may not be covered if your plan does not include coverage of certain categories. If you have any questions regarding your specific coverage, please call the number on the back of your member ID card.

The Liberty formulary is:

- Based on the recommendations of a committee of highly skilled physicians and pharmacists that review drugs regulated by the United States Food and Drug Administration (FDA)
- Inclusive of drugs regulated by the United States Food and Drug Administration (FDA)
- Ensures clinical efficacy, safety, and cost considerations
- Subject to change throughout the year

Please note: drugs that are newly approved by the FDA may not be covered until the committee has been able to fully evaluate them.

Your pharmacy prescription benefit covers many prescription drugs, but some exclusions may apply. If a drug is not covered, an alternative covered drug will be available. Drugs that have not received FDA approval or that have over the counter (OTC) equivalents may not be covered. Please use this list as a guide to talk to your doctor about prescribing covered medications that are appropriate for you, as this may lower your out of pocket costs. For the most up to date version of the Liberty Formulary, please visit www.cap-rx.com.

How to Navigate this List

Each prescription drug product is placed in a Tier from 1 to 3 that determines your cost-share:

- Generic (Tier 1)
- Preferred Brands (Tier 2)
- Non-Preferred Brands (Tier 3)

Generic drugs are displayed in lowercase italicized lettering. Brand drugs are displayed in UPPERCASE LETTERING. Brand drugs may be removed from your drug list after a generic equivalent becomes available. Generic drugs generally have the lowest cost share

Drugs that do not appear on this list are excluded under the Liberty Formulary. If your prescribed medication is not covered, please contact your doctor to see if a covered alternative is right for you. If your prescriber determines that you require a drug that is not covered on the Liberty Formulary, a drug exception request with clinical documentation may be submitted.

If your plan offers a prescription drug benefit for preventive drugs listed under the Affordable Care Act or a Health Savings Account, the drugs will be flagged below. These drugs may be available at $0 or a lower cost share than regularly tiered drugs depending on your benefit.

Additional restrictions may apply and will be indicated next to the drug on the list below. Some drugs may only be covered for members within a certain age range or gender due to recommendations based on FDA-approved labeling and clinical practice guidelines. Some drugs are subject to prior authorization, step therapy, or quantity limits. Please reference the legend below for more information.

Medications with a Specialty Drug flag are used to treat complex medical conditions (e.g. hepatitis, multiple sclerosis, and hemophilia) and require special handling, administration, and member care management. Depending on your pharmacy benefit design, specialty drugs may be part of a benefit with specific coverage and copay requirements that differ from drugs in Tiers 1 – 3. If you do not have a defined specialty benefit, your copay may be based on whether the drug is generic or BRAND, therefore Tier 1 or Tier 3 copays may apply. Note that some drug classes may be excluded by your plan or not covered on your pharmacy benefit. If you have questions about your coverage, please call the number on the back of your member ID card.

For the most up-to-date Formulary Drug list visit our website at cap-rx.com.

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LEGEND		
TIER		DESCRIPTION
1	Generics	
2	Preferred Brands	
3	Non-Preferred Brands	
TYPE		DESCRIPTION
QL	Quantity Limit	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
PA	Prior Authorization	You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
ST	Step Therapy	In some cases, you may be required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
GL	Gender Limit	This prescription drug may only be covered for a single gender.
AL1	Age Limit	This prescription drug may only be covered if you meet the minimum or maximum age limit.
S	Specialty Drug	Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
ACA	Affordable Care Act	Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS		
clonidine hcl er 0.1 mg tab er 12h	1	
guanfacine hcl er 1 mg tab er 24h	1	
guanfacine hcl er 2 mg tab er 24h	1	
guanfacine hcl er 3 mg tab er 24h	1	
guanfacine hcl er 4 mg tab er 24h	1	
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR		
atomoxetine hcl 10 mg cap	1	QL 60 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 100 mg cap	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 18 mg cap	1	QL 60 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 25 mg cap	1	QL 60 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 40 mg cap	1	QL 60 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 60 mg cap	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
atomoxetine hcl 80 mg cap	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
AMPHETAMINE MIXTURES		
ADDERALL XR 10 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS
ADDERALL XR 15 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS
ADDERALL XR 20 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADDERALL XR 25 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS
ADDERALL XR 30 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS
ADDERALL XR 5 MG CAP ER 24H *amphetamine-dextroamphetamine*	1	QL 30 / 30 DAYS
amphetamine-dextroamphetamine 10 mg tab	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine 12.5 mg tab	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine 15 mg tab	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine 20 mg tab	1	QL 90 / 30 DAYS
amphetamine-dextroamphetamine 30 mg tab	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine 5 mg tab	1	QL 60 / 30 DAYS
amphetamine-dextroamphetamine 7.5 mg tab	1	QL 60 / 30 DAYS
AMPHETAMINES		
dextroamphetamine sulfate 10 mg tab	1	QL 180 / 30 DAYS
dextroamphetamine sulfate 5 mg tab	1	QL 90 / 30 DAYS
dextroamphetamine sulfate 5 mg/5ml solution	1	QL 1800 / 30 DAYS
dextroamphetamine sulfate er 10 mg cap er 24h	1	QL 120 / 30 DAYS
dextroamphetamine sulfate er 15 mg cap er 24h	1	QL 120 / 30 DAYS
dextroamphetamine sulfate er 5 mg cap er 24h	1	QL 90 / 30 DAYS
methamphetamine hcl 5 mg tab	1	QL 150 / 30 DAYS
procentra 5 mg/5ml solution	1	QL 1800 / 30 DAYS
VYVANSE 10 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 10 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 20 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 20 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYVANSE 30 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 30 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 40 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 40 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 50 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 50 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 60 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 60 MG CHEW TAB *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
VYVANSE 70 MG CAP *lisdexamfetamine dimesylate*	2	QL 30 / 30 DAYS
zenzedi 10 mg tab	1	QL 180 / 30 DAYS
zenzedi 5 mg tab	1	QL 90 / 30 DAYS
ANALEPTICS		
CAFCIT 60 MG/3ML SOLUTION *caffeine citrate*	3	
caffeine citrate 20 mg/ml solution	1	
caffeine citrate 60 mg/3ml solution	1	
caffeine citrate 60 mg/3ml solution	1	
DOPRAM 20 MG/ML SOLUTION *doxapram hcl*	3	
ANOREXIANT COMBINATIONS		
QSYMIA 11.25-69 MG CAP ER 24H *phentermine hcl-topiramate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
QSYMIA 15-92 MG CAP ER 24H *phentermine hcl-topiramate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QSYMIA 3.75-23 MG CAP ER 24H *phentermine hcl-topiramate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
QSYMIA 7.5-46 MG CAP ER 24H *phentermine hcl-topiramate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
ANOREXIANTS NON-AMPHETAMINE		
LOMAIRA 8 MG TAB *phentermine hcl*	3	QL 90 / 30 DAYS PA AL1 At least 17 yrs old
phentermine hcl 15 mg cap	1	QL 30 / 30 DAYS PA
phentermine hcl 30 mg cap	1	QL 30 / 30 DAYS PA
phentermine hcl 37.5 mg cap	1	QL 30 / 30 DAYS PA AL1 At least 17 yrs old
phentermine hcl 37.5 mg tab	1	QL 30 / 30 DAYS PA AL1 At least 17 yrs old
ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS		
SAXENDA 18 MG/3ML SOLN PEN *liraglutide (weight management)*	3	QL 15 / 30 DAYS PA AL1 At least 18 yrs old
ANTI-OBESITY AGENT COMBINATIONS		
CONTRAVE 8-90 MG TAB ER 12H *naltrexone hcl-bupropion hcl*	3	QL 120 / 30 DAYS PA
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150 MG TAB *solriamfetol hcl*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUNOSI 75 MG TAB *solriamfetol hcl*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
LIPASE INHIBITORS		
XENICAL 120 MG CAP *orlistat*	3	QL 90 / 30 DAYS PA
STIMULANTS - MISC.		
armodafinil 150 mg tab	1	QL 30 / 30 DAYS
armodafinil 200 mg tab	1	QL 30 / 30 DAYS
armodafinil 250 mg tab	1	QL 30 / 30 DAYS
armodafinil 50 mg tab	1	QL 30 / 30 DAYS
CONCERTA 18 MG TAB ER *methylphenidate hcl*	1	QL 30 / 30 DAYS
CONCERTA 27 MG TAB ER *methylphenidate hcl*	1	QL 30 / 30 DAYS
CONCERTA 36 MG TAB ER *methylphenidate hcl*	1	QL 60 / 30 DAYS
CONCERTA 54 MG TAB ER *methylphenidate hcl*	1	QL 30 / 30 DAYS
dexmethylphenidate hcl 10 mg tab	1	QL 60 / 30 DAYS
dexmethylphenidate hcl 2.5 mg tab	1	QL 60 / 30 DAYS
dexmethylphenidate hcl 5 mg tab	1	QL 60 / 30 DAYS
dexmethylphenidate hcl er 10 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 15 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 20 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 25 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 30 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 35 mg cap er 24h	1	QL 30 / 30 DAYS
dexmethylphenidate hcl er 40 mg cap er 24h	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dexmethylphenidate hcl er 5 mg cap er 24h	1	QL 30 / 30 DAYS
metadate er 20 mg tab er	1	QL 90 / 30 DAYS
methylphenidate hcl 10 mg chew tab	1	QL 180 / 30 DAYS
methylphenidate hcl 10 mg tab	1	QL 90 / 30 DAYS
methylphenidate hcl 10 mg/5ml solution	1	QL 900 / 30 DAYS
methylphenidate hcl 2.5 mg chew tab	1	QL 90 / 30 DAYS
methylphenidate hcl 20 mg tab	1	QL 90 / 30 DAYS
methylphenidate hcl 5 mg chew tab	1	QL 90 / 30 DAYS
methylphenidate hcl 5 mg tab	1	QL 90 / 30 DAYS
methylphenidate hcl 5 mg/5ml solution	1	QL 450 / 30 DAYS
methylphenidate hcl er (cd) 10 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (cd) 20 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (cd) 30 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (cd) 40 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (cd) 50 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (cd) 60 mg cap er	1	QL 30 / 30 DAYS
methylphenidate hcl er (la) 20 mg cap er 24h	1	QL 30 / 30 DAYS
methylphenidate hcl er (la) 30 mg cap er 24h	1	QL 30 / 30 DAYS
methylphenidate hcl er (la) 40 mg cap er 24h	1	QL 30 / 30 DAYS
methylphenidate hcl er 10 mg tab er	1	QL 90 / 30 DAYS
methylphenidate hcl er 18 mg tab er	1	QL 30 / 30 DAYS
methylphenidate hcl er 20 mg tab er	1	QL 90 / 30 DAYS
methylphenidate hcl er 27 mg tab er	1	QL 30 / 30 DAYS
methylphenidate hcl er 36 mg tab er	1	QL 60 / 30 DAYS
methylphenidate hcl er 54 mg tab er	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
modafinil 100 mg tab	1	QL 30 / 30 DAYS
modafinil 200 mg tab	1	QL 30 / 30 DAYS
QUILLICHEW ER 20 MG CHER *methylphenidate hcl*	3	QL 30 / 30 DAYS AL1 At least 6 yrs old
QUILLICHEW ER 30 MG CHER *methylphenidate hcl*	3	QL 60 / 30 DAYS AL1 At least 6 yrs old
QUILLICHEW ER 40 MG CHER *methylphenidate hcl*	3	QL 30 / 30 DAYS AL1 At least 6 yrs old
QUILLIVANT XR 25 MG/5ML SRER *methylphenidate hcl*	3	QL 360 / 30 DAYS
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
ACACIA 1:20 SOLUTION *acacia (allergenic extract)*	1	
ACREMONIUM 20000 PNU/ML SOLUTION *acremonium*	1	
ALDER 1:20 SOLUTION *alder*	1	
ALTERNARIA 20000 PNU/ML SOLUTION *alternaria*	1	
AMERICAN BEECH 1:20 SOLUTION *american beech (fagus grandifolia)*	1	
AMERICAN COCKROACH 1:20 SOLUTION *american cockroach*	1	
AMERICAN ELM 1:20 SOLUTION *american elm*	1	
AMERICAN SYCAMORE 1:20 SOLUTION *american sycamore (platanus occidentalis)*	1	
ARIZONA CYPRESS 1:20 SOLUTION *arizona cypress (cupressus arizonica)*	1	
ASPERGILLUS FUMIGATUS 1:10 SOLUTION *aspergillus fumigatus*	1	
ASPERGILLUS FUMIGATUS 1:20 SOLUTION *aspergillus fumigatus*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUREOBASIDIUM 10000 PNU/ML SOLUTION *aureobasidium*	1	
AUREOBASIDIUM 20000 PNU/ML SOLUTION *aureobasidium*	1	
AUREOBASIDIUM PULLULANS 1:20 SOLUTION *aureobasidium*	1	
AUSTRALIAN PINE 1:20 SOLUTION *australian pine*	1	
BAHIA 1:20 SOLUTION *bahia grass (paspalum notatum)*	1	
BALD CYPRESS 1:20 SOLUTION *bald cypress (taxodium distichum)*	1	
BAYBERRY (WAX MYRTLE) 1:20 SOLUTION *bayberry (wax myrtle)*	1	
BERMUDA GRASS 10000 BAU/ML SOLUTION *bermuda grass*	1	
BLACK WALNUT POLLEN 1:20 SOLUTION *black walnut pollen*	1	
BLACK WILLOW 1:20 SOLUTION *black willow*	1	
BOTRYTIS 1:20 SOLUTION *botrytis*	1	
BOTRYTIS 20000 PNU/ML SOLUTION *botrytis*	1	
BOTRYTIS 43000 PNU/ML SOLUTION *botrytis*	1	
BOX ELDER 1:20 SOLUTION *box elder (acer negundo)*	1	
BROME 1:20 SOLUTION *brome grass (bromus inermis)*	1	
CALIFORNIA PEPPER TREE 1:20 SOLUTION *california pepper tree (schinus molle)*	1	
CANDIDA ALBICANS EXTRACT 100 MG/ML SOLUTION *candida albicans extract*	1	
CANDIDA ALBICANS EXTRACT 10000 PNU/ML SOLUTION *candida albicans extract*	1	
CANDIDA ALBICANS EXTRACT 20000 PNU/ML SOLUTION *candida albicans extract*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAT HAIR EXTRACT 10000 BAU/ML SOLUTION *cat hair extract*	1	
CATTLE EPITHELIUM 1:20 SOLUTION *cattle epithelium*	1	
CEDAR ELM 1:20 SOLUTION *cedar elm*	1	
CLADOSPORIUM CLADOSPORIOIDES 10000 PNU/ML SOLUTION *cladosporium cladosporioides*	1	
CLADOSPORIUM CLADOSPORIOIDES 1:20 SOLUTION *cladosporium cladosporioides*	1	
CLADOSPORIUM CLADOSPORIOIDES 20000 PNU/ML SOLUTION *cladosporium cladosporioides*	1	
CLADOSPORIUM CLADOSPORIOIDES 64000 PNU/ML SOLUTION *cladosporium cladosporioides*	1	
CLADOSPORIUM SPHAEROSPERMUM 20000 PNU/ML SOLUTION *cladosporium sphaerospermum*	1	
COCKLEBUR 1:20 SOLUTION *cocklebur (allergenic extract)*	1	
CORN POLLEN 1:20 SOLUTION *corn pollen (zea mays pollen)*	1	
CURVULARIA 20000 PNU/ML SOLUTION *curvularia (curvularia inaequalis)*	1	
DANDELION 1:20 SOLUTION *dandelion (allergenic extract)*	1	
DOG EPITHELIUM 1:10 SOLUTION *dog epithelium (canis lupus familiaris)*	1	
DOG EPITHELIUM 1:20 SOLUTION *dog epithelium (canis lupus familiaris)*	1	
DOG FENNEL 1:20 SOLUTION *dog fennel*	1	
DRECHSLERA 10000 PNU/ML SOLUTION *drechslera*	1	
DRECHSLERA 20000 PNU/ML SOLUTION *drechslera*	1	
EASTERN COTTONWOOD 1:20 SOLUTION *eastern cottonwood*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENGLISH PLANTAIN 1:20 SOLUTION *english plantain (plantago lanceolata)*	1	
EPICOCCUM 10000 PNU/ML SOLUTION *epicoccum*	1	
EPICOCCUM 20000 PNU/ML SOLUTION *epicoccum*	1	
EPICOCCUM NIGRUM 1:10 SOLUTION *epicoccum*	1	
FIRE ANT 1:10 SOLUTION *fire ant (solenopsis invicta)*	1	
FIRE ANT 1:20 SOLUTION *fire ant (solenopsis invicta)*	1	
FUSARIUM 10000 PNU/ML SOLUTION *fusarium*	1	
FUSARIUM 20000 PNU/ML SOLUTION *fusarium*	1	
GERMAN COCKROACH 1:20 SOLUTION *german cockroach (blattella germanica)*	1	
GOLDENROD 1:20 SOLUTION *goldenrod (solidago canadensis)*	1	
GRASTEK 2800 BAU SL TAB *timothy grass pollen allergen extract*	3	QL 30 / 30 DAYS PA
HACKBERRY 1:20 SOLUTION *hackberry*	1	
HONEY BEE VENOM 1100 MCG RECON SOLN *honey bee venom*	1	
HONEY BEE VENOM 120 MCG RECON SOLN *honey bee venom*	1	
HONEY BEE VENOM PROTEIN 550 MCG RECON SOLN *honey bee venom*	3	
HORSE EPITHELIUM 1:10 SOLUTION *horse epithelium*	1	
HORSE EPITHELIUM 1:20 SOLUTION *horse epithelium*	1	
JOHNSON GRASS 1:20 SOLUTION *johnson grass*	1	
JUNE GRASS POLLEN STANDARDIZED 100000 BAU/ML SOLUTION *june grass pollen standardized extract*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KAPOK 1:20 SOLUTION *kapok (ceiba pentandra)*	1	
KOCHIA 1:20 SOLUTION *kochia (allergenic extract)*	1	
LAMBS QUARTERS 1:20 SOLUTION *lambs quarters (chenopodium album)*	1	
LENSCALE 1:20 SOLUTION *lenscale (atriplex lentiformis)*	1	
MEADOW FESCUE GRASS POLLEN 100000 BAU/ML SOLUTION *meadow fescue grass pollen standardized*	1	
MELALEUCA 1:20 SOLUTION *melaleuca (melaleuca quinquenervia)*	1	
MESQUITE 1:20 SOLUTION *mesquite (prosopis)*	1	
MITE (D. FARINAE) 10000 AU/ML SOLUTION *mite (d. farinae)*	1	
MITE (D. PTERONYSSINUS) 10000 AU/ML SOLUTION *mite (d. pteronyssinus)*	1	
MIXED RAGWEED 1:20 SOLUTION *mixed ragweed*	1	
MIXED VESPID VENOM PROTEIN 1100-1100-1100 MCG RECON SOLN *mixed vespid venom*	1	
MIXED VESPID VENOM PROTEIN 120-120-120 MCG RECON SOLN *mixed vespid venom*	1	
MIXED VESPID VENOM PROTEIN 550-550-550 MCG RECON SOLN *mixed vespid venom*	1	
MOUNTAIN CEDAR 1:20 SOLUTION *mountain cedar*	1	
MOUSE EPITHELIUM 1:20 SOLUTION *mouse epithelium (mus musculus)*	1	
MUCOR 10000 PNU/ML SOLUTION *mucor (mucor plumbeus)*	1	
MUCOR 1:20 SOLUTION *mucor (mucor plumbeus)*	1	
MUCOR 20000 PNU/ML SOLUTION *mucor (mucor plumbeus)*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUGWORT 1:20 SOLUTION *mugwort*	1	
OLIVE TREE 1:20 SOLUTION *olive tree (olea europaea)*	1	
ORCHARD GRASS POLLEN 100000 BAU/ML SOLUTION *orchard grass pollen standardized*	1	
PECAN POLLEN 1:20 SOLUTION *pecan pollen*	1	
PENICILLIUM NOTATUM 10000 PNU/ML SOLUTION *penicillium notatum*	1	
PENICILLIUM NOTATUM 1:10 SOLUTION *penicillium notatum*	1	
PENICILLIUM NOTATUM 1:20 SOLUTION *penicillium notatum*	1	
PENICILLIUM NOTATUM 20000 PNU/ML SOLUTION *penicillium notatum*	1	
PERENNIAL RYE GRASS POLLEN 100000 BAU/ML SOLUTION *perennial rye grass pollen standardized*	1	
PHOMA EXIGUA 20000 PNU/ML SOLUTION *phoma exigua*	1	
PRIVET 1:20 SOLUTION *privet (ligustrum vulgare)*	1	
QUEEN PALM 1:20 SOLUTION *queen palm*	1	
RABBIT EPITHELIUM 1:10 SOLUTION *rabbit epithelium*	1	
RABBIT EPITHELIUM 1:20 SOLUTION *rabbit epithelium*	1	
RAGWITEK 12 AMB A 1-U SL TAB *short ragweed pollen allergen extract*	3	QL 30 / 30 DAYS PA
RED BIRCH 1:20 SOLUTION *red birch (betula occidentalis)*	1	
RED CEDAR 1:20 SOLUTION *red cedar*	1	
RED MAPLE 1:20 SOLUTION *red maple (acer rubrum)*	1	
RED MULBERRY 1:20 SOLUTION *red mulberry*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RED TOP GRASS POLLEN 100000 BAU/ML SOLUTION *red top grass pollen standardized*	1	
RHIZOPUS 20000 PNU/ML SOLUTION *rhizopus (rhizopus arrhizus)*	1	
ROUGH MARSH ELDER 1:20 SOLUTION *rough marsh elder*	1	
ROUGH PIGWEED 1:20 SOLUTION *rough pigweed (amaranthus retroflexus)*	1	
RUSSIAN THISTLE 1:20 SOLUTION *russian thistle*	1	
SACCHAROMYCES CEREVISIAE 1:20 SOLUTION *saccharomyces cerevisiae*	1	
SACCHAROMYCES CEREVISIAE 20000 PNU/ML SOLUTION *saccharomyces cerevisiae*	1	
SAGEBRUSH 1:20 SOLUTION *sagebrush*	1	
SHAGBARK HICKORY 1:20 SOLUTION *shagbark hickory (carya ovata)*	1	
SHEEP SORREL 1:20 SOLUTION *sheep sorrel*	1	
SHORT RAGWEED POLLEN EXT 1:20 SOLUTION *short ragweed pollen allergen extract*	1	
SPINY PIGWEED 1:20 SOLUTION *spiny pigweed (amaranthus spinosus)*	1	
STEMPHYLIUM 20000 PNU/ML SOLUTION *stemphylium*	1	
SWEET GUM 1:20 SOLUTION *sweet gum (liquidambar styraciflua)*	1	
SWEET VERNAL GRASS POLLEN 100000 BAU/ML SOLUTION *sweet vernal grass pollen*	1	
TALL RAGWEED 1:20 SOLUTION *tall ragweed (ambrosia trifida)*	1	
TIMOTHY GRASS POLLEN ALLERGEN 10000 BAU/ML SOLUTION *timothy grass pollen allergen extract*	1	
TIMOTHY GRASS POLLEN ALLERGEN 100000 BAU/ML SOLUTION *timothy grass pollen allergen extract*	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRICHOPHYTON 20000 PNU/ML SOLUTION *trichophyton*	1	
VIRGINIA LIVE OAK 1:20 SOLUTION *virginia live oak (quercus virginiana)*	1	
WASP VENOM PROTEIN 1100 MCG RECON SOLN *wasp venom*	1	
WASP VENOM PROTEIN 120 MCG RECON SOLN *wasp venom*	1	
WASP VENOM PROTEIN 550 MCG RECON SOLN *wasp venom*	1	
WESTERN JUNIPER 1:20 SOLUTION *western juniper*	1	
WHITE ASH 1:20 SOLUTION *white ash (fraxinus americana)*	1	
WHITE BIRCH 1:20 SOLUTION *white birch*	1	
WHITE FACED HORNET VENOM 1100 MCG RECON SOLN *white faced hornet venom*	1	
WHITE FACED HORNET VENOM 120 MCG RECON SOLN *white faced hornet venom*	1	
WHITE MULBERRY 1:20 SOLUTION *white mulberry (morus alba)*	1	
WHITE OAK 1:20 SOLUTION *white oak*	1	
WHITE PINE 1:20 SOLUTION *white pine*	1	
WHITE-FACED HORNET VENOM 550 MCG RECON SOLN *white faced hornet venom*	3	
YELLOW DOCK 1:20 SOLUTION *yellow dock*	1	
YELLOW HORNET VENOM PROTEIN 1100 MCG RECON SOLN *yellow hornet venom*	1	
YELLOW HORNET VENOM PROTEIN 120 MCG RECON SOLN *yellow hornet venom*	1	
YELLOW HORNET VENOM PROTEIN 550 MCG RECON SOLN *yellow hornet venom*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
YELLOW JACKET VENOM PROTEIN 120 MCG RECON SOLN *yellow jacket venom*	1	
YELLOW JACKET VENOM PROTEIN 550 MCG RECON SOLN *yellow jacket venom*	1	
BIOLOGICALS MISC		
ADAGEN 250 UNIT/ML SOLUTION *pegademase bovine*	3	S Specialty Drug
MIXED ALLERGENIC EXTRACTS		
DUST MITE MIXED ALLERGEN EXT 10000 AU/ML SOLUTION *dust mite mixed allergen extract*	1	
MIXED ASPERGILLUS 20000 PNU/ML SOLUTION *mixed aspergillus (oryzae, repens, niger, terreus)*	1	
MIXED FEATHERS 1:20 SOLUTION *mixed feathers (chicken-duck-goose)*	1	
ODACTRA 12 SQ-HDM SL TAB *dust mite mixed allergen extract*	3	QL 30 / 30 DAYS PA
ORALAIR 300 IR SL TAB *grass mixed pollens allergen extract*	3	QL 30 / 30 DAYS PA
SORREL/DOCK MIX 1:20 SOLUTION *sheep sorrel-yellow dock*	3	
AMEBICIDES		
SOLOSEC 2 GM PACKET *secnidazole*	2	QL 1 / 28 DAYS GL Female
AMINOGLYCOSIDES		
amikacin sulfate 1 gm/4ml solution	1	
amikacin sulfate 500 mg/2ml solution	1	
ARIKAYCE 590 MG/8.4ML SUSPENSION *amikacin sulfate liposome*	3	QL 235.2 / 28 DAYS PA S Specialty Drug
BETHKIS 300 MG/4ML NEBU SOLN *tobramycin*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENTAMICIN IN SALINE 0.8-0.9 MG/ML-% SOLUTION *gentamicin in saline*	1	
GENTAMICIN IN SALINE 1-0.9 MG/ML-% SOLUTION *gentamicin in saline*	1	
gentamicin in saline 1.2-0.9 mg/ml-% solution	1	
GENTAMICIN IN SALINE 1.6-0.9 MG/ML-% SOLUTION *gentamicin in saline*	1	
GENTAMICIN IN SALINE 2-0.9 MG/ML-% SOLUTION *gentamicin in saline*	1	
GENTAMICIN SULFATE 10 MG/ML SOLUTION *gentamicin sulfate*	1	
gentamicin sulfate 10 mg/ml solution	1	
gentamicin sulfate 40 mg/ml solution	1	
KITABIS PAK 300 MG/5ML NEBU SOLN *tobramycin*	3	S Specialty Drug
neomycin sulfate 500 mg tab	1	
PAROMOMYCIN SULFATE 250 MG CAP *paromomycin sulfate*	2	
paromomycin sulfate 250 mg cap	1	
STREPTOMYCIN SULFATE 1 GM RECON SOLN *streptomycin sulfate*	1	
TOBI PODHALER 28 MG CAP *tobramycin*	3	S Specialty Drug
tobramycin 300 mg/4ml nebu soln	1	S Specialty Drug
TOBRAMYCIN 300 MG/5ML NEBU SOLN *tobramycin*	3	S Specialty Drug
tobramycin 300 mg/5ml nebu soln	1	S Specialty Drug
tobramycin sulfate 1.2 gm recon soln	1	
tobramycin sulfate 1.2 gm/30ml solution	1	
TOBRAMYCIN SULFATE 10 MG/ML SOLUTION *tobramycin sulfate*	1	
TOBRAMYCIN SULFATE 2 GM/50ML SOLUTION *tobramycin sulfate*	1	
tobramycin sulfate 80 mg/2ml solution	1	
ZEMDRI 500 MG/10ML SOLUTION *plazomicin sulfate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
HUMIRA 10 MG/0.1ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA 10 MG/0.2ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA 20 MG/0.2ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA 20 MG/0.4ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA 40 MG/0.4ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA 40 MG/0.8ML PREF SY KT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA PEDIATRIC CROHNS START 40 MG/0.8ML PREF SY KT *adalimumab*	2	QL 6 / 180 DAYS PA S Specialty Drug
HUMIRA PEDIATRIC CROHNS START 80 MG/0.8ML & 40MG/0.4ML PREF SY KT *adalimumab*	2	QL 2 / 180 DAYS PA S Specialty Drug
HUMIRA PEDIATRIC CROHNS START 80 MG/0.8ML PREF SY KT *adalimumab*	2	QL 3 / 180 DAYS PA S Specialty Drug
HUMIRA PEN 40 MG/0.4ML PEN KIT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMIRA PEN 40 MG/0.8ML PEN KIT *adalimumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
HUMIRA PEN-CD/UC/HS STARTER 40 MG/0.8ML PEN KIT *adalimumab*	2	QL 1 / 180 DAYS PA S Specialty Drug
HUMIRA PEN-CD/UC/HS STARTER 80 MG/0.8ML PEN KIT *adalimumab*	2	QL 3 / 180 DAYS PA S Specialty Drug
HUMIRA PEN-PS/UV/ADOL HS START 40 MG/0.8ML PEN KIT *adalimumab*	2	QL 1 / 180 DAYS PA S Specialty Drug
HUMIRA PEN-PS/UV/ADOL HS START 80 MG/0.8ML & 40MG/0.4ML PEN KIT *adalimumab*	2	QL 3 / 180 DAYS PA S Specialty Drug
SIMPONI 100 MG/ML SOLN A-INJ *golimumab*	2	QL 1 / 28 DAYS PA S Specialty Drug
SIMPONI 100 MG/ML SOLN PRSYR *golimumab*	2	QL 1 / 28 DAYS PA S Specialty Drug
SIMPONI ARIA 50 MG/4ML SOLUTION *golimumab*	3	QL 45 / 30 DAYS S Specialty Drug
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
RINVOQ 15 MG TAB ER 24H *upadacitinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
XELJANZ 10 MG TAB *tofacitinib citrate*	2	QL 224 / 365 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XELJANZ 5 MG TAB *tofacitinib citrate*	2	QL 60 / 30 DAYS PA S Specialty Drug
XELJANZ XR 11 MG TAB ER 24H *tofacitinib citrate*	2	QL 30 / 30 DAYS PA S Specialty Drug
XELJANZ XR 22 MG TAB ER 24H *tofacitinib citrate*	2	QL 112 / 365 DAYS PA S Specialty Drug
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP 10 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 12.5 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 15 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 17.5 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 20 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 22.5 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
OTREXUP 25 MG/0.4ML SOLN A-INJ *methotrexate (antirheumatic)*	2	QL 2.4 / 30 DAYS ST
CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
celecoxib 100 mg cap	1	QL 90 / 30 DAYS
celecoxib 200 mg cap	1	QL 60 / 30 DAYS
celecoxib 400 mg cap	1	QL 30 / 30 DAYS
celecoxib 50 mg cap	1	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOLD COMPOUNDS		
RIDAURA 3 MG CAP *auranofin*	3	
INTERLEUKIN-1 BLOCKERS		
ARCALYST 220 MG RECON SOLN *rilonacept*	3	QL 4 / 28 DAYS PA S Specialty Drug
INTERLEUKIN-1BETA BLOCKERS		
ILARIS 150 MG/ML SOLUTION *canakinumab*	3	QL 2 / 28 DAYS PA S Specialty Drug
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162 MG/0.9ML SOLN PRSYR *tocilizumab*	2	QL 3.6 / 28 DAYS PA S Specialty Drug
ACTEMRA 200 MG/10ML SOLUTION *tocilizumab*	3	QL 10.8 / 30 DAYS S Specialty Drug
ACTEMRA 400 MG/20ML SOLUTION *tocilizumab*	3	QL 45 / 30 DAYS S Specialty Drug
ACTEMRA 80 MG/4ML SOLUTION *tocilizumab*	3	QL 5 / 30 DAYS S Specialty Drug
ACTEMRA ACTPEN 162 MG/0.9ML SOLN A-INJ *tocilizumab*	2	QL 4 / 28 DAYS PA S Specialty Drug
KEVZARA 150 MG/1.14ML SOLN A-INJ *sarilumab*	3	QL 2.28 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
KEVZARA 150 MG/1.14ML SOLN PRSYR *sarilumab*	3	QL 2.28 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KEVZARA 200 MG/1.14ML SOLN A-INJ *sarilumab*	3	QL 2.28 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
KEVZARA 200 MG/1.14ML SOLN PRSYR *sarilumab*	3	QL 2.28 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS		
diclofenac-misoprostol 50-0.2 mg tab dr	1	
diclofenac-misoprostol 75-0.2 mg tab dr	1	
READYSHARP ANESTH + KETOROLAC 15 & 0.5 & 1 MG/ML-%-% KIT *ketorolac trometh & bupivacaine hcl & lidocaine hcl*	3	
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
ANJESO 30 MG/ML INJECTABLE *meloxicam*	3	
CALDOLOR 800 MG/200ML SOLUTION *ibuprofen*	3	
CALDOLOR 800 MG/8ML SOLUTION *ibuprofen*	3	
diclofenac potassium 50 mg tab	1	
diclofenac sodium 25 mg tab dr	1	
diclofenac sodium 50 mg tab dr	1	
diclofenac sodium 75 mg tab dr	1	
diclofenac sodium er 100 mg tab er 24h	1	
ec-naproxen 375 mg tab dr	1	
ec-naproxen 500 mg tab dr	1	
etodolac 200 mg cap	1	
etodolac 300 mg cap	1	
etodolac 400 mg tab	1	
etodolac 500 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
etodolac er 400 mg tab er 24h	1	
etodolac er 500 mg tab er 24h	1	
etodolac er 600 mg tab er 24h	1	
FENOPROFEN CALCIUM 200 MG CAP *fenoprofen calcium*	3	
FENOPROFEN CALCIUM 400 MG CAP *fenoprofen calcium*	3	
fenoprofen calcium 600 mg tab	1	
FENORTHO 200 MG CAP *fenoprofen calcium*	3	
flurbiprofen 100 mg tab	1	
FLURBIPROFEN 50 MG TAB *flurbiprofen*	1	
flurbiprofen 50 mg tab	1	
ibu 400 mg tab	1	
ibu 600 mg tab	1	
ibu 800 mg tab	1	
ibuprofen 100 mg/5ml suspension	1	
ibuprofen 400 mg tab	1	
ibuprofen 600 mg tab	1	
ibuprofen 800 mg tab	1	
ibuprofen lysine 10 mg/ml solution	1	
INDOCIN 25 MG/5ML SUSPENSION *indomethacin*	3	QL 180 / 30 DAYS
INDOCIN 50 MG SUPPOS *indomethacin*	3	QL 120 / 30 DAYS
indomethacin 25 mg cap	1	
indomethacin 50 mg cap	1	
indomethacin er 75 mg cap er	1	
indomethacin sodium 1 mg recon soln	1	
KETOPROFEN 25 MG CAP *ketoprofen*	3	
KETOPROFEN 50 MG CAP *ketoprofen*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KETOPROFEN 75 MG CAP *ketoprofen*	3	
KETOPROFEN ER 200 MG CAP ER 24H *ketoprofen*	3	
ketorolac tromethamine 10 mg tab	1	QL 20 / 5 DAYS
ketorolac tromethamine 15 mg/ml solution	1	QL 20 / 23 DAYS
KETOROLAC TROMETHAMINE 15.75 MG/SPRAY SOLUTION *ketorolac tromethamine*	3	
ketorolac tromethamine 30 mg/ml solution	1	QL 20 / 30 DAYS
ketorolac tromethamine 60 mg/2ml solution	1	QL 20 / 30 DAYS
MECLOFENAMATE SODIUM 100 MG CAP *meclofenamate sodium*	3	
MECLOFENAMATE SODIUM 50 MG CAP *meclofenamate sodium*	3	
mefenamic acid 250 mg cap	1	QL 150 / 30 DAYS
meloxicam 15 mg tab	1	QL 30 / 30 DAYS
meloxicam 7.5 mg tab	1	QL 30 / 30 DAYS
nabumetone 500 mg tab	1	
nabumetone 750 mg tab	1	
NALFON 400 MG CAP *fenoprofen calcium*	3	
NAPRELAN 750 MG TAB ER 24H *naproxen sodium*	3	QL 30 / 30 DAYS
naproxen 125 mg/5ml suspension	1	
naproxen 250 mg tab	1	
naproxen 375 mg tab	1	
naproxen 500 mg tab	1	
naproxen dr 375 mg tab dr	1	
naproxen dr 500 mg tab dr	1	
naproxen sodium 275 mg tab	1	
naproxen sodium 550 mg tab	1	
NEOPROFEN 10 MG/ML SOLUTION *ibuprofen lysine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxaprozin 600 mg tab	1	
piroxicam 10 mg cap	1	AL1 Up to 75 yrs old
piroxicam 20 mg cap	1	AL1 Up to 75 yrs old
profeno 600 mg tab	1	
READYSHARP KETOROLAC 15 MG/ML KIT *ketorolac tromethamine*	3	
relafen 500 mg tab	1	
relafen 750 mg tab	1	
SPRIX 15.75 MG/SPRAY SOLUTION *ketorolac tromethamine*	3	QL 5 / 5 DAYS
sulindac 150 mg tab	1	
sulindac 200 mg tab	1	
TOLMETIN SODIUM 200 MG TAB *tolmetin sodium*	3	
TOLMETIN SODIUM 400 MG CAP *tolmetin sodium*	3	
TOLMETIN SODIUM 600 MG TAB *tolmetin sodium*	3	
ZIPSOR 25 MG CAP *diclofenac potassium*	3	QL 120 / 30 DAYS
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 10 & 20 & 30 MG TAB THPK *apremilast*	2	QL 60 / 30 DAYS PA S Specialty Drug
OTEZLA 30 MG TAB *apremilast*	2	QL 60 / 30 DAYS PA S Specialty Drug
PYRIMIDINE SYNTHESIS INHIBITORS		
leflunomide 10 mg tab	1	
leflunomide 20 mg tab	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 250 MG RECON SOLN *abatacept*	3	QL 5 / 30 DAYS S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25 MG RECON SOLN *etanercept*	2	QL 8 / 28 DAYS PA S Specialty Drug
ENBREL 25 MG/0.5ML SOLN PRSYR *etanercept*	2	QL 2.04 / 28 DAYS PA S Specialty Drug
ENBREL 25 MG/0.5ML SOLUTION *etanercept*	2	PA S Specialty Drug
ENBREL 50 MG/ML SOLN PRSYR *etanercept*	2	QL 4 / 28 DAYS PA S Specialty Drug
ENBREL MINI 50 MG/ML SOLN CART *etanercept*	2	QL 4 / 28 DAYS PA S Specialty Drug
ENBREL SURECLICK 50 MG/ML SOLN A-INJ *etanercept*	2	QL 4 / 28 DAYS PA S Specialty Drug
ANALGESICS - NONNARCOTIC		
ANALGESICS OTHER		
clonidine hcl (analgesia) 100 mcg/ml solution	1	
clonidine hcl (analgesia) 500 mcg/ml solution	1	
DURACLON 100 MCG/ML SOLUTION *clonidine hcl (analgesia)*	3	
OFIRMEV 10 MG/ML SOLUTION *acetaminophen*	3	QL 9000 / 30 DAYS
ANALGESICS-SEDATIVES		
ALLZITAL 25-325 MG TAB *butalbital-acetaminophen*	3	QL 360 / 30 DAYS
bupap 50-300 mg tab	1	QL 180 / 30 DAYS
BUTALBITAL-ACETAMINOPHEN 25-325 MG TAB *butalbital-acetaminophen*	3	QL 360 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
butalbital-acetaminophen 50-300 mg cap	1	QL 180 / 30 DAYS
butalbital-acetaminophen 50-300 mg tab	1	QL 180 / 30 DAYS
butalbital-acetaminophen 50-325 mg tab	1	QL 180 / 30 DAYS
butalbital-apap 50-325 mg tab	1	QL 180 / 30 DAYS
butalbital-apap-caffeine 50-300-40 mg cap	1	QL 180 / 30 DAYS
butalbital-apap-caffeine 50-325-40 mg cap	1	QL 180 / 30 DAYS
butalbital-apap-caffeine 50-325-40 mg tab	1	QL 180 / 30 DAYS
butalbital-aspirin-caffeine 50-325-40 mg cap	1	QL 180 / 30 DAYS
BUTALBITAL-ASPIRIN-CAFFEINE 50-325-40 MG TAB *butalbital-aspirin-caffeine*	3	QL 180 / 30 DAYS
esgic 50-325-40 mg cap	1	QL 180 / 30 DAYS
phrenilin forte 50-300-40 mg cap	1	QL 180 / 30 DAYS
TENCON 50-325 MG TAB *butalbital-acetaminophen*	3	QL 180 / 30 DAYS
vanatol lq 50-325-40 mg/15ml solution	1	QL 2700 / 30 DAYS
vanatol s 50-325-40 mg/15ml solution	1	QL 2700 / 30 DAYS
vtol lq 50-325-40 mg/15ml solution	1	QL 2700 / 30 DAYS
zebutal 50-325-40 mg cap	1	QL 180 / 30 DAYS
SALICYLATES		
adult aspirin ec low strength 81 mg tab dr	1	ACA Affordable Care Act
adult aspirin regimen 81 mg tab dr	1	ACA Affordable Care Act
aspir-low 81 mg tab dr	1	ACA Affordable Care Act
aspirin 81 81 mg chew tab	1	ACA Affordable Care Act
aspirin 81 81 mg tab dr	1	ACA Affordable Care Act
aspirin 81 mg chew tab	1	ACA Affordable Care Act
aspirin 81 mg tab dr	1	ACA Affordable Care Act
aspirin adult low dose 81 mg tab dr	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act
aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act
aspirin childrens 81 mg chew tab	1	ACA Affordable Care Act
aspirin ec 81 mg tab dr	1	ACA Affordable Care Act
aspirin ec adult low strength 81 mg tab dr	1	ACA Affordable Care Act
aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act
aspirin ec low strength 81 mg tab dr	1	ACA Affordable Care Act
aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act
aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
aspirin low dose adult 81 mg chew tab	1	ACA Affordable Care Act
aspirin low strength 81 mg chew tab	1	ACA Affordable Care Act
aspirin regimen low dose adult 81 mg tab dr	1	ACA Affordable Care Act
bayer aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act
bayer low dose 81 mg chew tab	1	ACA Affordable Care Act
bayer low dose 81 mg tab dr	1	ACA Affordable Care Act
childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
childrens aspirin low strength 81 mg chew tab	1	ACA Affordable Care Act
cvs aspirin adult low dose 81 mg chew tab	1	ACA Affordable Care Act
cvs aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act
cvs aspirin ec 81 mg tab dr	1	ACA Affordable Care Act
cvs aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
cvs aspirin low strength 81 mg tab dr	1	ACA Affordable Care Act
diflunisal 500 mg tab	1	
ec-81 aspirin 81 mg tab dr	1	ACA Affordable Care Act
ecotrin low strength 81 mg tab dr	1	ACA Affordable Care Act
eq adult aspirin low strength 81 mg tab dr	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq aspirin adult low dose 81 mg tab dr	1	ACA Affordable Care Act
eq aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act
eq aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
eq childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
eql aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act
eql aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
gnp adult aspirin low strength 81 mg chew tab	1	ACA Affordable Care Act
gnp aspirin 81 mg tab dr	1	ACA Affordable Care Act
gnp aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
goodsense aspirin 81 mg chew tab	1	ACA Affordable Care Act
goodsense aspirin adult low st 81 mg chew tab	1	ACA Affordable Care Act
goodsense aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
h-e-b aspirin 81 mg tab dr	1	ACA Affordable Care Act
hm aspirin 81 mg chew tab	1	ACA Affordable Care Act
hm aspirin ec low dose 81 mg tab dr	1	ACA Affordable Care Act
kls aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
kp aspirin 81 mg tab dr	1	ACA Affordable Care Act
miniprin low dose 81 mg tab dr	1	ACA Affordable Care Act
px aspirin 81 mg chew tab	1	ACA Affordable Care Act
px enteric aspirin 81 mg tab dr	1	ACA Affordable Care Act
qc aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act
qc aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
qc childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
ra aspirin adult low dose 81 mg chew tab	1	ACA Affordable Care Act
ra aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ra aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act
ra aspirin childrens 81 mg chew tab	1	ACA Affordable Care Act
ra aspirin ec 81 mg tab dr	1	ACA Affordable Care Act
ra aspirin ec adult low st 81 mg tab dr	1	ACA Affordable Care Act
ra childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
sb aspirin 81 mg tab dr	1	ACA Affordable Care Act
sb aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act
sb childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
sb low dose asa ec 81 mg tab dr	1	ACA Affordable Care Act
sm aspirin adult low strength 81 mg chew tab	1	ACA Affordable Care Act
sm aspirin adult low strength 81 mg tab dr	1	ACA Affordable Care Act
sm aspirin ec low strength 81 mg tab dr	1	ACA Affordable Care Act
sm aspirin low dose 81 mg chew tab	1	ACA Affordable Care Act
sm childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
st joseph aspirin 81 mg tab dr	1	ACA Affordable Care Act
st joseph low dose 81 mg chew tab	1	ACA Affordable Care Act
st joseph low dose 81 mg tab dr	1	ACA Affordable Care Act
tgt aspirin 81 mg chew tab	1	ACA Affordable Care Act
tgt aspirin 81 mg tab dr	1	ACA Affordable Care Act
tgt aspirin low dose 81 mg tab dr	1	ACA Affordable Care Act
tgt childrens aspirin 81 mg chew tab	1	ACA Affordable Care Act
SELECTIVE N-TYPE NEURONAL CALCIUM CHANNEL BLOCKERS		
PRIALT 100 MCG/ML SOLUTION *ziconotide acetate*	3	S Specialty Drug
PRIALT 500 MCG/20ML SOLUTION *ziconotide acetate*	3	S Specialty Drug
PRIALT 500 MCG/5ML SOLUTION *ziconotide acetate*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANALGESICS - OPIOID		
CODEINE COMBINATIONS		
acetaminophen-codeine #2 300-15 mg tab	1	QL 360 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine #3 300-30 mg tab	1	QL 360 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine #4 300-60 mg tab	1	QL 180 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine 120-12 mg/5ml solution	1	QL 2700 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine 300-15 mg tab	1	QL 360 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine 300-30 mg tab	1	QL 360 / 30 DAYS AL1 At least 12 yrs old
acetaminophen-codeine 300-60 mg tab	1	QL 180 / 30 DAYS AL1 At least 12 yrs old
ascomp-codeine 50-325-40-30 mg cap	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
butalbital-apap-caff-cod 50-300-40-30 mg cap	1	QL 180 / 30 DAYS
butalbital-apap-caff-cod 50-325-40-30 mg cap	1	QL 180 / 30 DAYS
butalbital-asa-caff-codeine 50-325-40-30 mg cap	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
DIHYDROCODEINE COMBINATIONS		
APAP-CAFF-DIHYDROCODEINE 320.5-30-16 MG CAP *acetaminophen-caff-dihydrocod*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
apap-caff-dihydrocodeine 325-30-16 mg tab	1	QL 300 / 30 DAYS AL1 At least 18 yrs old
APAP-CAFF-DIHYDROCODEINE 325-30-16 MG TAB *acetaminophen-caff-dihydrocod*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dvorah 325-30-16 mg tab	1	QL 300 / 30 DAYS AL1 At least 18 yrs old
panlor 325-30-16 mg tab	1	QL 300 / 30 DAYS AL1 At least 18 yrs old
TREZIX 320.5-30-16 MG CAP *acetaminophen-caff-dihydrocod*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
HYDROCODONE COMBINATIONS		
hydrocodone-acetaminophen 10-300 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 10-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
HYDROCODONE-ACETAMINOPHEN 10-325 MG/15ML SOLUTION *hydrocodone-acetaminophen*	3	QL 2700 / 30 DAYS AL1 At least 2 yrs old
hydrocodone-acetaminophen 2.5-108 mg/5ml solution	1	QL 3600 / 30 DAYS AL1 At least 2 yrs old
hydrocodone-acetaminophen 2.5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 5-217 mg/10ml solution	1	QL 3600 / 30 DAYS AL1 At least 2 yrs old
hydrocodone-acetaminophen 5-300 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 7.5-300 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 7.5-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
hydrocodone-acetaminophen 7.5-325 mg/15ml solution	1	QL 3600 / 30 DAYS AL1 At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocodone-ibuprofen 10-200 mg tab	1	QL 150 / 30 DAYS AL1 At least 16 yrs old
hydrocodone-ibuprofen 5-200 mg tab	1	QL 150 / 30 DAYS AL1 At least 16 yrs old
hydrocodone-ibuprofen 7.5-200 mg tab	1	QL 150 / 30 DAYS AL1 At least 16 yrs old
ibudone 5-200 mg tab	1	QL 150 / 30 DAYS AL1 At least 16 yrs old
lorcet 5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
lorcet hd 10-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
lorcet plus 7.5-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
LORTAB 10-300 MG/15ML ELIXIR *hydrocodone-acetaminophen*	3	QL 2025 / 30 DAYS AL1 At least 2 yrs old
OPIOID AGONISTS		
ABSTRAL 100 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA
ABSTRAL 200 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA
ABSTRAL 300 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA
ABSTRAL 400 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA
ABSTRAL 600 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA
ABSTRAL 800 MCG SL TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALFENTANIL HCL 1000 MCG/2ML SOLUTION *alfentanil hcl*	1	
alfentanil hcl 1000 mcg/2ml solution	1	
ALFENTANIL HCL 2500 MCG/5ML SOLUTION *alfentanil hcl*	1	
CODEINE SULFATE 15 MG TAB *codeine sulfate*	3	QL 180 / 30 DAYS AL1 At least 18 yrs old
codeine sulfate 30 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
CODEINE SULFATE 60 MG TAB *codeine sulfate*	3	QL 180 / 30 DAYS AL1 At least 18 yrs old
codeine sulfate 60 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
CONZIP 100 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
CONZIP 200 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
CONZIP 300 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
DEMEROL 100 MG/2ML SOLUTION *meperidine hcl*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
DEMEROL 100 MG/ML SOLUTION *meperidine hcl*	3	QL 150 / 30 DAYS AL1 At least 18 yrs old
DEMEROL 25 MG/0.5ML SOLUTION *meperidine hcl*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
DEMEROL 25 MG/ML SOLUTION *meperidine hcl*	3	QL 600 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEMEROL 50 MG/ML SOLUTION *meperidine hcl*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
DEMEROL 75 MG/1.5ML SOLUTION *meperidine hcl*	3	QL 300 / 30 DAYS AL1 At least 18 yrs old
DEMEROL 75 MG/ML SOLUTION *meperidine hcl*	3	QL 210 / 30 DAYS AL1 At least 18 yrs old
DILAUDID 0.2 MG/ML SOLUTION *hydromorphone hcl*	3	AL1 At least 18 yrs old
DILAUDID 1 MG/ML SOLUTION *hydromorphone hcl*	3	AL1 At least 18 yrs old
DILAUDID 2 MG/ML SOLUTION *hydromorphone hcl*	3	AL1 At least 18 yrs old
DSUVIA 30 MCG SL TAB *sufentanil citrate*	3	
duramorph 0.5 mg/ml solution	1	QL 300 / 30 DAYS
duramorph 1 mg/ml solution	1	QL 150 / 30 DAYS
EMBEDA 100-4 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
EMBEDA 20-0.8 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
EMBEDA 30-1.2 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
EMBEDA 50-2 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
EMBEDA 60-2.4 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
EMBEDA 80-3.2 MG CAP ER *morphine-naltrexone*	3	QL 60 / 30 DAYS PA
fentanyl 100 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 12 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fentanyl 25 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 37.5 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 50 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 62.5 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 75 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
fentanyl 87.5 mcg/hr patch 72hr	1	QL 15 / 30 DAYS PA
FENTANYL CITRATE (PF) 100 MCG/2ML SOLN CART *fentanyl citrate*	1	QL 240 / 30 DAYS
fentanyl citrate (pf) 100 mcg/2ml solution	1	
FENTANYL CITRATE (PF) 100 MCG/2ML SOLUTION *fentanyl citrate*	1	
fentanyl citrate (pf) 1000 mcg/20ml solution	1	
fentanyl citrate (pf) 250 mcg/5ml solution	1	
FENTANYL CITRATE (PF) 250 MCG/5ML SOLUTION *fentanyl citrate*	1	
fentanyl citrate (pf) 2500 mcg/50ml solution	1	
FENTANYL CITRATE (PF) 50 MCG/ML SOLUTION *fentanyl citrate*	1	
FENTANYL CITRATE (PF) 500 MCG/10ML SOLUTION *fentanyl citrate*	1	
FENTANYL CITRATE 100 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
fentanyl citrate 1200 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fentanyl citrate 1600 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
fentanyl citrate 200 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTANYL CITRATE 200 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
fentanyl citrate 400 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTANYL CITRATE 400 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
fentanyl citrate 600 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTANYL CITRATE 600 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
fentanyl citrate 800 mcg loz handle	1	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTANYL CITRATE 800 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTORA 100 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTORA 200 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTORA 400 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTORA 600 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
FENTORA 800 MCG TAB *fentanyl citrate*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old
hydrocodone bitartrate er 10 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydrocodone bitartrate er 15 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydrocodone bitartrate er 20 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydrocodone bitartrate er 30 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydrocodone bitartrate er 40 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydrocodone bitartrate er 50 mg cap er 12h	1	QL 60 / 30 DAYS PA
hydromorphone hcl 1 mg/ml liquid	1	QL 1440 / 30 DAYS AL1 At least 18 yrs old
hydromorphone hcl 1 mg/ml solution	1	QL 390 / 30 DAYS AL1 At least 18 yrs old
hydromorphone hcl 2 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydromorphone hcl 2 mg/ml solution	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
hydromorphone hcl 4 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
HYDROMORPHONE HCL 4 MG/ML SOLUTION *hydromorphone hcl*	1	QL 90 / 30 DAYS AL1 At least 18 yrs old
hydromorphone hcl 8 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
hydromorphone hcl er 12 mg tab er 24h	1	QL 30 / 30 DAYS PA
hydromorphone hcl er 16 mg tab er 24h	1	QL 30 / 30 DAYS PA
hydromorphone hcl er 32 mg tab er 24h	1	QL 30 / 30 DAYS PA
hydromorphone hcl er 8 mg tab er 24h	1	QL 30 / 30 DAYS PA
HYDROMORPHONE HCL PF 1 MG/ML SOLUTION *hydromorphone hcl*	1	
hydromorphone hcl pf 10 mg/ml solution	1	
HYDROMORPHONE HCL PF 10 MG/ML SOLUTION *hydromorphone hcl*	1	
HYDROMORPHONE HCL PF 2 MG/ML SOLUTION *hydromorphone hcl*	1	QL 180 / 30 DAYS
HYDROMORPHONE HCL PF 4 MG/ML SOLUTION *hydromorphone hcl*	1	
hydromorphone hcl pf 50 mg/5ml solution	1	
hydromorphone hcl pf 500 mg/50ml solution	1	
HYSINGLA ER 100 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
HYSINGLA ER 120 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYSINGLA ER 20 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
HYSINGLA ER 30 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
HYSINGLA ER 40 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
HYSINGLA ER 60 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
HYSINGLA ER 80 MG TB24 DETER *hydrocodone bitartrate*	3	QL 30 / 30 DAYS PA
INFUMORPH 200 200 MG/20ML (10 MG/ML) SOLUTION *morphine sulfate for continuous microinfusion*	3	
INFUMORPH 500 500 MG/20ML (25 MG/ML) SOLUTION *morphine sulfate for continuous microinfusion*	3	
KADIAN 200 MG CAP ER 24H *morphine sulfate*	3	QL 60 / 30 DAYS PA
LAZANDA 100 MCG/ACT SOLUTION *fentanyl citrate*	3	QL 1 / 30 DAYS PA
LAZANDA 300 MCG/ACT SOLUTION *fentanyl citrate*	3	QL 30 / 30 DAYS PA
LAZANDA 400 MCG/ACT SOLUTION *fentanyl citrate*	3	QL 1 / 30 DAYS PA
levorphanol tartrate 2 mg tab	1	QL 120 / 30 DAYS
LEVORPHANOL TARTRATE 3 MG TAB *levorphanol tartrate*	3	QL 120 / 30 DAYS
MEPERIDINE HCL 10 MG/ML SOLUTION *meperidine hcl*	1	QL 1500 / 30 DAYS AL1 At least 18 yrs old
meperidine hcl 100 mg/ml solution	1	QL 150 / 30 DAYS AL1 At least 18 yrs old
meperidine hcl 25 mg/ml solution	1	QL 600 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
meperidine hcl 50 mg/ml solution	1	QL 300 / 30 DAYS AL1 At least 18 yrs old
methadone hcl 10 mg tab	1	QL 90 / 30 DAYS
methadone hcl 10 mg/5ml solution	1	QL 450 / 30 DAYS
methadone hcl 10 mg/ml conc	1	QL 90 / 30 DAYS
METHADONE HCL 10 MG/ML SOLUTION *methadone hcl*	1	QL 60 / 30 DAYS
methadone hcl 10 mg/ml solution	1	QL 60 / 30 DAYS
methadone hcl 40 mg tab sol	1	QL 90 / 30 DAYS
methadone hcl 5 mg tab	1	QL 90 / 30 DAYS
methadone hcl 5 mg/5ml solution	1	QL 900 / 30 DAYS
methadone hcl intensol 10 mg/ml conc	1	QL 90 / 30 DAYS
methadose 40 mg tab sol	1	QL 90 / 30 DAYS
mitigo 200 mg/20ml (10 mg/ml) solution	1	
mitigo 500 mg/20ml (25 mg/ml) solution	1	
morphine sulfate (concentrate) 100 mg/5ml solution	1	QL 270 / 30 DAYS
morphine sulfate (concentrate) 20 mg/ml solution	1	QL 270 / 30 DAYS
morphine sulfate (pf) 0.5 mg/ml solution	1	QL 3000 / 30 DAYS
morphine sulfate (pf) 1 mg/ml solution	1	QL 1500 / 30 DAYS
morphine sulfate (pf) 10 mg/ml solution	1	QL 150 / 30 DAYS
MORPHINE SULFATE (PF) 10 MG/ML SOLUTION *morphine sulfate*	1	QL 150 / 30 DAYS
MORPHINE SULFATE (PF) 2 MG/ML SOLUTION *morphine sulfate*	1	QL 750 / 30 DAYS
morphine sulfate (pf) 4 mg/ml solution	1	QL 390 / 30 DAYS
MORPHINE SULFATE (PF) 4 MG/ML SOLUTION *morphine sulfate*	1	QL 390 / 30 DAYS
MORPHINE SULFATE (PF) 5 MG/ML SOLUTION *morphine sulfate*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
morphine sulfate (pf) 8 mg/ml solution	1	QL 180 / 30 DAYS
MORPHINE SULFATE (PF) 8 MG/ML SOLUTION *morphine sulfate*	1	QL 180 / 30 DAYS
morphine sulfate 1 mg/ml solution	1	QL 1500 / 30 DAYS
MORPHINE SULFATE 10 MG/0.7ML DEVICE *morphine sulfate*	1	QL 90 / 30 DAYS
morphine sulfate 10 mg/5ml solution	1	QL 2700 / 30 DAYS
MORPHINE SULFATE 10 MG/ML SOLUTION *morphine sulfate*	1	QL 150 / 30 DAYS
MORPHINE SULFATE 15 MG TAB *morphine sulfate*	2	QL 240 / 30 DAYS AL1 At least 18 yrs old
morphine sulfate 15 mg tab	1	QL 240 / 30 DAYS AL1 At least 18 yrs old
MORPHINE SULFATE 150 MG/30ML SOLUTION *morphine sulfate*	1	QL 300 / 30 DAYS
MORPHINE SULFATE 2 MG/ML SOLUTION *morphine sulfate*	1	QL 750 / 30 DAYS
morphine sulfate 20 mg/5ml solution	1	QL 1350 / 30 DAYS
MORPHINE SULFATE 30 MG TAB *morphine sulfate*	2	QL 180 / 30 DAYS AL1 At least 18 yrs old
morphine sulfate 30 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
MORPHINE SULFATE 4 MG/ML SOLUTION *morphine sulfate*	1	QL 390 / 30 DAYS
MORPHINE SULFATE 5 MG/ML SOLUTION *morphine sulfate*	1	QL 300 / 30 DAYS
MORPHINE SULFATE 8 MG/ML SOLUTION *morphine sulfate*	1	QL 180 / 30 DAYS
morphine sulfate er 10 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 100 mg cap er 24h	1	QL 60 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
morphine sulfate er 100 mg tab er	1	QL 90 / 30 DAYS PA
morphine sulfate er 15 mg tab er	1	QL 90 / 30 DAYS PA
morphine sulfate er 20 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 200 mg tab er	1	QL 90 / 30 DAYS PA
morphine sulfate er 30 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 30 mg tab er	1	QL 90 / 30 DAYS PA
morphine sulfate er 40 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 50 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 60 mg cap er 24h	1	QL 60 / 30 DAYS PA
morphine sulfate er 60 mg tab er	1	QL 90 / 30 DAYS PA
morphine sulfate er 80 mg cap er 24h	1	QL 60 / 30 DAYS PA
MORPHINE SULFATE ER BEADS 120 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA
MORPHINE SULFATE ER BEADS 30 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA
MORPHINE SULFATE ER BEADS 45 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA
MORPHINE SULFATE ER BEADS 60 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MORPHINE SULFATE ER BEADS 75 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA
MORPHINE SULFATE ER BEADS 90 MG CAP ER 24H *morphine sulfate beads*	3	QL 30 / 30 DAYS PA
NUCYNTA 100 MG TAB *tapentadol hcl*	3	QL 180 / 30 DAYS
NUCYNTA 50 MG TAB *tapentadol hcl*	3	QL 180 / 30 DAYS
NUCYNTA 75 MG TAB *tapentadol hcl*	3	QL 180 / 30 DAYS
NUCYNTA ER 100 MG TAB ER 12H *tapentadol hcl*	2	QL 60 / 30 DAYS PA
NUCYNTA ER 150 MG TAB ER 12H *tapentadol hcl*	2	QL 60 / 30 DAYS PA
NUCYNTA ER 200 MG TAB ER 12H *tapentadol hcl*	2	QL 60 / 30 DAYS PA
NUCYNTA ER 250 MG TAB ER 12H *tapentadol hcl*	2	QL 60 / 30 DAYS PA
NUCYNTA ER 50 MG TAB ER 12H *tapentadol hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXAYDO 5 MG TAB *oxycodone hcl*	3	QL 180 / 30 DAYS AL1 At least 18 yrs old
OXAYDO 7.5 MG TAB *oxycodone hcl*	3	QL 180 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 10 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 100 mg/5ml conc	1	QL 270 / 30 DAYS
oxycodone hcl 15 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxycodone hcl 20 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 30 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 5 mg cap	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 5 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
oxycodone hcl 5 mg/5ml solution	1	QL 5400 / 30 DAYS
OXYCODONE HCL ER 10 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCODONE HCL ER 15 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCODONE HCL ER 20 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCODONE HCL ER 30 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCODONE HCL ER 40 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCODONE HCL ER 60 MG TB12 DETER *oxycodone hcl*	3	QL 120 / 30 DAYS PA
OXYCODONE HCL ER 80 MG TB12 DETER *oxycodone hcl*	3	QL 120 / 30 DAYS PA
OXYCONTIN 10 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCONTIN 15 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCONTIN 20 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXYCONTIN 30 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCONTIN 40 MG TB12 DETER *oxycodone hcl*	3	QL 60 / 30 DAYS PA
OXYCONTIN 60 MG TB12 DETER *oxycodone hcl*	3	QL 120 / 30 DAYS PA
OXYCONTIN 80 MG TB12 DETER *oxycodone hcl*	3	QL 120 / 30 DAYS PA
oxymorphone hcl 10 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
oxymorphone hcl 5 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
OXYMORPHONE HCL ER 10 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXYMORPHONE HCL ER 15 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXYMORPHONE HCL ER 20 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXYMORPHONE HCL ER 30 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXYMORPHONE HCL ER 40 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
OXYMORPHONE HCL ER 5 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXYMORPHONE HCL ER 7.5 MG TAB ER 12H *oxymorphone hcl*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
remifentanil hcl 1 mg recon soln	1	
remifentanil hcl 2 mg recon soln	1	
remifentanil hcl 5 mg recon soln	1	
SUBSYS 100 MCG LIQUID *fentanyl*	3	QL 120 / 30 DAYS PA
SUBSYS 1200 (600 X 2) MCG LIQUID *fentanyl*	3	QL 240 / 30 DAYS PA
SUBSYS 1600 (800 X 2) MCG LIQUID *fentanyl*	3	QL 240 / 30 DAYS PA
SUBSYS 200 MCG LIQUID *fentanyl*	3	QL 120 / 30 DAYS PA
SUBSYS 400 MCG LIQUID *fentanyl*	3	QL 120 / 30 DAYS PA
SUBSYS 600 MCG LIQUID *fentanyl*	3	QL 120 / 30 DAYS PA
SUBSYS 800 MCG LIQUID *fentanyl*	3	QL 120 / 30 DAYS PA
SUFENTANIL CITRATE 100 MCG/2ML SOLUTION *sufentanil citrate*	1	
sufentanil citrate 100 mcg/2ml solution	1	
SUFENTANIL CITRATE 250 MCG/5ML SOLUTION *sufentanil citrate*	1	
sufentanil citrate 250 mcg/5ml solution	1	
SUFENTANIL CITRATE 50 MCG/ML SOLUTION *sufentanil citrate*	1	
sufentanil citrate 50 mcg/ml solution	1	
TRAMADOL HCL 100 MG TAB *tramadol hcl*	3	QL 120 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tramadol hcl 50 mg tab	1	QL 240 / 30 DAYS AL1 At least 18 yrs old
tramadol hcl er (biphasic) 100 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
tramadol hcl er (biphasic) 200 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
tramadol hcl er (biphasic) 300 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
TRAMADOL HCL ER 100 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
tramadol hcl er 100 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
TRAMADOL HCL ER 150 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
TRAMADOL HCL ER 200 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
tramadol hcl er 200 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
TRAMADOL HCL ER 300 MG CAP ER 24H *tramadol hcl*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
tramadol hcl er 300 mg tab er 24h	1	QL 30 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTIVA 1 MG RECON SOLN *remifentanil hcl*	3	
ULTIVA 2 MG RECON SOLN *remifentanil hcl*	3	
ULTIVA 5 MG RECON SOLN *remifentanil hcl*	3	
XTAMPZA ER 13.5 MG CP12 DETER *oxycodone*	2	QL 60 / 30 DAYS PA
XTAMPZA ER 18 MG CP12 DETER *oxycodone*	2	QL 60 / 30 DAYS PA
XTAMPZA ER 27 MG CP12 DETER *oxycodone*	2	QL 60 / 30 DAYS PA
XTAMPZA ER 36 MG CP12 DETER *oxycodone*	2	QL 60 / 30 DAYS PA
XTAMPZA ER 9 MG CP12 DETER *oxycodone*	2	QL 60 / 30 DAYS PA
OPIOID COMBINATIONS		
APADAZ 4.08-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
APADAZ 6.12-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
APADAZ 8.16-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
BENZHYDROCODONE-ACETAMINOPHEN 4.08-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
BENZHYDROCODONE-ACETAMINOPHEN 6.12-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
BENZHYDROCODONE-ACETAMINOPHEN 8.16-325 MG TAB *benzhydrocodone hcl-acetaminophen*	3	QL 360 / 30 DAYS
endocet 10-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
endocet 2.5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
endocet 5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
endocet 7.5-325 mg tab	1	QL 240 / 30 DAYS AL1 At least 18 yrs old
NALOCET 2.5-300 MG TAB *oxycodone w/ acetaminophen*	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
OXYCODONE-ACETAMINOPHEN 10-300 MG TAB *oxycodone w/ acetaminophen*	1	
oxycodone-acetaminophen 10-325 mg tab	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
OXYCODONE-ACETAMINOPHEN 2.5-300 MG TAB *oxycodone w/ acetaminophen*	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
oxycodone-acetaminophen 2.5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
OXYCODONE-ACETAMINOPHEN 5-300 MG TAB *oxycodone w/ acetaminophen*	3	
oxycodone-acetaminophen 5-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
oxycodone-acetaminophen 7.5-325 mg tab	1	QL 240 / 30 DAYS AL1 At least 18 yrs old
OXYCODONE-ASPIRIN 4.8355-325 MG TAB *oxycodone-aspirin*	3	QL 360 / 30 DAYS AL1 At least 18 yrs old
oxycodone-aspirin 4.8355-325 mg tab	1	QL 360 / 30 DAYS AL1 At least 18 yrs old
OXYCODONE-IBUPROFEN 5-400 MG TAB *oxycodone-ibuprofen*	3	QL 120 / 30 DAYS AL1 At least 18 yrs old
PRIMLEV 10-300 MG TAB *oxycodone w/ acetaminophen*	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
PRIMLEV 5-300 MG TAB *oxycodone w/ acetaminophen*	3	QL 360 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRIMLEV 7.5-300 MG TAB *oxycodone w/ acetaminophen*	3	QL 240 / 30 DAYS AL1 At least 18 yrs old
PROLATE 10-300 MG TAB *oxycodone w/ acetaminophen*	1	QL 180 / 30 DAYS AL1 At least 18 yrs old
PROLATE 5-300 MG TAB *oxycodone w/ acetaminophen*	3	QL 360 / 30 DAYS AL1 At least 18 yrs old
PROLATE 7.5-300 MG TAB *oxycodone w/ acetaminophen*	3	QL 240 / 30 DAYS AL1 At least 18 yrs old
OPIOID PARTIAL AGONISTS		
BELBUCA 150 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 300 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 450 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 600 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 75 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 750 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
BELBUCA 900 MCG FILM *buprenorphine hcl*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BUNAVAIL 2.1-0.3 MG FILM *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 90 / 30 DAYS
BUNAVAIL 4.2-0.7 MG FILM *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 60 / 30 DAYS
BUNAVAIL 6.3-1 MG FILM *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 60 / 30 DAYS
BUPRENEX 0.3 MG/ML SOLUTION *buprenorphine hcl*	3	QL 510 / 30 DAYS
buprenorphine hcl 0.3 mg/ml solution	1	QL 510 / 30 DAYS
buprenorphine hcl 2 mg sl tab	1	QL 15 / 90 DAYS
buprenorphine hcl 8 mg sl tab	1	QL 15 / 90 DAYS
buprenorphine hcl-naloxone hcl 12-3 mg film	1	QL 60 / 30 DAYS
buprenorphine hcl-naloxone hcl 2-0.5 mg film	1	QL 120 / 30 DAYS
buprenorphine hcl-naloxone hcl 2-0.5 mg sl tab	1	QL 120 / 30 DAYS
buprenorphine hcl-naloxone hcl 4-1 mg film	1	QL 30 / 30 DAYS
buprenorphine hcl-naloxone hcl 8-2 mg film	1	QL 60 / 30 DAYS
buprenorphine hcl-naloxone hcl 8-2 mg sl tab	1	QL 90 / 30 DAYS
BUTORPHANOL TARTRATE 1 MG/ML SOLUTION *butorphanol tartrate*	1	QL 210 / 30 DAYS AL1 At least 18 yrs old
butorphanol tartrate 10 mg/ml solution	1	QL 88 / 30 DAYS AL1 At least 18 yrs old
BUTORPHANOL TARTRATE 2 MG/ML SOLUTION *butorphanol tartrate*	1	QL 120 / 30 DAYS AL1 At least 18 yrs old
butorphanol tartrate 2 mg/ml solution	1	QL 120 / 30 DAYS AL1 At least 18 yrs old
nalbuphine hcl 10 mg/ml solution	1	QL 150 / 30 DAYS
nalbuphine hcl 20 mg/ml solution	1	QL 90 / 30 DAYS
PROBUPHINE IMPLANT KIT 74.2 MG IMPLANT *buprenorphine hcl*	3	S Specialty Drug
SUBLOCADE 100 MG/0.5ML SOLN PRSYR *buprenorphine*	3	QL 0.6 / 28 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUBLOCADE 300 MG/1.5ML SOLN PRSYR *buprenorphine*	3	QL 1.8 / 28 DAYS
ZUBSOLV 0.7-0.18 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 30 / 30 DAYS
ZUBSOLV 1.4-0.36 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 90 / 30 DAYS
ZUBSOLV 11.4-2.9 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 30 / 30 DAYS
ZUBSOLV 2.9-0.71 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 30 / 30 DAYS
ZUBSOLV 5.7-1.4 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 30 / 30 DAYS
ZUBSOLV 8.6-2.1 MG SL TAB *buprenorphine hcl-naloxone hcl dihydrate*	3	QL 60 / 30 DAYS
TRAMADOL COMBINATIONS		
tramadol-acetaminophen 37.5-325 mg tab	1	QL 240 / 30 DAYS AL1 At least 18 yrs old
ANDROGENS-ANABOLIC		
ANABOLIC STEROIDS		
ANADROL-50 50 MG TAB *oxymetholone*	3	PA GL Male
oxandrolone 10 mg tab	1	PA
oxandrolone 2.5 mg tab	1	PA
ANDROGENS		
danazol 100 mg cap	1	PA
danazol 200 mg cap	1	PA
danazol 50 mg cap	1	PA
METHITEST 10 MG TAB *methyltestosterone*	3	QL 600 / 30 DAYS PA GL Male
METHYLTESTOSTERONE 10 MG CAP *methyltestosterone*	3	QL 600 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TESTOPEL 75 MG PELLET *testosterone*	3	QL 6 / 90 DAYS PA GL Male
testosterone 1.62 % gel	1	QL 150 / 30 DAYS PA GL Male
testosterone 12.5 mg/act (1%) gel	1	QL 300 / 30 DAYS PA
testosterone 20.25 mg/1.25gm (1.62%) gel	1	QL 37.5 / 30 DAYS PA GL Male
testosterone 20.25 mg/act (1.62%) gel	1	QL 150 / 30 DAYS PA GL Male
testosterone 25 mg/2.5gm (1%) gel	1	QL 150 / 30 DAYS PA GL Male
testosterone 30 mg/act solution	1	QL 180 / 30 DAYS PA
testosterone 40.5 mg/2.5gm (1.62%) gel	1	QL 150 / 30 DAYS PA GL Male
testosterone 50 mg/5gm (1%) gel	1	QL 300 / 30 DAYS PA
testosterone cypionate 100 mg/ml solution	1	QL 10 / 28 DAYS PA GL Male
testosterone cypionate 200 mg/ml solution	1	QL 10 / 28 DAYS PA GL Male

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION *testosterone enanthate*	3	QL 5 / 28 DAYS PA GL Male
testosterone enanthate 200 mg/ml solution	1	QL 5 / 28 DAYS PA GL Male
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
colocort 100 mg/60ml enema	1	
CORTIFOAM 10 % FOAM *hydrocortisone acetate (intrarectal)*	2	
hydrocortisone 100 mg/60ml enema	1	
UCERIS 2 MG/ACT FOAM *budesonide (intrarectal)*	3	
NITRATE VASODILATING AGENTS		
RECTIV 0.4 % OINTMENT *nitroglycerin (intra-anal)*	3	
RECTAL ANESTHETIC/STEROIDS		
ANALPRAM-HC 2.5-1 % LOTION *hydrocortisone acetate w/ pramoxine*	3	
hydrocortisone ace-pramoxine 1-1 % cream	1	
PROCTOFOAM HC 1-1 % FOAM *hydrocortisone acetate w/ pramoxine*	3	
RECTAL STEROIDS		
anucort-hc 25 mg suppos	1	
anusol-hc 25 mg suppos	1	
hemmorex-hc 25 mg suppos	1	
hydrocortisone (perianal) 1 % cream	1	
hydrocortisone (perianal) 2.5 % cream	1	
hydrocortisone acetate 25 mg suppos	1	
procto-med hc 2.5 % cream	1	
procto-pak 1 % cream	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
proctosol hc 2.5 % cream	1	
proctozone-hc 2.5 % cream	1	
ANTHELMINTICS		
albendazole 200 mg tab	1	QL 120 / 30 DAYS
BENZNIDAZOLE 100 MG TAB *benznidazole*	2	QL 1 / 60 DAYS AL1 2 to 12 yrs old
BENZNIDAZOLE 12.5 MG TAB *benznidazole*	2	QL 1 / 60 DAYS AL1 2 to 12 yrs old
EMVERM 100 MG CHEW TAB *mebendazole*	3	
ivermectin 3 mg tab	1	
praziquantel 600 mg tab	1	
ANTI-INFECTIVE AGENTS - MISC.		
AEMCOLO 194 MG TAB DR *rifamycin sodium*	3	
baciim 50000 unit recon soln	1	
bacitracin 50000 unit recon soln	1	
IMPAVIDO 50 MG CAP *miltefosine*	2	
metronidazole 250 mg tab	1	
metronidazole 375 mg cap	1	
metronidazole 500 mg tab	1	
metronidazole in nacl 5-0.79 mg/ml-% solution	1	
metronidazole in nacl 500-0.74 mg/100ml-% solution	1	
METRONIDAZOLE IN NACL 500-0.74 MG/100ML-% SOLUTION *metronidazole in nacl*	1	
metronidazole in nacl 500-0.79 mg/100ml-% solution	1	
PENTAM 300 MG RECON SOLN *pentamidine isethionate*	3	
pentamidine isethionate 300 mg recon soln	1	
pentamidine isethionate 300 mg recon soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRIMSOL 50 MG/5ML SOLUTION *trimethoprim hcl*	3	
tinidazole 250 mg tab	1	
tinidazole 500 mg tab	1	
trimethoprim 100 mg tab	1	
TRIMPEX 50 MG/5ML SOLUTION *trimethoprim hcl*	3	QL 1 / 10 DAYS
XIFAXAN 200 MG TAB *rifaximin*	3	
XIFAXAN 550 MG TAB *rifaximin*	2	
ANTI-INFECTIVE MISC. - COMBINATIONS		
sulfamethoxazole-trimethoprim 200-40 mg/5ml suspension	1	
sulfamethoxazole-trimethoprim 400-80 mg tab	1	
sulfamethoxazole-trimethoprim 400-80 mg/5ml solution	1	
sulfamethoxazole-trimethoprim 800-160 mg tab	1	
sulfatrim pediatric 200-40 mg/5ml suspension	1	
ANTIPROTOZOAL AGENTS		
ALINIA 100 MG/5ML RECON SUSP *nitazoxanide*	2	QL 300 / 90 DAYS
ALINIA 500 MG TAB *nitazoxanide*	2	QL 12 / 90 DAYS
atovaquone 750 mg/5ml suspension	1	
CARBAPENEM COMBINATIONS		
IMIPENEM-CILASTATIN 250 MG RECON SOLN *imipenem-cilastatin*	1	
imipenem-cilastatin 250 mg recon soln	1	
imipenem-cilastatin 500 mg recon soln	1	
PRIMAXIN IV 500-500 MG RECON SOLN *imipenem-cilastatin*	3	
RECARBRIO 1.25 GM RECON SOLN *imipenem-cilastatin-relebactam*	3	
VABOMERE 2 (1-1) GM RECON SOLN *meropenem-vaborbactam*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARBAPENEMS		
DORIPENEM 250 MG RECON SOLN *doripenem*	1	
DORIPENEM 500 MG RECON SOLN *doripenem*	1	
ertapenem sodium 1 gm recon soln	1	
INVANZ 1 GM RECON SOLN *ertapenem sodium*	3	
meropenem 1 gm recon soln	1	
meropenem 500 mg recon soln	1	
MEROPENEM-SODIUM CHLORIDE 1 GM/50ML RECON SOLN *meropenem & sodium chloride*	1	
MEROPENEM-SODIUM CHLORIDE 500 MG/50ML RECON SOLN *meropenem & sodium chloride*	1	
MERREM 1 GM RECON SOLN *meropenem*	3	
MERREM 500 MG RECON SOLN *meropenem*	3	
CHLORAMPHENICALS		
CHLORAMPHENICOL SOD SUCCINATE 1 GM RECON SOLN *chloramphenicol sodium succinate*	1	
CYCLIC LIPOPEPTIDES		
CUBICIN 500 MG RECON SOLN *daptomycin*	3	
CUBICIN RF 500 MG RECON SOLN *daptomycin*	3	
DAPTOMYCIN 350 MG RECON SOLN *daptomycin*	1	
daptomycin 350 mg recon soln	1	
daptomycin 500 mg recon soln	1	
GLYCOPEPTIDES		
DALVANCE 500 MG RECON SOLN *dalbavancin hcl*	3	
FIRVANQ 25 MG/ML RECON SOLN *vancomycin hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIRVANQ 50 MG/ML RECON SOLN *vancomycin hcl*	3	
ORBACTIV 400 MG RECON SOLN *oritavancin diphosphate*	3	
vancomycin hcl 1 gm recon soln	1	
VANCOMYCIN HCL 1.25 GM RECON SOLN *vancomycin hcl*	1	
VANCOMYCIN HCL 1.5 GM RECON SOLN *vancomycin hcl*	1	
vancomycin hcl 10 gm recon soln	1	
VANCOMYCIN HCL 100 GM RECON SOLN *vancomycin hcl*	1	
VANCOMYCIN HCL 1000 MG/200ML SOLUTION *vancomycin hcl*	1	
vancomycin hcl 125 mg cap	1	
VANCOMYCIN HCL 1500 MG/300ML SOLUTION *vancomycin hcl*	1	
VANCOMYCIN HCL 2000 MG/400ML SOLUTION *vancomycin hcl*	1	
vancomycin hcl 250 mg cap	1	
VANCOMYCIN HCL 250 MG RECON SOLN *vancomycin hcl*	1	
VANCOMYCIN HCL 250 MG/5ML RECON SOLN *vancomycin hcl*	3	
vancomycin hcl 5 gm recon soln	1	
vancomycin hcl 500 mg recon soln	1	
VANCOMYCIN HCL 500 MG/100ML SOLUTION *vancomycin hcl*	1	
VANCOMYCIN HCL 750 MG RECON SOLN *vancomycin hcl*	1	
vancomycin hcl 750 mg recon soln	1	
VANCOMYCIN HCL IN DEXTROSE 1-5 GM/200ML-% SOLUTION *vancomycin hcl-dextrose*	1	
VANCOMYCIN HCL IN DEXTROSE 500-5 MG/100ML-% SOLUTION *vancomycin hcl-dextrose*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANCOMYCIN HCL IN DEXTROSE 750-5 MG/150ML-% SOLUTION *vancomycin hcl-dextrose*	1	
VANCOMYCIN HCL IN NACL 1-0.9 GM/200ML-% SOLUTION *vancomycin hcl-sodium chloride*	1	
VANCOMYCIN HCL IN NACL 500-0.9 MG/100ML-% SOLUTION *vancomycin hcl-sodium chloride*	1	
VANCOMYCIN HCL IN NACL 750-0.9 MG/150ML-% SOLUTION *vancomycin hcl-sodium chloride*	1	
VIBATIV 750 MG RECON SOLN *telavancin hcl*	3	
LEPROSTATICS		
dapsone 100 mg tab	1	
dapsone 25 mg tab	1	
LINCOSAMIDES		
CLEOCIN IN D5W 300 MG/50ML SOLUTION *clindamycin phosphate in d5w*	3	
CLEOCIN IN D5W 600 MG/50ML SOLUTION *clindamycin phosphate in d5w*	3	
CLEOCIN PHOSPHATE 300 MG/2ML SOLUTION *clindamycin phosphate*	3	
CLEOCIN PHOSPHATE 600 MG/4ML SOLUTION *clindamycin phosphate*	3	
CLEOCIN PHOSPHATE 9 GM/60ML SOLUTION *clindamycin phosphate*	3	
CLEOCIN PHOSPHATE 900 MG/6ML SOLUTION *clindamycin phosphate*	3	
CLIN SINGLE USE 300 MG/2ML KIT *clindamycin phosphate*	3	
clindamycin hcl 150 mg cap	1	QL 120 / 30 DAYS
clindamycin hcl 300 mg cap	1	QL 120 / 30 DAYS
clindamycin hcl 75 mg cap	1	QL 120 / 30 DAYS
clindamycin palmitate hcl 75 mg/5ml recon soln	1	QL 2100 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clindamycin phosphate 300 mg/2ml solution	1	
clindamycin phosphate 300 mg/2ml solution	1	
clindamycin phosphate 600 mg/4ml solution	1	
clindamycin phosphate 600 mg/4ml solution	1	
clindamycin phosphate 9 gm/60ml solution	1	
clindamycin phosphate 900 mg/6ml solution	1	
clindamycin phosphate 900 mg/6ml solution	1	
clindamycin phosphate 9000 mg/60ml solution	1	
clindamycin phosphate in d5w 300 mg/50ml solution	1	
clindamycin phosphate in d5w 600 mg/50ml solution	1	
clindamycin phosphate in d5w 900 mg/50ml solution	1	
CLINDAMYCIN PHOSPHATE IN NACL 300-0.9 MG/50ML-% SOLUTION *clindamycin phosphate in nacl*	1	
CLINDAMYCIN PHOSPHATE IN NACL 600-0.9 MG/50ML-% SOLUTION *clindamycin phosphate in nacl*	1	
CLINDAMYCIN PHOSPHATE IN NACL 900-0.9 MG/50ML-% SOLUTION *clindamycin phosphate in nacl*	1	
LINCOCIN 300 MG/ML SOLUTION *lincomycin hcl*	3	
lincomycin hcl 300 mg/ml solution	1	QL 300 / 30 DAYS
MONOBACTAMS		
AZACTAM 1 GM RECON SOLN *aztreonam*	3	
AZACTAM 2 GM RECON SOLN *aztreonam*	3	
AZACTAM IN DEXTROSE 1 GM/50ML SOLUTION *aztreonam-dextrose*	3	
AZACTAM IN DEXTROSE 2 GM/50ML SOLUTION *aztreonam-dextrose*	3	
aztreonam 1 gm recon soln	1	
aztreonam 2 gm recon soln	1	
CAYSTON 75 MG RECON SOLN *aztreonam lysine*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXAZOLIDINONES		
linezolid 100 mg/5ml recon susp	1	QL 900 / Rx
linezolid 600 mg tab	1	QL 60 / 30 DAYS
linezolid 600 mg/300ml solution	1	
LINEZOLID IN SODIUM CHLORIDE 600-0.9 MG/300ML-% SOLUTION *linezolid in sodium chloride*	1	
SIVEXTRO 200 MG RECON SOLN *tedizolid phosphate*	3	QL 6 / 30 DAYS
SIVEXTRO 200 MG TAB *tedizolid phosphate*	3	QL 6 / 30 DAYS
ZYVOX 200 MG/100ML SOLUTION *linezolid*	3	
ZYVOX 600 MG/300ML SOLUTION *linezolid*	3	
PLEUROMUTILINS		
XENLETA 150 MG/15ML SOLUTION *lefamulin acetate*	3	S Specialty Drug
XENLETA 600 MG TAB *lefamulin acetate*	3	S Specialty Drug
POLYMYXINS		
colistimethate sodium (cba) 150 mg recon soln	1	
COLY-MYCIN M 150 MG RECON SOLN *colistimethate sodium*	3	
polymyxin b sulfate 500000 unit recon soln	1	
STREPTOGRAMIN COMBINATIONS		
SYNERCID 150-350 MG RECON SOLN *quinupristin-dalfopristin*	3	
URINARY ANTI-INFECTIVES		
methenamine hippurate 1 gm tab	1	
MONUROL 3 GM PACKET *fosfomycin tromethamine*	3	
nitrofurantoin 25 mg/5ml suspension	1	
nitrofurantoin macrocrystal 100 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nitrofurantoin macrocrystal 25 mg cap	1	
nitrofurantoin macrocrystal 50 mg cap	1	
nitrofurantoin monohyd macro 100 mg cap	1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
ranolazine er 1000 mg tab er 12h	1	QL 60 / 30 DAYS
ranolazine er 500 mg tab er 12h	1	QL 60 / 30 DAYS
NITRATES		
DILATRATE-SR 40 MG CAP ER *isosorbide dinitrate*	3	
GONITRO 400 MCG PACKET *nitroglycerin*	3	AL1 At least 18 yrs old
isosorbide dinitrate 10 mg tab	1	
isosorbide dinitrate 20 mg tab	1	
isosorbide dinitrate 30 mg tab	1	
isosorbide dinitrate 40 mg tab	1	
isosorbide dinitrate 5 mg tab	1	
ISOSORBIDE DINITRATE ER 40 MG TAB ER *isosorbide dinitrate*	3	
isosorbide mononitrate 10 mg tab	1	
isosorbide mononitrate 20 mg tab	1	
isosorbide mononitrate er 120 mg tab er 24h	1	
isosorbide mononitrate er 30 mg tab er 24h	1	
isosorbide mononitrate er 60 mg tab er 24h	1	
minitran 0.1 mg/hr patch 24hr	1	
minitran 0.2 mg/hr patch 24hr	1	
minitran 0.4 mg/hr patch 24hr	1	
minitran 0.6 mg/hr patch 24hr	1	
NITRO-BID 2 % OINTMENT *nitroglycerin*	3	
NITRO-DUR 0.3 MG/HR PATCH 24HR *nitroglycerin*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NITRO-DUR 0.8 MG/HR PATCH 24HR *nitroglycerin*	3	
NITRO-TIME 2.5 MG CAP ER *nitroglycerin*	3	
NITRO-TIME 6.5 MG CAP ER *nitroglycerin*	3	
NITRO-TIME 9 MG CAP ER *nitroglycerin*	3	
nitroglycerin 0.1 mg/hr patch 24hr	1	
nitroglycerin 0.2 mg/hr patch 24hr	1	
nitroglycerin 0.3 mg sl tab	1	
nitroglycerin 0.4 mg sl tab	1	
nitroglycerin 0.4 mg/hr patch 24hr	1	
nitroglycerin 0.4 mg/spray solution	1	
nitroglycerin 0.6 mg sl tab	1	
nitroglycerin 0.6 mg/hr patch 24hr	1	
NITROGLYCERIN 5 MG/ML SOLUTION *nitroglycerin*	1	
nitroglycerin er 2.5 mg cap er	1	
nitroglycerin er 6.5 mg cap er	1	
nitroglycerin er 9 mg cap er	1	
NITROGLYCERIN IN D5W 100-5 MCG/ML-% SOLUTION *nitroglycerin in d5w*	1	
NITROGLYCERIN IN D5W 200-5 MCG/ML-% SOLUTION *nitroglycerin in d5w*	1	
NITROGLYCERIN IN D5W 400-5 MCG/ML-% SOLUTION *nitroglycerin in d5w*	1	
NITROMIST 400 MCG/SPRAY AERO SOLN *nitroglycerin*	3	
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
buspirone hcl 10 mg tab	1	
buspirone hcl 15 mg tab	1	
buspirone hcl 30 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
buspirone hcl 5 mg tab	1	
buspirone hcl 7.5 mg tab	1	
DROPERIDOL 2.5 MG/ML SOLUTION *droperidol*	1	
droperidol 2.5 mg/ml solution	1	
hydroxyzine hcl 10 mg tab	1	AL1 At least 2 yrs old
hydroxyzine hcl 10 mg/5ml syrup	1	AL1 At least 2 yrs old
hydroxyzine hcl 25 mg tab	1	AL1 At least 2 yrs old
HYDROXYZINE HCL 25 MG/ML SOLUTION *hydroxyzine hcl*	1	AL1 At least 2 yrs old
hydroxyzine hcl 50 mg tab	1	AL1 At least 2 yrs old
HYDROXYZINE HCL 50 MG/ML SOLUTION *hydroxyzine hcl*	1	AL1 At least 2 yrs old
HYDROXYZINE PAMOATE 100 MG CAP *hydroxyzine pamoate*	3	
hydroxyzine pamoate 25 mg cap	1	AL1 At least 2 yrs old
hydroxyzine pamoate 50 mg cap	1	AL1 At least 2 yrs old
BENZODIAZEPINES		
alprazolam 0.25 mg tab	1	QL 120 / 30 DAYS
alprazolam 0.25 mg tab disp	1	QL 120 / 30 DAYS
alprazolam 0.5 mg tab	1	QL 120 / 30 DAYS
alprazolam 0.5 mg tab disp	1	QL 120 / 30 DAYS
alprazolam 1 mg tab	1	QL 120 / 30 DAYS
alprazolam 1 mg tab disp	1	QL 120 / 30 DAYS
alprazolam 2 mg tab	1	QL 150 / 30 DAYS
alprazolam 2 mg tab disp	1	QL 150 / 30 DAYS
alprazolam er 0.5 mg tab er 24h	1	QL 30 / 30 DAYS
alprazolam er 1 mg tab er 24h	1	QL 30 / 30 DAYS
alprazolam er 2 mg tab er 24h	1	QL 150 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
alprazolam er 3 mg tab er 24h	1	QL 90 / 30 DAYS
ALPRAZOLAM INTENSOL 1 MG/ML CONC *alprazolam*	3	QL 300 / 30 DAYS
alprazolam xr 0.5 mg tab er 24h	1	QL 30 / 30 DAYS
alprazolam xr 1 mg tab er 24h	1	QL 30 / 30 DAYS
alprazolam xr 2 mg tab er 24h	1	QL 150 / 30 DAYS
alprazolam xr 3 mg tab er 24h	1	QL 90 / 30 DAYS
ATIVAN 2 MG/ML SOLUTION *lorazepam*	3	
ATIVAN 4 MG/ML SOLUTION *lorazepam*	3	
chlordiazepoxide hcl 10 mg cap	1	QL 900 / 30 DAYS
chlordiazepoxide hcl 25 mg cap	1	QL 360 / 30 DAYS
chlordiazepoxide hcl 5 mg cap	1	QL 120 / 30 DAYS
clorazepate dipotassium 15 mg tab	1	QL 180 / 30 DAYS
clorazepate dipotassium 3.75 mg tab	1	QL 720 / 30 DAYS
clorazepate dipotassium 7.5 mg tab	1	QL 360 / 30 DAYS
diazepam 10 mg tab	1	
DIAZEPAM 10 MG/2ML SOLN A-INJ *diazepam*	1	
diazepam 2 mg tab	1	
diazepam 5 mg tab	1	
DIAZEPAM 5 MG/5ML SOLUTION *diazepam*	2	
diazepam 5 mg/ml conc	1	
diazepam 5 mg/ml solution	1	
diazepam intensol 5 mg/ml conc	1	
lorazepam 0.5 mg tab	1	QL 90 / 30 DAYS
lorazepam 1 mg tab	1	QL 90 / 30 DAYS
lorazepam 2 mg tab	1	QL 150 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lorazepam 2 mg/ml conc	1	QL 150 / 30 DAYS
lorazepam 2 mg/ml solution	1	
lorazepam 4 mg/ml solution	1	
lorazepam intensol 2 mg/ml conc	1	QL 150 / 30 DAYS
oxazepam 10 mg cap	3	QL 120 / 30 DAYS
oxazepam 15 mg cap	3	QL 120 / 30 DAYS
oxazepam 30 mg cap	3	QL 120 / 30 DAYS
ANTIARRHYTHMICS		
ANTIARRHYTHMICS - MISC.		
ADENOCARD 12 MG/4ML SOLUTION *adenosine*	3	
ADENOCARD 6 MG/2ML SOLUTION *adenosine*	3	
adenosine 12 mg/4ml solution	1	
adenosine 6 mg/2ml solution	1	
ANTIARRHYTHMICS TYPE I-A		
disopyramide phosphate 100 mg cap	1	
disopyramide phosphate 150 mg cap	1	
NORPACE 100 MG CAP *disopyramide phosphate*	3	
NORPACE 150 MG CAP *disopyramide phosphate*	3	
NORPACE CR 100 MG CAP ER 12H *disopyramide phosphate*	3	
NORPACE CR 150 MG CAP ER 12H *disopyramide phosphate*	3	
procainamide hcl 100 mg/ml solution	1	
procainamide hcl 500 mg/ml solution	1	
quinidine gluconate er 324 mg tab er	1	
QUINIDINE SULFATE 200 MG TAB *quinidine sulfate*	2	
QUINIDINE SULFATE 300 MG TAB *quinidine sulfate*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIARRHYTHMICS TYPE I-B		
lidocaine hcl (cardiac) 100 mg/5ml soln prsyr	1	
LIDOCAINE HCL (CARDIAC) 50 MG/5ML SOLN PRSYR *lidocaine hcl (cardiac)*	1	
LIDOCAINE HCL (CARDIAC) PF 100 MG/5ML SOLN PRSYR *lidocaine hcl (cardiac)*	1	
LIDOCAINE HCL (CARDIAC) PF 100 MG/5ML SOLUTION *lidocaine hcl (cardiac)*	1	
LIDOCAINE HCL (CARDIAC) PF 50 MG/5ML SOLN PRSYR *lidocaine hcl (cardiac)*	1	
lidocaine in d5w 4-5 mg/ml-% solution	1	
lidocaine in d5w 8-5 mg/ml-% solution	1	
mexiletine hcl 150 mg cap	1	
mexiletine hcl 200 mg cap	1	
mexiletine hcl 250 mg cap	1	
ANTIARRHYTHMICS TYPE I-C		
flecainide acetate 100 mg tab	1	
flecainide acetate 150 mg tab	1	
flecainide acetate 50 mg tab	1	
propafenone hcl 150 mg tab	1	
propafenone hcl 225 mg tab	1	
propafenone hcl 300 mg tab	1	
propafenone hcl er 225 mg cap er 12h	1	
propafenone hcl er 325 mg cap er 12h	1	
propafenone hcl er 425 mg cap er 12h	1	
ANTIARRHYTHMICS TYPE III		
amiodarone hcl 100 mg tab	1	
amiodarone hcl 150 mg/3ml solution	1	
amiodarone hcl 200 mg tab	1	
amiodarone hcl 400 mg tab	1	
amiodarone hcl 450 mg/9ml solution	1	
amiodarone hcl 900 mg/18ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BRETYLIUM TOSYLATE 50 MG/ML SOLUTION *bretylium tosylate*	1	
CORVERT 1 MG/10ML SOLUTION *ibutilide fumarate*	3	
dofetilide 125 mcg cap	1	
dofetilide 250 mcg cap	1	
dofetilide 500 mcg cap	1	
ibutilide fumarate 1 mg/10ml solution	1	
MULTAQ 400 MG TAB *dronedarone hcl*	2	
NEXTERONE 150-4.21 MG/100ML-% SOLUTION *amiodarone hcl in dextrose*	3	
NEXTERONE 360-4.14 MG/200ML-% SOLUTION *amiodarone hcl in dextrose*	3	
pacerone 100 mg tab	1	
pacerone 200 mg tab	1	
pacerone 400 mg tab	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ADRENERGIC COMBINATIONS		
ADVAIR DISKUS 100-50 MCG/DOSE AER POW BA *fluticasone-salmeterol*	1	QL 60 / 30 DAYS
ADVAIR DISKUS 250-50 MCG/DOSE AER POW BA *fluticasone-salmeterol*	1	QL 60 / 30 DAYS
ADVAIR DISKUS 500-50 MCG/DOSE AER POW BA *fluticasone-salmeterol*	1	QL 60 / 30 DAYS
ADVAIR HFA 115-21 MCG/ACT AEROSOL *fluticasone-salmeterol*	2	QL 12 / 30 DAYS
ADVAIR HFA 230-21 MCG/ACT AEROSOL *fluticasone-salmeterol*	2	QL 12 / 30 DAYS
ADVAIR HFA 45-21 MCG/ACT AEROSOL *fluticasone-salmeterol*	2	QL 12 / 30 DAYS
ANORO ELLIPTA 62.5-25 MCG/INH AER POW BA *umeclidinium-vilanterol*	2	QL 60 / 30 DAYS
BREO ELLIPTA 100-25 MCG/INH AER POW BA *fluticasone furoate-vilanterol*	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BREO ELLIPTA 200-25 MCG/INH AER POW BA *fluticasone furoate-vilanterol*	2	QL 60 / 30 DAYS
BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL *budesonide-glycopyrrolate-formoterol fumarate*	2	
COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN *ipratropium-albuterol*	3	QL 8 / 30 DAYS
DULERA 100-5 MCG/ACT AEROSOL *mometasone furoate-formoterol fumarate dihydrate*	2	QL 13 / 30 DAYS
DULERA 200-5 MCG/ACT AEROSOL *mometasone furoate-formoterol fumarate dihydrate*	2	QL 13 / 30 DAYS
DULERA 50-5 MCG/ACT AEROSOL *mometasone furoate-formoterol fumarate dihydrate*	2	QL 13 / 30 DAYS
FLUTICASONE-SALMETEROL 113-14 MCG/ACT AER POW BA *fluticasone-salmeterol*	1	QL 1 / 30 DAYS AL1 At least 12 yrs old
FLUTICASONE-SALMETEROL 232-14 MCG/ACT AER POW BA *fluticasone-salmeterol*	1	QL 1 / 30 DAYS AL1 At least 12 yrs old
FLUTICASONE-SALMETEROL 55-14 MCG/ACT AER POW BA *fluticasone-salmeterol*	1	QL 1 / 30 DAYS AL1 At least 12 yrs old
ipratropium-albuterol 0.5-2.5 (3) mg/3ml solution	1	
STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN *tiotropium bromide-olodaterol hcl*	2	QL 4 / 30 DAYS
SYMBICORT 160-4.5 MCG/ACT AEROSOL *budesonide-formoterol fumarate dihydrate*	2	QL 10.2 / 30 DAYS
SYMBICORT 80-4.5 MCG/ACT AEROSOL *budesonide-formoterol fumarate dihydrate*	2	QL 10.2 / 30 DAYS
TRELEGY ELLIPTA 100-62.5-25 MCG/INH AER POW BA *fluticasone-umeclidinium-vilanterol*	2	QL 60 / 30 DAYS
ANTI-IGE MONOCLONAL ANTIBODIES		
XOLAIR 150 MG RECON SOLN *omalizumab*	3	QL 6.6 / 30 DAYS AL1 At least 6 yrs old S Specialty Drug
XOLAIR 150 MG/ML SOLN PRSYR *omalizumab*	3	QL 5 / 30 DAYS AL1 At least 6 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XOLAIR 75 MG/0.5ML SOLN PRSYR *omalizumab*	3	QL 1.2 / 30 DAYS AL1 At least 6 yrs old S Specialty Drug
ANTI-INFLAMMATORY AGENTS		
cromolyn sodium 20 mg/2ml nebu soln	1	
BETA ADRENERGICS		
albuterol sulfate (2.5 mg/3ml) 0.083% nebu soln	1	QL 540 / 30 DAYS
albuterol sulfate (5 mg/ml) 0.5% nebu soln	1	QL 540 / 30 DAYS
albuterol sulfate 0.63 mg/3ml nebu soln	1	QL 540 / 30 DAYS
albuterol sulfate 1.25 mg/3ml nebu soln	1	QL 540 / 30 DAYS
albuterol sulfate 2 mg tab	1	
albuterol sulfate 2 mg/5ml syrup	1	
albuterol sulfate 2.5 mg/0.5ml nebu soln	1	QL 540 / 30 DAYS
albuterol sulfate 4 mg tab	1	
ALBUTEROL SULFATE ER 4 MG TAB ER 12H *albuterol sulfate*	3	
ALBUTEROL SULFATE ER 8 MG TAB ER 12H *albuterol sulfate*	3	
albuterol sulfate hfa 108 (90 base) mcg/act aero soln	1	QL 36 / 30 DAYS
ARCAPTA NEOHALER 75 MCG CAP *indacaterol maleate*	3	QL 30 / 30 DAYS
BROVANA 15 MCG/2ML NEBU SOLN *arformoterol tartrate*	2	QL 120 / 30 DAYS
isoproterenol hcl 0.2 mg/ml solution	1	
ISUPREL 0.2 MG/ML SOLUTION *isoproterenol hcl*	3	
levalbuterol hcl 0.31 mg/3ml nebu soln	1	
levalbuterol hcl 0.63 mg/3ml nebu soln	1	
levalbuterol hcl 1.25 mg/0.5ml nebu soln	1	
levalbuterol hcl 1.25 mg/3ml nebu soln	1	
SEREVENT DISKUS 50 MCG/DOSE AER POW BA *salmeterol xinafoate*	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN *olodaterol hcl*	2	QL 4 / 30 DAYS
terbutaline sulfate 1 mg/ml solution	1	
terbutaline sulfate 2.5 mg tab	1	
terbutaline sulfate 5 mg tab	1	
VENTOLIN HFA 108 (90 BASE) MCG/ACT AERO SOLN *albuterol sulfate*	1	QL 36 / 30 DAYS
BRONCHODILATORS - ANTICHOLINERGICS		
ATROVENT HFA 17 MCG/ACT AERO SOLN *ipratropium bromide hfa*	3	QL 26 / 30 DAYS
INCRUSE ELLIPTA 62.5 MCG/INH AER POW BA *umeclidinium bromide*	2	QL 30 / 30 DAYS
ipratropium bromide 0.02 % solution	1	QL 375 / 30 DAYS
SPIRIVA HANDIHALER 18 MCG CAP *tiotropium bromide monohydrate*	2	QL 30 / 30 DAYS
SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN *tiotropium bromide monohydrate*	2	QL 4 / 30 DAYS
SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN *tiotropium bromide monohydrate*	2	QL 4 / 30 DAYS
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)		
FASENRA 30 MG/ML SOLN PRSYR *benralizumab*	3	QL 1.2 / 56 DAYS PA AL1 At least 12 yrs old S Specialty Drug
FASENRA PEN 30 MG/ML SOLN A-INJ *benralizumab*	3	QL 1 / 56 DAYS PA AL1 At least 12 yrs old S Specialty Drug
NUCALA 100 MG RECON SOLN *mepolizumab*	3	QL 1.2 / 28 DAYS PA AL1 At least 12 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUCALA 100 MG/ML SOLN PRSYR *mepolizumab*	3	QL 3 / 28 DAYS PA AL1 At least 12 yrs old S Specialty Drug
INTERLEUKIN-5 ANTAGONISTS (IGG4 KAPPA)		
CINQAIR 100 MG/10ML SOLUTION *reslizumab*	3	PA S Specialty Drug
LEUKOTRIENE RECEPTOR ANTAGONISTS		
montelukast sodium 10 mg tab	1	QL 30 / 30 DAYS
montelukast sodium 4 mg chew tab	1	QL 30 / 30 DAYS
montelukast sodium 4 mg packet	1	QL 30 / 30 DAYS
montelukast sodium 5 mg chew tab	1	QL 30 / 30 DAYS
zafirlukast 10 mg tab	1	QL 60 / 30 DAYS
zafirlukast 20 mg tab	1	QL 60 / 30 DAYS
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP 250 MCG TAB *roflumilast*	3	QL 30 / 30 DAYS
DALIRESP 500 MCG TAB *roflumilast*	3	QL 30 / 30 DAYS
STEROID INHALANTS		
ARNUITY ELLIPTA 100 MCG/ACT AER POW BA *fluticasone furoate (inhalation)*	2	QL 30 / 30 DAYS
ARNUITY ELLIPTA 200 MCG/ACT AER POW BA *fluticasone furoate (inhalation)*	2	QL 30 / 30 DAYS
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA *fluticasone furoate (inhalation)*	2	QL 30 / 30 DAYS
ASMANEX (120 METERED DOSES) 220 MCG/INH AER POW BA *mometasone furoate (inhalation)*	2	QL 1 / 30 DAYS
ASMANEX (30 METERED DOSES) 110 MCG/INH AER POW BA *mometasone furoate (inhalation)*	2	QL 1 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASMANEX (30 METERED DOSES) 220 MCG/INH AER POW BA *mometasone furoate (inhalation)*	2	QL 1 / 30 DAYS
ASMANEX (60 METERED DOSES) 220 MCG/INH AER POW BA *mometasone furoate (inhalation)*	2	QL 1 / 30 DAYS
ASMANEX HFA 100 MCG/ACT AEROSOL *mometasone furoate (inhalation)*	2	QL 13 / 30 DAYS
ASMANEX HFA 200 MCG/ACT AEROSOL *mometasone furoate (inhalation)*	2	QL 13 / 30 DAYS
ASMANEX HFA 50 MCG/ACT AEROSOL *mometasone furoate (inhalation)*	2	QL 13 / 30 DAYS
budesonide 0.25 mg/2ml suspension	1	QL 120 / 30 DAYS
budesonide 0.5 mg/2ml suspension	1	QL 120 / 30 DAYS
budesonide 1 mg/2ml suspension	1	QL 120 / 30 DAYS
FLOVENT DISKUS 100 MCG/BLIST AER POW BA *fluticasone propionate (inhalation)*	2	QL 60 / 30 DAYS
FLOVENT DISKUS 250 MCG/BLIST AER POW BA *fluticasone propionate (inhalation)*	2	QL 240 / 30 DAYS
FLOVENT DISKUS 50 MCG/BLIST AER POW BA *fluticasone propionate (inhalation)*	2	QL 60 / 30 DAYS
FLOVENT HFA 110 MCG/ACT AEROSOL *fluticasone propionate hfa*	2	QL 12 / 30 DAYS
FLOVENT HFA 220 MCG/ACT AEROSOL *fluticasone propionate hfa*	2	QL 24 / 30 DAYS
FLOVENT HFA 44 MCG/ACT AEROSOL *fluticasone propionate hfa*	2	QL 10.6 / 30 DAYS
QVAR REDIHALER 40 MCG/ACT AERO BA *beclomethasone dipropionate hfa*	2	QL 1 / 30 DAYS
QVAR REDIHALER 80 MCG/ACT AERO BA *beclomethasone dipropionate hfa*	2	QL 2 / 30 DAYS
XANTHINES		
aminophylline 25 mg/ml solution	1	
ELIXOPHYLLIN 80 MG/15ML ELIXIR *theophylline*	3	
THEO-24 100 MG CAP ER 24H *theophylline*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THEO-24 200 MG CAP ER 24H *theophylline*	3	
THEO-24 300 MG CAP ER 24H *theophylline*	3	
THEO-24 400 MG CAP ER 24H *theophylline*	3	
theophylline 80 mg/15ml solution	1	
theophylline er 100 mg tab er 12h	1	
theophylline er 200 mg tab er 12h	1	
theophylline er 300 mg tab er 12h	1	
THEOPHYLLINE ER 300 MG TAB ER 12H *theophylline*	3	
theophylline er 400 mg tab er 24h	1	
theophylline er 450 mg tab er 12h	1	
THEOPHYLLINE ER 450 MG TAB ER 12H *theophylline*	3	
theophylline er 600 mg tab er 24h	1	
THEOPHYLLINE IN D5W 0.8-5 MG/ML-% SOLUTION *theophylline in dextrose*	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
COUMADIN 1 MG TAB *warfarin sodium*	3	
COUMADIN 10 MG TAB *warfarin sodium*	3	
COUMADIN 2 MG TAB *warfarin sodium*	3	
COUMADIN 2.5 MG TAB *warfarin sodium*	3	
COUMADIN 3 MG TAB *warfarin sodium*	3	
COUMADIN 4 MG TAB *warfarin sodium*	3	
COUMADIN 5 MG TAB *warfarin sodium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COUMADIN 6 MG TAB *warfarin sodium*	3	
COUMADIN 7.5 MG TAB *warfarin sodium*	3	
jantoven 1 mg tab	1	
jantoven 10 mg tab	1	
jantoven 2 mg tab	1	
jantoven 2.5 mg tab	1	
jantoven 3 mg tab	1	
jantoven 4 mg tab	1	
jantoven 5 mg tab	1	
jantoven 6 mg tab	1	
jantoven 7.5 mg tab	1	
warfarin sodium 1 mg tab	1	
warfarin sodium 10 mg tab	1	
warfarin sodium 2 mg tab	1	
warfarin sodium 2.5 mg tab	1	
warfarin sodium 3 mg tab	1	
warfarin sodium 4 mg tab	1	
warfarin sodium 5 mg tab	1	
warfarin sodium 6 mg tab	1	
warfarin sodium 7.5 mg tab	1	
DIRECT FACTOR XA INHIBITORS		
BEVYXXA 40 MG CAP *betrixaban maleate*	3	QL 43 / 42 DAYS AL1 At least 18 yrs old
BEVYXXA 80 MG CAP *betrixaban maleate*	3	QL 43 / 42 DAYS AL1 At least 18 yrs old
ELIQUIS 2.5 MG TAB *apixaban*	2	QL 60 / 30 DAYS
ELIQUIS 5 MG TAB *apixaban*	2	QL 74 / 30 DAYS
ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK *apixaban*	2	QL 1 / 180 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XARELTO 10 MG TAB *rivaroxaban*	2	QL 30 / 30 DAYS
XARELTO 15 MG TAB *rivaroxaban*	2	QL 60 / 30 DAYS
XARELTO 2.5 MG TAB *rivaroxaban*	2	QL 60 / 30 DAYS
XARELTO 20 MG TAB *rivaroxaban*	2	QL 30 / 30 DAYS
XARELTO STARTER PACK 15 & 20 MG TAB THPK *rivaroxaban*	2	QL 51 / 30 DAYS
HEPARINS AND HEPARINOID-LIKE AGENTS		
HEPARIN (PORCINE) IN NACL 1000-0.9 UT/500ML-% SOLUTION *heparin (porcine) in sodium chloride*	1	
heparin (porcine) in nacl 1000-0.9 ut/500ml-% solution	1	
HEPARIN (PORCINE) IN NACL 12500-0.45 UT/250ML-% SOLUTION *heparin (porcine) in sodium chloride*	1	
HEPARIN (PORCINE) IN NACL 2000-0.9 UNIT/L-% SOLUTION *heparin (porcine) in sodium chloride*	1	
heparin (porcine) in nacl 2000-0.9 unit/l-% solution	1	
HEPARIN (PORCINE) IN NACL 25000-0.45 UT/250ML-% SOLUTION *heparin (porcine) in sodium chloride*	1	
HEPARIN (PORCINE) IN NACL 25000-0.45 UT/500ML-% SOLUTION *heparin (porcine) in sodium chloride*	1	
heparin lock flush 10 unit/ml solution	1	
HEPARIN SOD (PORCINE) IN D5W 100 UNIT/ML SOLUTION *heparin sod (porcine) in d5w*	1	
HEPARIN SOD (PORCINE) IN D5W 25000-5 UT/500ML-% SOLUTION *heparin sod (porcine) in d5w*	1	
HEPARIN SOD (PORCINE) IN D5W 40-5 UNIT/ML-% SOLUTION *heparin sod (porcine) in d5w*	1	
heparin sodium (porcine) 1000 unit/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
heparin sodium (porcine) 10000 unit/ml solution	1	
heparin sodium (porcine) 20000 unit/ml solution	1	
HEPARIN SODIUM (PORCINE) 5000 UNIT/0.5ML SOLN PRSYR *heparin sodium (porcine)*	1	
heparin sodium (porcine) 5000 unit/ml solution	1	
heparin sodium (porcine) pf 5000 unit/0.5ml solution	1	
HEPARIN SODIUM (PORCINE) PF 5000 UNIT/ML SOLUTION *heparin sodium (porcine)*	3	
heparin sodium lock flush 100 unit/ml solution	1	
LOW MOLECULAR WEIGHT HEPARINS		
enoxaparin sodium 100 mg/ml solution	1	QL 30 / 90 DAYS
enoxaparin sodium 120 mg/0.8ml solution	1	QL 24 / 90 DAYS
enoxaparin sodium 150 mg/ml solution	1	QL 30 / 90 DAYS
enoxaparin sodium 30 mg/0.3ml solution	1	QL 9 / 90 DAYS
enoxaparin sodium 300 mg/3ml solution	1	QL 30 / 90 DAYS
enoxaparin sodium 40 mg/0.4ml solution	1	QL 12 / 90 DAYS
enoxaparin sodium 60 mg/0.6ml solution	1	QL 18 / 90 DAYS
enoxaparin sodium 80 mg/0.8ml solution	1	QL 24 / 90 DAYS
FRAGMIN 10000 UNIT/ML SOLUTION *dalteparin sodium*	3	QL 30 / 90 DAYS
FRAGMIN 12500 UNIT/0.5ML SOLUTION *dalteparin sodium*	3	QL 15 / 90 DAYS
FRAGMIN 15000 UNIT/0.6ML SOLUTION *dalteparin sodium*	3	QL 18 / 90 DAYS
FRAGMIN 18000 UNT/0.72ML SOLUTION *dalteparin sodium*	3	QL 21.6 / 90 DAYS
FRAGMIN 2500 UNIT/0.2ML SOLUTION *dalteparin sodium*	3	QL 6 / 90 DAYS
FRAGMIN 5000 UNIT/0.2ML SOLUTION *dalteparin sodium*	3	QL 6 / 90 DAYS
FRAGMIN 7500 UNIT/0.3ML SOLUTION *dalteparin sodium*	3	QL 9 / 90 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FRAGMIN 95000 UNIT/3.8ML SOLUTION *dalteparin sodium*	3	QL 38 / 90 DAYS
SYNTHETIC HEPARINOID-LIKE AGENTS		
fondaparinux sodium 10 mg/0.8ml solution	1	QL 24 / 90 DAYS
fondaparinux sodium 2.5 mg/0.5ml solution	1	QL 15 / 90 DAYS
fondaparinux sodium 5 mg/0.4ml solution	1	QL 12 / 90 DAYS
fondaparinux sodium 7.5 mg/0.6ml solution	1	QL 18 / 90 DAYS
THROMBIN INHIBITORS - HIRUDIN TYPE		
ANGIOMAX 250 MG RECON SOLN *bivalirudin trifluoroacetate*	3	
bivalirudin trifluoroacetate 250 mg recon soln	1	
BIVALIRUDIN-SODIUM CHLORIDE 250-0.9 MG/50ML-% SOLUTION *bivalirudin trifluoroacetate-sodium chloride*	1	
BIVALIRUDIN-SODIUM CHLORIDE 500-0.9 MG/100ML-% SOLUTION *bivalirudin trifluoroacetate-sodium chloride*	1	
IPRIVASK 15 MG RECON SOLN *desirudin*	3	S Specialty Drug
THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE		
ARGATROBAN 250 MG/2.5ML SOLUTION *argatroban*	1	
argatroban 250 mg/2.5ml solution	1	
ARGATROBAN 50 MG/50ML SOLUTION *argatroban*	1	
ARGATROBAN IN SODIUM CHLORIDE 125-0.9 MG/125ML-% SOLUTION *argatroban in sodium chloride*	1	
ARGATROBAN IN SODIUM CHLORIDE 250-0.9 MG/250ML-% SOLUTION *argatroban in sodium chloride*	1	
ARGATROBAN IN SODIUM CHLORIDE 50-0.9 MG/50ML-% SOLUTION *argatroban in sodium chloride*	1	
PRADAXA 110 MG CAP *dabigatran etexilate mesylate*	3	QL 71 / 90 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRADAXA 150 MG CAP *dabigatran etexilate mesylate*	3	QL 60 / 30 DAYS
PRADAXA 75 MG CAP *dabigatran etexilate mesylate*	3	QL 60 / 30 DAYS
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5 MG/ML SUSPENSION *perampanel*	3	QL 180 / 30 DAYS
FYCOMPA 10 MG TAB *perampanel*	3	QL 30 / 30 DAYS
FYCOMPA 12 MG TAB *perampanel*	3	QL 30 / 30 DAYS
FYCOMPA 2 MG TAB *perampanel*	3	QL 30 / 30 DAYS
FYCOMPA 4 MG TAB *perampanel*	3	QL 30 / 30 DAYS
FYCOMPA 6 MG TAB *perampanel*	3	QL 30 / 30 DAYS
FYCOMPA 8 MG TAB *perampanel*	3	QL 30 / 30 DAYS
ANTICONVULSANTS - BENZODIAZEPINES		
clobazam 10 mg tab	1	
clobazam 2.5 mg/ml suspension	1	
clobazam 20 mg tab	1	
clonazepam 0.125 mg tab disp	1	QL 90 / 30 DAYS
clonazepam 0.25 mg tab disp	1	QL 90 / 30 DAYS
clonazepam 0.5 mg tab	1	QL 90 / 30 DAYS
clonazepam 0.5 mg tab disp	1	QL 90 / 30 DAYS
clonazepam 1 mg tab	1	QL 90 / 30 DAYS
clonazepam 1 mg tab disp	1	QL 90 / 30 DAYS
clonazepam 2 mg tab	1	QL 300 / 30 DAYS
clonazepam 2 mg tab disp	1	QL 300 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIASTAT ACUDIAL 10 MG GEL *diazepam (anticonvulsant)*	2	QL 2.1 / 30 DAYS
DIASTAT ACUDIAL 20 MG GEL *diazepam (anticonvulsant)*	2	QL 2.1 / 30 DAYS
DIASTAT PEDIATRIC 2.5 MG GEL *diazepam (anticonvulsant)*	2	QL 2.1 / 30 DAYS
DIAZEPAM 10 MG GEL *diazepam (anticonvulsant)*	3	QL 2.1 / 30 DAYS
DIAZEPAM 2.5 MG GEL *diazepam (anticonvulsant)*	3	QL 2.1 / 30 DAYS
DIAZEPAM 20 MG GEL *diazepam (anticonvulsant)*	3	QL 2.1 / 30 DAYS
NAYZILAM 5 MG/0.1ML SOLUTION *midazolam (anticonvulsant)*	3	QL 10 / 30 DAYS
SYMPAZAN 10 MG FILM *clobazam*	3	
SYMPAZAN 20 MG FILM *clobazam*	3	
SYMPAZAN 5 MG FILM *clobazam*	3	
VALTOCO 10 MG DOSE 10 MG/0.1ML LIQUID *diazepam (anticonvulsant)*	3	QL 10 / 30 DAYS
VALTOCO 15 MG DOSE 7.5 MG/0.1ML LIQD THPK *diazepam (anticonvulsant)*	3	QL 10 / 30 DAYS
VALTOCO 20 MG DOSE 10 MG/0.1ML LIQD THPK *diazepam (anticonvulsant)*	3	QL 10 / 30 DAYS
VALTOCO 5 MG DOSE 5 MG/0.1ML LIQUID *diazepam (anticonvulsant)*	3	QL 10 / 30 DAYS
ANTICONVULSANTS - MISC.		
APTIOM 200 MG TAB *eslicarbazepine acetate*	3	
APTIOM 400 MG TAB *eslicarbazepine acetate*	3	
APTIOM 600 MG TAB *eslicarbazepine acetate*	3	
APTIOM 800 MG TAB *eslicarbazepine acetate*	3	
BANZEL 200 MG TAB *rufinamide*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BANZEL 40 MG/ML SUSPENSION *rufinamide*	3	
BANZEL 400 MG TAB *rufinamide*	3	
BRIVIACT 10 MG TAB *brivaracetam*	3	QL 120 / 30 DAYS
BRIVIACT 10 MG/ML SOLUTION *brivaracetam*	3	QL 600 / 30 DAYS
BRIVIACT 100 MG TAB *brivaracetam*	3	QL 60 / 30 DAYS
BRIVIACT 25 MG TAB *brivaracetam*	3	QL 240 / 30 DAYS
BRIVIACT 50 MG TAB *brivaracetam*	3	QL 120 / 30 DAYS
BRIVIACT 50 MG/5ML SOLUTION *brivaracetam*	3	QL 600 / 30 DAYS
BRIVIACT 75 MG TAB *brivaracetam*	3	QL 90 / 30 DAYS
carbamazepine 100 mg chew tab	1	
carbamazepine 100 mg/5ml suspension	1	
carbamazepine 200 mg tab	1	
carbamazepine er 100 mg cap er 12h	1	
carbamazepine er 100 mg tab er 12h	1	
carbamazepine er 200 mg cap er 12h	1	
carbamazepine er 200 mg tab er 12h	1	
carbamazepine er 300 mg cap er 12h	1	
carbamazepine er 400 mg tab er 12h	1	
CARBATROL 100 MG CAP ER 12H *carbamazepine*	3	
CARBATROL 200 MG CAP ER 12H *carbamazepine*	3	
CARBATROL 300 MG CAP ER 12H *carbamazepine*	3	
DIACOMIT 250 MG CAP *stiripentol*	3	QL 60 / 30 DAYS S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIACOMIT 250 MG PACKET *stiripentol*	3	QL 60 / 30 DAYS S Specialty Drug
DIACOMIT 500 MG CAP *stiripentol*	3	QL 60 / 30 DAYS S Specialty Drug
DIACOMIT 500 MG PACKET *stiripentol*	3	QL 60 / 30 DAYS S Specialty Drug
EPIDIOLEX 100 MG/ML SOLUTION *cannabidiol*	2	PA S Specialty Drug
epitol 200 mg tab	1	
FINTEPLA 2.2 MG/ML SOLUTION *fenfluramine hcl (anticonvulsant)*	3	PA S Specialty Drug
gabapentin 100 mg cap	1	QL 270 / 30 DAYS
gabapentin 250 mg/5ml solution	1	QL 2160 / 30 DAYS
gabapentin 300 mg cap	1	QL 270 / 30 DAYS
gabapentin 300 mg/6ml solution	1	QL 2160 / 30 DAYS
gabapentin 400 mg cap	1	QL 270 / 30 DAYS
gabapentin 600 mg tab	1	QL 180 / 30 DAYS
gabapentin 800 mg tab	1	QL 150 / 30 DAYS
KEPPRA 500 MG/5ML SOLUTION *levetiracetam*	3	
LAMICTAL ODT 21 X 25 MG & 7 X 50 MG KIT *lamotrigine*	3	
LAMICTAL ODT 25 & 50 & 100 MG KIT *lamotrigine*	3	
LAMICTAL ODT 42 X 50 MG & 14X100 MG KIT *lamotrigine*	3	
LAMICTAL XR 21 X 25 MG & 7 X 50 MG KIT *lamotrigine*	3	
LAMICTAL XR 25 & 50 & 100 MG KIT *lamotrigine*	3	
LAMICTAL XR 50 & 100 & 200 MG KIT *lamotrigine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamotrigine 100 mg tab	1	
lamotrigine 100 mg tab disp	1	
lamotrigine 150 mg tab	1	
lamotrigine 200 mg tab	1	
lamotrigine 200 mg tab disp	1	
lamotrigine 25 mg chew tab	1	
lamotrigine 25 mg tab	1	
lamotrigine 25 mg tab disp	1	
lamotrigine 5 mg chew tab	1	
lamotrigine 50 mg tab disp	1	
lamotrigine er 100 mg tab er 24h	1	
lamotrigine er 200 mg tab er 24h	1	
lamotrigine er 25 mg tab er 24h	1	
lamotrigine er 250 mg tab er 24h	1	
lamotrigine er 300 mg tab er 24h	1	
lamotrigine er 50 mg tab er 24h	1	
lamotrigine starter kit-blue 35 x 25 mg kit	1	
lamotrigine starter kit-green 84 x 25 mg & 14x100 mg kit	1	
lamotrigine starter kit-orange 42 x 25 mg & 7 x 100 mg kit	1	
levetiracetam 100 mg/ml solution	1	QL 946 / 30 DAYS
levetiracetam 1000 mg tab	1	
levetiracetam 250 mg tab	1	
levetiracetam 500 mg tab	1	
levetiracetam 500 mg/5ml solution	1	
levetiracetam 750 mg tab	1	
levetiracetam er 500 mg tab er 24h	1	
levetiracetam er 750 mg tab er 24h	1	
LEVETIRACETAM IN NACL 1000 MG/100ML SOLUTION *levetiracetam in sodium chloride*	1	
levetiracetam in nacl 1000 mg/100ml solution	1	
LEVETIRACETAM IN NACL 1500 MG/100ML SOLUTION *levetiracetam in sodium chloride*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levetiracetam in nacl 1500 mg/100ml solution	1	
LEVETIRACETAM IN NACL 500 MG/100ML SOLUTION *levetiracetam in sodium chloride*	1	
levetiracetam in nacl 500 mg/100ml solution	1	
MYSOLINE 250 MG TAB *primidone*	3	
MYSOLINE 50 MG TAB *primidone*	3	
oxcarbazepine 150 mg tab	1	
oxcarbazepine 300 mg tab	1	
oxcarbazepine 300 mg/5ml suspension	1	
oxcarbazepine 600 mg tab	1	
OXTELLAR XR 150 MG TAB ER 24H *oxcarbazepine*	3	
OXTELLAR XR 300 MG TAB ER 24H *oxcarbazepine*	3	
OXTELLAR XR 600 MG TAB ER 24H *oxcarbazepine*	3	
pregabalin 100 mg cap	1	QL 90 / 30 DAYS
pregabalin 150 mg cap	1	QL 90 / 30 DAYS
pregabalin 20 mg/ml solution	1	QL 900 / 30 DAYS
pregabalin 200 mg cap	1	QL 90 / 30 DAYS
pregabalin 225 mg cap	1	QL 60 / 30 DAYS
pregabalin 25 mg cap	1	QL 90 / 30 DAYS
pregabalin 300 mg cap	1	QL 60 / 30 DAYS
pregabalin 50 mg cap	1	QL 90 / 30 DAYS
pregabalin 75 mg cap	1	QL 90 / 30 DAYS
primidone 250 mg tab	1	
primidone 50 mg tab	1	
QUDEXY XR 100 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUDEXY XR 150 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
QUDEXY XR 200 MG CP24 SPRNK *topiramate*	3	QL 60 / 30 DAYS PA
QUDEXY XR 25 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
QUDEXY XR 50 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
roweepra 1000 mg tab	1	
roweepra 500 mg tab	1	
roweepra 750 mg tab	1	
roweepra xr 500 mg tab er 24h	1	
roweepra xr 750 mg tab er 24h	1	
SPRITAM 1000 MG TAB *levetiracetam*	3	QL 90 / 30 DAYS AL1 At least 4 yrs old
SPRITAM 250 MG TAB *levetiracetam*	3	QL 90 / 30 DAYS AL1 At least 4 yrs old
SPRITAM 500 MG TAB *levetiracetam*	3	QL 90 / 30 DAYS AL1 At least 4 yrs old
SPRITAM 750 MG TAB *levetiracetam*	3	QL 90 / 30 DAYS AL1 At least 4 yrs old
subvenite 100 mg tab	1	
subvenite 150 mg tab	1	
subvenite 200 mg tab	1	
subvenite 25 mg tab	1	
subvenite starter kit-blue 35 x 25 mg kit	1	
subvenite starter kit-green 84 x 25 mg & 14x100 mg kit	1	
subvenite starter kit-orange 42 x 25 mg & 7 x 100 mg kit	1	
TEGRETOL 100 MG/5ML SUSPENSION *carbamazepine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TEGRETOL 200 MG TAB *carbamazepine*	3	
TEGRETOL-XR 100 MG TAB ER 12H *carbamazepine*	3	
TEGRETOL-XR 200 MG TAB ER 12H *carbamazepine*	3	
TEGRETOL-XR 400 MG TAB ER 12H *carbamazepine*	3	
topiramate 100 mg tab	1	
topiramate 15 mg cap sprink	1	
topiramate 200 mg tab	1	
topiramate 25 mg cap sprink	1	
topiramate 25 mg tab	1	
topiramate 50 mg tab	1	
TOPIRAMATE ER 100 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
TOPIRAMATE ER 150 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
TOPIRAMATE ER 200 MG CP24 SPRNK *topiramate*	3	QL 60 / 30 DAYS PA
TOPIRAMATE ER 25 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
TOPIRAMATE ER 50 MG CP24 SPRNK *topiramate*	3	QL 30 / 30 DAYS PA
TROKENDI XR 100 MG CAP ER 24H *topiramate*	3	QL 30 / 30 DAYS PA
TROKENDI XR 200 MG CAP ER 24H *topiramate*	3	QL 60 / 30 DAYS PA
TROKENDI XR 25 MG CAP ER 24H *topiramate*	3	QL 30 / 30 DAYS PA
TROKENDI XR 50 MG CAP ER 24H *topiramate*	3	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIMPAT 10 MG/ML SOLUTION *lacosamide*	3	
VIMPAT 100 MG TAB *lacosamide*	3	
VIMPAT 150 MG TAB *lacosamide*	3	
VIMPAT 200 MG TAB *lacosamide*	3	
VIMPAT 200 MG/20ML SOLUTION *lacosamide*	3	
VIMPAT 50 MG TAB *lacosamide*	3	
zonisamide 100 mg cap	1	
zonisamide 25 mg cap	1	
zonisamide 50 mg cap	1	
CARBAMATES		
felbamate 400 mg tab	1	
felbamate 600 mg tab	1	
felbamate 600 mg/5ml suspension	1	
XCOPRI (250 MG DAILY DOSE) 50 & 200 MG TAB THPK *cenobamate*	3	
XCOPRI (350 MG DAILY DOSE) 150 & 200 MG TAB THPK *cenobamate*	3	
XCOPRI 100 MG TAB *cenobamate*	3	
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK *cenobamate*	3	
XCOPRI 14 X 150 MG & 14 X200 MG TAB THPK *cenobamate*	3	
XCOPRI 14 X 50 MG & 14 X100 MG TAB THPK *cenobamate*	3	
XCOPRI 150 MG TAB *cenobamate*	3	
XCOPRI 200 MG TAB *cenobamate*	3	
XCOPRI 50 MG TAB *cenobamate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GABA MODULATORS		
tiagabine hcl 12 mg tab	1	
tiagabine hcl 16 mg tab	1	
tiagabine hcl 2 mg tab	1	
tiagabine hcl 4 mg tab	1	
vigabatrin 500 mg packet	1	QL 180 / 30 DAYS S Specialty Drug
vigabatrin 500 mg tab	1	QL 180 / 30 DAYS S Specialty Drug
vigadrone 500 mg packet	1	QL 180 / 30 DAYS S Specialty Drug
HYDANTOINS		
CEREBYX 100 MG PE/2ML SOLUTION *fosphenytoin sodium*	3	
CEREBYX 500 MG PE/10ML SOLUTION *fosphenytoin sodium*	3	
DILANTIN 100 MG CAP *phenytoin sodium extended*	3	
DILANTIN 125 MG/5ML SUSPENSION *phenytoin*	3	
DILANTIN 30 MG CAP *phenytoin sodium extended*	2	
DILANTIN INFATABS 50 MG CHEW TAB *phenytoin*	3	
fosphenytoin sodium 100 mg pe/2ml solution	1	
fosphenytoin sodium 500 mg pe/10ml solution	1	
PEGANONE 250 MG TAB *ethotoin*	3	
PHENYTEK 200 MG CAP *phenytoin sodium extended*	3	
PHENYTEK 300 MG CAP *phenytoin sodium extended*	3	
phenytoin 125 mg/5ml suspension	1	
phenytoin 50 mg chew tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phenytoin infatabs 50 mg chew tab	1	
phenytoin sodium 50 mg/ml solution	1	
phenytoin sodium extended 100 mg cap	1	
phenytoin sodium extended 200 mg cap	1	
phenytoin sodium extended 300 mg cap	1	
SUCCINIMIDES		
CELONTIN 300 MG CAP *methsuximide*	3	
ethosuximide 250 mg cap	1	
ethosuximide 250 mg/5ml solution	1	
ZARONTIN 250 MG CAP *ethosuximide*	3	
ZARONTIN 250 MG/5ML SOLUTION *ethosuximide*	3	
VALPROIC ACID		
DEPACON 100 MG/ML SOLUTION *valproate sodium*	3	
DEPAKENE 250 MG CAP *valproic acid*	3	
DEPAKENE 250 MG/5ML SOLUTION *valproate sodium*	3	
divalproex sodium 125 mg cap dr	1	
divalproex sodium 125 mg tab dr	1	
divalproex sodium 250 mg tab dr	1	
divalproex sodium 500 mg tab dr	1	
divalproex sodium er 250 mg tab er 24h	1	
divalproex sodium er 500 mg tab er 24h	1	
valproate sodium 100 mg/ml solution	1	
valproate sodium 500 mg/5ml solution	1	
valproic acid 250 mg cap	1	
valproic acid 250 mg/5ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
mirtazapine 15 mg tab	1	QL 30 / 30 DAYS
mirtazapine 15 mg tab disp	1	
mirtazapine 30 mg tab	1	QL 30 / 30 DAYS
mirtazapine 30 mg tab disp	1	
mirtazapine 45 mg tab	1	QL 30 / 30 DAYS
mirtazapine 45 mg tab disp	1	
mirtazapine 7.5 mg tab	1	
ANTIDEPRESSANTS - MISC.		
APLENZIN 174 MG TAB ER 24H *bupropion hydrobromide*	3	ST
APLENZIN 348 MG TAB ER 24H *bupropion hydrobromide*	3	ST
APLENZIN 522 MG TAB ER 24H *bupropion hydrobromide*	3	ST
bupropion hcl 100 mg tab	1	
bupropion hcl 75 mg tab	1	
bupropion hcl er (sr) 100 mg tab er 12h	1	QL 60 / 30 DAYS
bupropion hcl er (sr) 150 mg tab er 12h	1	QL 60 / 30 DAYS
bupropion hcl er (sr) 200 mg tab er 12h	1	QL 60 / 30 DAYS
bupropion hcl er (xl) 150 mg tab er 24h	1	
bupropion hcl er (xl) 300 mg tab er 24h	1	QL 30 / 30 DAYS
BUPROPION HCL ER (XL) 450 MG TAB ER 24H *bupropion hcl*	3	ST
FORFIVO XL 450 MG TAB ER 24H *bupropion hcl*	3	ST
MAPROTILINE HCL 25 MG TAB *maprotiline hcl*	3	QL 90 / 30 DAYS ST
MAPROTILINE HCL 50 MG TAB *maprotiline hcl*	3	QL 90 / 30 DAYS ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAPROTILINE HCL 75 MG TAB *maprotiline hcl*	3	QL 90 / 30 DAYS ST
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZULRESSO 100 MG/20ML SOLUTION *brexanolone*	3	S Specialty Drug
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
EMSAM 12 MG/24HR PATCH 24HR *selegiline*	3	QL 30 / 30 DAYS
EMSAM 6 MG/24HR PATCH 24HR *selegiline*	3	QL 30 / 30 DAYS
EMSAM 9 MG/24HR PATCH 24HR *selegiline*	3	QL 30 / 30 DAYS
MARPLAN 10 MG TAB *isocarboxazid*	3	QL 180 / 30 DAYS
phenelzine sulfate 15 mg tab	1	QL 180 / 30 DAYS
tranylcypromine sulfate 10 mg tab	1	QL 180 / 30 DAYS
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO (56 MG DOSE) 28 MG/DEVICE SOLN THPK *esketamine hcl*	3	QL 8 / 28 DAYS S Specialty Drug
SPRAVATO (84 MG DOSE) 28 MG/DEVICE SOLN THPK *esketamine hcl*	3	QL 8 / 28 DAYS S Specialty Drug
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
citalopram hydrobromide 10 mg tab	1	QL 30 / 30 DAYS
citalopram hydrobromide 10 mg/5ml solution	1	QL 600 / 30 DAYS
citalopram hydrobromide 20 mg tab	1	QL 30 / 30 DAYS
citalopram hydrobromide 40 mg tab	1	QL 30 / 30 DAYS
escitalopram oxalate 10 mg tab	1	
escitalopram oxalate 20 mg tab	1	QL 30 / 30 DAYS
escitalopram oxalate 5 mg tab	1	
escitalopram oxalate 5 mg/5ml solution	1	QL 600 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluoxetine hcl 10 mg cap	1	QL 30 / 30 DAYS
fluoxetine hcl 10 mg tab	1	
fluoxetine hcl 20 mg cap	1	QL 120 / 30 DAYS
fluoxetine hcl 20 mg tab	1	
fluoxetine hcl 20 mg/5ml solution	1	
fluoxetine hcl 40 mg cap	1	QL 60 / 30 DAYS
fluoxetine hcl 60 mg tab	1	
FLUOXETINE HCL 90 MG CAP DR *fluoxetine hcl*	3	ST
fluvoxamine maleate 100 mg tab	1	
fluvoxamine maleate 25 mg tab	1	
fluvoxamine maleate 50 mg tab	1	
fluvoxamine maleate er 100 mg cap er 24h	1	
fluvoxamine maleate er 150 mg cap er 24h	1	
paroxetine hcl 10 mg tab	1	
paroxetine hcl 20 mg tab	1	
paroxetine hcl 30 mg tab	1	
paroxetine hcl 40 mg tab	1	
paroxetine hcl er 12.5 mg tab er 24h	1	QL 30 / 30 DAYS
paroxetine hcl er 25 mg tab er 24h	1	QL 60 / 30 DAYS
paroxetine hcl er 37.5 mg tab er 24h	1	QL 60 / 30 DAYS
PAXIL 10 MG/5ML SUSPENSION *paroxetine hcl*	3	ST
PEXEVA 10 MG TAB *paroxetine mesylate*	3	ST
PEXEVA 20 MG TAB *paroxetine mesylate*	3	ST
PEXEVA 30 MG TAB *paroxetine mesylate*	3	ST
PEXEVA 40 MG TAB *paroxetine mesylate*	3	ST
sertraline hcl 100 mg tab	1	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sertraline hcl 20 mg/ml conc	1	QL 300 / 30 DAYS
sertraline hcl 25 mg tab	1	QL 30 / 30 DAYS
sertraline hcl 50 mg tab	1	QL 30 / 30 DAYS
SEROTONIN MODULATORS		
trazodone hcl 100 mg tab	1	
trazodone hcl 150 mg tab	1	
trazodone hcl 300 mg tab	1	
trazodone hcl 50 mg tab	1	
TRINTELLIX 10 MG TAB *vortioxetine hbr*	3	QL 30 / 30 DAYS ST
TRINTELLIX 20 MG TAB *vortioxetine hbr*	3	QL 30 / 30 DAYS ST
TRINTELLIX 5 MG TAB *vortioxetine hbr*	3	QL 30 / 30 DAYS ST
VIIBRYD 10 MG TAB *vilazodone hcl*	3	QL 30 / 30 DAYS ST
VIIBRYD 20 MG TAB *vilazodone hcl*	3	QL 30 / 30 DAYS ST
VIIBRYD 40 MG TAB *vilazodone hcl*	3	QL 30 / 30 DAYS ST
VIIBRYD STARTER PACK 10 & 20 MG KIT *vilazodone hcl*	3	QL 1 / 180 DAYS ST
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
DESVENLAFAXINE ER 100 MG TAB ER 24H *desvenlafaxine*	3	QL 30 / 30 DAYS ST
DESVENLAFAXINE ER 50 MG TAB ER 24H *desvenlafaxine*	3	ST
desvenlafaxine succinate er 100 mg tab er 24h	1	
desvenlafaxine succinate er 25 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desvenlafaxine succinate er 50 mg tab er 24h	1	
DRIZALMA SPRINKLE 20 MG CAP DR *duloxetine hcl*	3	ST
DRIZALMA SPRINKLE 30 MG CAP DR *duloxetine hcl*	3	ST
DRIZALMA SPRINKLE 40 MG CAP DR *duloxetine hcl*	3	ST
DRIZALMA SPRINKLE 60 MG CAP DR *duloxetine hcl*	3	ST
duloxetine hcl 20 mg cp dr part	1	QL 60 / 30 DAYS
duloxetine hcl 30 mg cp dr part	1	QL 60 / 30 DAYS
duloxetine hcl 40 mg cp dr part	1	
duloxetine hcl 60 mg cp dr part	1	QL 60 / 30 DAYS
FETZIMA 120 MG CAP ER 24H *levomilnacipran hcl*	3	ST
FETZIMA 20 MG CAP ER 24H *levomilnacipran hcl*	3	ST
FETZIMA 40 MG CAP ER 24H *levomilnacipran hcl*	3	ST
FETZIMA 80 MG CAP ER 24H *levomilnacipran hcl*	3	ST
FETZIMA TITRATION 20 & 40 MG CP24 THPK *levomilnacipran hcl*	3	ST
KHEDEZLA 100 MG TAB ER 24H *desvenlafaxine*	3	ST
KHEDEZLA 50 MG TAB ER 24H *desvenlafaxine*	3	ST
venlafaxine hcl 100 mg tab	1	
venlafaxine hcl 25 mg tab	1	
venlafaxine hcl 37.5 mg tab	1	
venlafaxine hcl 50 mg tab	1	
venlafaxine hcl 75 mg tab	1	QL 90 / 30 DAYS
venlafaxine hcl er 150 mg cap er 24h	1	
venlafaxine hcl er 150 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
venlafaxine hcl er 225 mg tab er 24h	1	
venlafaxine hcl er 37.5 mg cap er 24h	1	
venlafaxine hcl er 37.5 mg tab er 24h	1	
venlafaxine hcl er 75 mg cap er 24h	1	
venlafaxine hcl er 75 mg tab er 24h	1	
TRICYCLIC AGENTS		
amitriptyline hcl 10 mg tab	1	
amitriptyline hcl 100 mg tab	1	
amitriptyline hcl 150 mg tab	1	
amitriptyline hcl 25 mg tab	1	
amitriptyline hcl 50 mg tab	1	
amitriptyline hcl 75 mg tab	1	
clomipramine hcl 25 mg cap	1	
clomipramine hcl 50 mg cap	1	
clomipramine hcl 75 mg cap	1	
desipramine hcl 10 mg tab	1	
desipramine hcl 100 mg tab	1	
desipramine hcl 150 mg tab	1	
desipramine hcl 25 mg tab	1	
desipramine hcl 50 mg tab	1	
desipramine hcl 75 mg tab	1	
doxepin hcl 10 mg cap	1	
doxepin hcl 10 mg/ml conc	1	
doxepin hcl 100 mg cap	1	
DOXEPIN HCL 150 MG CAP *doxepin hcl*	3	
doxepin hcl 25 mg cap	1	
doxepin hcl 50 mg cap	1	
doxepin hcl 75 mg cap	1	
imipramine hcl 10 mg tab	1	
imipramine hcl 25 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
imipramine hcl 50 mg tab	1	
imipramine pamoate 100 mg cap	1	
imipramine pamoate 125 mg cap	1	
imipramine pamoate 150 mg cap	1	
imipramine pamoate 75 mg cap	1	
nortriptyline hcl 10 mg cap	1	
NORTRIPTYLINE HCL 10 MG/5ML SOLUTION *nortriptyline hcl*	3	
nortriptyline hcl 10 mg/5ml solution	1	
nortriptyline hcl 25 mg cap	1	
nortriptyline hcl 50 mg cap	1	
nortriptyline hcl 75 mg cap	1	
protriptyline hcl 10 mg tab	1	
protriptyline hcl 5 mg tab	1	
trimipramine maleate 100 mg cap	1	
trimipramine maleate 25 mg cap	1	
trimipramine maleate 50 mg cap	1	
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
acarbose 100 mg tab	1	QL 90 / 30 DAYS
acarbose 25 mg tab	1	QL 360 / 30 DAYS
acarbose 50 mg tab	1	QL 180 / 30 DAYS
miglitol 100 mg tab	1	QL 90 / 30 DAYS
miglitol 25 mg tab	1	QL 90 / 30 DAYS
miglitol 50 mg tab	1	QL 90 / 30 DAYS
BIGUANIDES		
metformin hcl 1000 mg tab	1	
metformin hcl 500 mg tab	1	
metformin hcl 500 mg/5ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metformin hcl 850 mg tab	1	
metformin hcl er (mod) 1000 mg tab er 24h	1	QL 60 / 30 DAYS ST
metformin hcl er (mod) 500 mg tab er 24h	1	QL 120 / 30 DAYS ST
metformin hcl er (osm) 1000 mg tab er 24h	1	QL 60 / 30 DAYS ST
metformin hcl er (osm) 500 mg tab er 24h	1	QL 150 / 30 DAYS ST
metformin hcl er 500 mg tab er 24h	1	QL 120 / 30 DAYS
metformin hcl er 750 mg tab er 24h	1	QL 60 / 30 DAYS
RIOMET ER 500 MG/5ML SRER *metformin hcl*	3	ST
DIABETIC OTHER		
BAQSIMI ONE PACK 3 MG/DOSE POWDER *glucagon*	2	
BAQSIMI TWO PACK 3 MG/DOSE POWDER *glucagon*	2	
diazoxide 50 mg/ml suspension	1	
GLUCAGEN HYPOKIT 1 MG RECON SOLN *glucagon hcl (rdna)*	3	
GLUCAGON EMERGENCY 1 MG KIT *glucagon (rdna)*	2	
GLUCAGON EMERGENCY 1 MG/ML RECON SOLN *glucagon hcl*	2	
GVOKE HYPOPEN 1-PACK 0.5 MG/0.1ML SOLN A-INJ *glucagon*	2	
GVOKE HYPOPEN 1-PACK 1 MG/0.2ML SOLN A-INJ *glucagon*	2	
GVOKE HYPOPEN 2-PACK 0.5 MG/0.1ML SOLN A-INJ *glucagon*	2	
GVOKE HYPOPEN 2-PACK 1 MG/0.2ML SOLN A-INJ *glucagon*	2	
GVOKE PFS 0.5 MG/0.1ML SOLN PRSYR *glucagon*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GVOKE PFS 1 MG/0.2ML SOLN PRSYR *glucagon*	2	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA 100 MG TAB *sitagliptin phosphate*	2	QL 30 / 30 DAYS
JANUVIA 25 MG TAB *sitagliptin phosphate*	2	QL 30 / 30 DAYS
JANUVIA 50 MG TAB *sitagliptin phosphate*	2	QL 30 / 30 DAYS
DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS		
JANUMET 50-1000 MG TAB *sitagliptin-metformin hcl*	2	QL 60 / 30 DAYS
JANUMET 50-500 MG TAB *sitagliptin-metformin hcl*	2	QL 60 / 30 DAYS
JANUMET XR 100-1000 MG TAB ER 24H *sitagliptin-metformin hcl*	2	QL 30 / 30 DAYS
JANUMET XR 50-1000 MG TAB ER 24H *sitagliptin-metformin hcl*	2	QL 60 / 30 DAYS
JANUMET XR 50-500 MG TAB ER 24H *sitagliptin-metformin hcl*	2	QL 30 / 30 DAYS
DOPAMINE RECEPTOR AGONISTS - ERGOT DERIVATIVES		
CYCLOSET 0.8 MG TAB *bromocriptine mesylate (diabetes)*	3	QL 180 / 30 DAYS
HUMAN INSULIN		
FIASP 100 UNIT/ML SOLUTION *insulin aspart (with niacinamide)*	2	QL 100 / 30 DAYS
FIASP FLEXTOUCH 100 UNIT/ML SOLN PEN *insulin aspart (with niacinamide)*	2	QL 100 / 30 DAYS
FIASP PENFILL 100 UNIT/ML SOLN CART *insulin aspart (with niacinamide)*	2	QL 100 / 30 DAYS
HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION *insulin regular (human)*	2	QL 100 / 30 DAYS
HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN *insulin regular (human)*	2	QL 100 / 30 DAYS
LANTUS 100 UNIT/ML SOLUTION *insulin glargine*	2	QL 100 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LANTUS SOLOSTAR 100 UNIT/ML SOLN PEN *insulin glargine*	2	QL 100 / 30 DAYS
LEVEMIR 100 UNIT/ML SOLUTION *insulin detemir*	2	QL 100 / 30 DAYS
LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN *insulin detemir*	2	QL 100 / 30 DAYS
MYXREDLIN 100-0.9 UT/100ML-% SOLUTION *insulin regular (human) in sodium chloride*	3	
NOVOLIN 70/30 (70-30) 100 UNIT/ML SUSPENSION *insulin nph isophane & reg (human)*	2	QL 100 / 30 DAYS
NOVOLIN 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN *insulin nph isophane & reg (human)*	2	QL 100 / 30 DAYS
NOVOLIN 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN *insulin nph isophane & reg (human)*	2	QL 100 / 30 DAYS
NOVOLIN 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION *insulin nph isophane & reg (human)*	2	QL 100 / 30 DAYS
NOVOLIN N 100 UNIT/ML SUSPENSION *insulin nph (human) (isophane)*	2	QL 100 / 30 DAYS
NOVOLIN N FLEXPEN 100 UNIT/ML SUSP PEN *insulin nph (human) (isophane)*	2	QL 100 / 30 DAYS
NOVOLIN N FLEXPEN RELION 100 UNIT/ML SUSP PEN *insulin nph (human) (isophane)*	2	QL 100 / 30 DAYS
NOVOLIN N RELION 100 UNIT/ML SUSPENSION *insulin nph (human) (isophane)*	2	QL 100 / 30 DAYS
NOVOLIN R 100 UNIT/ML SOLUTION *insulin regular (human)*	2	QL 100 / 30 DAYS
NOVOLIN R FLEXPEN 100 UNIT/ML SOLN PEN *insulin regular (human)*	2	QL 100 / 30 DAYS
NOVOLIN R FLEXPEN RELION 100 UNIT/ML SOLN PEN *insulin regular (human)*	2	QL 100 / 30 DAYS
NOVOLIN R RELION 100 UNIT/ML SOLUTION *insulin regular (human)*	2	QL 100 / 30 DAYS
NOVOLOG 100 UNIT/ML SOLUTION *insulin aspart*	2	QL 100 / 30 DAYS
NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN *insulin aspart*	2	QL 100 / 30 DAYS
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION *insulin aspart protamine & aspart (human)*	2	QL 100 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN *insulin aspart protamine & aspart (human)*	2	QL 100 / 30 DAYS
NOVOLOG PENFILL 100 UNIT/ML SOLN CART *insulin aspart*	2	QL 100 / 30 DAYS
TOUJEO MAX SOLOSTAR 300 UNIT/ML SOLN PEN *insulin glargine*	2	QL 100 / 30 DAYS
TOUJEO SOLOSTAR 300 UNIT/ML SOLN PEN *insulin glargine*	2	QL 100 / 30 DAYS
TRESIBA 100 UNIT/ML SOLUTION *insulin degludec*	2	QL 100 / 30 DAYS
TRESIBA FLEXTOUCH 100 UNIT/ML SOLN PEN *insulin degludec*	2	QL 100 / 30 DAYS
TRESIBA FLEXTOUCH 200 UNIT/ML SOLN PEN *insulin degludec*	2	QL 100 / 30 DAYS
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
BYDUREON 2 MG PEN *exenatide*	3	QL 4 / 28 DAYS ST
BYDUREON 2 MG SRER *exenatide*	3	QL 4 / 28 DAYS ST
BYDUREON BCISE 2 MG/0.85ML A-INJ *exenatide*	3	QL 4 / 28 DAYS ST
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/1.5ML SOLN PEN *semaglutide*	2	QL 1 / 28 DAYS ST
OZEMPIC (1 MG/DOSE) 2 MG/1.5ML SOLN PEN *semaglutide*	2	QL 2 / 28 DAYS ST
RYBELSUS 14 MG TAB *semaglutide*	2	QL 30 / 30 DAYS ST
RYBELSUS 3 MG TAB *semaglutide*	2	QL 30 / 30 DAYS ST
RYBELSUS 7 MG TAB *semaglutide*	2	QL 30 / 30 DAYS ST
TRULICITY 0.75 MG/0.5ML SOLN PEN *dulaglutide*	2	QL 2 / 28 DAYS ST

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRULICITY 1.5 MG/0.5ML SOLN PEN *dulaglutide*	2	QL 2 / 28 DAYS ST
TRULICITY 3 MG/0.5ML SOLN PEN *dulaglutide*	2	ST
TRULICITY 4.5 MG/0.5ML SOLN PEN *dulaglutide*	2	ST
VICTOZA 18 MG/3ML SOLN PEN *liraglutide*	2	QL 9 / 30 DAYS ST
INSULIN-INCRETIN MIMETIC COMBINATIONS		
SOLIQUA 100-33 UNT-MCG/ML SOLN PEN *insulin glargine-lixisenatide*	2	QL 15 / 30 DAYS ST
XULTOPHY 100-3.6 UNIT-MG/ML SOLN PEN *insulin degludec-liraglutide*	2	QL 15 / 30 DAYS ST
MEGLITINIDE ANALOGUES		
nateglinide 120 mg tab	1	QL 90 / 30 DAYS
nateglinide 60 mg tab	1	QL 90 / 30 DAYS
repaglinide 0.5 mg tab	1	QL 120 / 30 DAYS
repaglinide 1 mg tab	1	QL 120 / 30 DAYS
repaglinide 2 mg tab	1	QL 240 / 30 DAYS
MEGLITINIDE-BIGUANIDE COMBINATIONS		
REPAGLINIDE-METFORMIN HCL 1-500 MG TAB *repaglinide-metformin hcl*	3	QL 150 / 30 DAYS
REPAGLINIDE-METFORMIN HCL 2-500 MG TAB *repaglinide-metformin hcl*	3	QL 150 / 30 DAYS
PROGESTERONE RECEPTOR ANTAGONISTS		
KORLYM 300 MG TAB *mifepristone (hyperglycemia)*	3	QL 120 / 30 DAYS PA S Specialty Drug
SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB		
TRIJARDY XR 10-5-1000 MG TAB ER 24H *empagliflozin-linagliptin-metformin*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H *empagliflozin-linagliptin-metformin*	2	
TRIJARDY XR 25-5-1000 MG TAB ER 24H *empagliflozin-linagliptin-metformin*	2	
TRIJARDY XR 5-2.5-1000 MG TAB ER 24H *empagliflozin-linagliptin-metformin*	2	
SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS		
GLYXAMBI 10-5 MG TAB *empagliflozin-linagliptin*	2	QL 30 / 30 DAYS
GLYXAMBI 25-5 MG TAB *empagliflozin-linagliptin*	2	QL 30 / 30 DAYS
QTERN 10-5 MG TAB *dapagliflozin-saxagliptin*	3	QL 30 / 30 DAYS
QTERN 5-5 MG TAB *dapagliflozin-saxagliptin*	3	QL 30 / 30 DAYS
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA 10 MG TAB *dapagliflozin propanediol*	2	QL 30 / 30 DAYS
FARXIGA 5 MG TAB *dapagliflozin propanediol*	2	QL 30 / 30 DAYS
INVOKANA 100 MG TAB *canagliflozin*	2	QL 30 / 30 DAYS
INVOKANA 300 MG TAB *canagliflozin*	2	QL 30 / 30 DAYS
JARDIANCE 10 MG TAB *empagliflozin*	2	QL 30 / 30 DAYS
JARDIANCE 25 MG TAB *empagliflozin*	2	QL 30 / 30 DAYS
SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB		
INVOKAMET 150-1000 MG TAB *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET 150-500 MG TAB *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET 50-1000 MG TAB *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET 50-500 MG TAB *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVOKAMET XR 150-1000 MG TAB ER 24H *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET XR 150-500 MG TAB ER 24H *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET XR 50-1000 MG TAB ER 24H *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
INVOKAMET XR 50-500 MG TAB ER 24H *canagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY 12.5-1000 MG TAB *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY 12.5-500 MG TAB *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY 5-1000 MG TAB *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY 5-500 MG TAB *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY XR 10-1000 MG TAB ER 24H *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY XR 12.5-1000 MG TAB ER 24H *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
SYNJARDY XR 25-1000 MG TAB ER 24H *empagliflozin-metformin hcl*	2	QL 30 / 30 DAYS
SYNJARDY XR 5-1000 MG TAB ER 24H *empagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
XIGDUO XR 10-1000 MG TAB ER 24H *dapagliflozin-metformin hcl*	2	QL 30 / 30 DAYS
XIGDUO XR 10-500 MG TAB ER 24H *dapagliflozin-metformin hcl*	2	QL 30 / 30 DAYS
XIGDUO XR 2.5-1000 MG TAB ER 24H *dapagliflozin-metformin hcl*	2	QL 30 / 30 DAYS
XIGDUO XR 5-1000 MG TAB ER 24H *dapagliflozin-metformin hcl*	2	QL 60 / 30 DAYS
XIGDUO XR 5-500 MG TAB ER 24H *dapagliflozin-metformin hcl*	2	QL 30 / 30 DAYS
SULFONYLUREA-BIGUANIDE COMBINATIONS		
glipizide-metformin hcl 2.5-250 mg tab	1	QL 240 / 30 DAYS
glipizide-metformin hcl 2.5-500 mg tab	1	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glipizide-metformin hcl 5-500 mg tab	1	QL 120 / 30 DAYS
glyburide-metformin 1.25-250 mg tab	1	QL 240 / 30 DAYS
glyburide-metformin 2.5-500 mg tab	1	QL 120 / 30 DAYS
glyburide-metformin 5-500 mg tab	1	QL 120 / 30 DAYS
SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS		
pioglitazone hcl-glimepiride 30-2 mg tab	1	QL 30 / 30 DAYS
pioglitazone hcl-glimepiride 30-4 mg tab	1	QL 30 / 30 DAYS
SULFONYLUREAS		
CHLORPROPAMIDE 100 MG TAB *chlorpropamide*	3	
CHLORPROPAMIDE 250 MG TAB *chlorpropamide*	3	QL 90 / 30 DAYS
glimepiride 1 mg tab	1	
glimepiride 2 mg tab	1	
glimepiride 4 mg tab	1	
glipizide 10 mg tab	1	
glipizide 5 mg tab	1	
glipizide er 10 mg tab er 24h	1	
glipizide er 2.5 mg tab er 24h	1	
glipizide er 5 mg tab er 24h	1	
glipizide xl 10 mg tab er 24h	1	
glipizide xl 2.5 mg tab er 24h	1	
glipizide xl 5 mg tab er 24h	1	
glyburide 1.25 mg tab	1	
glyburide 2.5 mg tab	1	
glyburide 5 mg tab	1	
glyburide micronized 1.5 mg tab	1	
glyburide micronized 3 mg tab	1	
glyburide micronized 6 mg tab	1	
TOLAZAMIDE 250 MG TAB *tolazamide*	3	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOLAZAMIDE 500 MG TAB *tolazamide*	3	QL 60 / 30 DAYS
TOLBUTAMIDE 500 MG TAB *tolbutamide*	3	QL 180 / 30 DAYS
THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS		
ACTOPLUS MET XR 15-1000 MG TAB ER 24H *pioglitazone hcl-metformin hcl*	3	QL 90 / 30 DAYS
ACTOPLUS MET XR 30-1000 MG TAB ER 24H *pioglitazone hcl-metformin hcl*	3	QL 30 / 30 DAYS
pioglitazone hcl-metformin hcl 15-500 mg tab	1	QL 90 / 30 DAYS
pioglitazone hcl-metformin hcl 15-850 mg tab	1	QL 90 / 30 DAYS
THIAZOLIDINEDIONES		
AVANDIA 2 MG TAB *rosiglitazone maleate*	3	QL 90 / 30 DAYS
AVANDIA 4 MG TAB *rosiglitazone maleate*	3	QL 60 / 30 DAYS
pioglitazone hcl 15 mg tab	1	QL 30 / 30 DAYS
pioglitazone hcl 30 mg tab	1	QL 30 / 30 DAYS
pioglitazone hcl 45 mg tab	1	QL 30 / 30 DAYS
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI 125 MG TAB DR *crofelemer*	3	
ANTIPERISTALTIC AGENTS		
diphenoxylate-atropine 2.5-0.025 mg tab	1	
DIPHENOXYLATE-ATROPINE 2.5-0.025 MG/5ML LIQUID *diphenoxylate w/ atropine*	3	
loperamide hcl 2 mg cap	1	
MOTOFEN 1-0.025 MG TAB *difenoxin w/ atropine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTE COMBINATIONS		
DUODOTE 2.1-600 MG SOLN A-INJ *atropine-pralidoxime chloride*	3	
NITHIODOTE 300MG/10ML&12.5 GM/50ML KIT *sodium nitrite-sodium thiosulfate*	3	
ANTIDOTES - CHELATING AGENTS		
CHEMET 100 MG CAP *succimer*	2	
deferasirox 125 mg tab sol	1	S Specialty Drug
deferasirox 180 mg tab	1	S Specialty Drug
deferasirox 250 mg tab sol	1	S Specialty Drug
deferasirox 360 mg tab	1	S Specialty Drug
deferasirox 500 mg tab sol	1	S Specialty Drug
deferasirox 90 mg tab	1	S Specialty Drug
deferasirox granules 180 mg packet	1	S Specialty Drug
deferasirox granules 360 mg packet	1	S Specialty Drug
deferasirox granules 90 mg packet	1	S Specialty Drug
deferiprone 500 mg tab	1	S Specialty Drug
FERRIPROX 100 MG/ML SOLUTION *deferiprone*	3	S Specialty Drug
FERRIPROX 1000 MG TAB *deferiprone*	3	S Specialty Drug
FERRIPROX 500 MG TAB *deferiprone*	3	S Specialty Drug
FERRIPROX TWICE-A-DAY 1000 MG TAB *deferiprone*	3	S Specialty Drug
JADENU SPRINKLE 180 MG PACKET *deferasirox*	3	S Specialty Drug
JADENU SPRINKLE 360 MG PACKET *deferasirox*	3	S Specialty Drug
JADENU SPRINKLE 90 MG PACKET *deferasirox*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTETATE CALCIUM TRISODIUM 200 MG/ML SOLUTION *pentetate calcium trisodium*	1	
PENTETATE ZINC TRISODIUM 200 MG/ML SOLUTION *pentetate zinc trisodium*	1	
ACETADOTE 200 MG/ML SOLUTION *acetylcysteine (antidote)*	3	
acetylcysteine 200 mg/ml solution	1	
ANDEXXA 100 MG RECON SOLN *coagulation factor xa recomb inact-zhzo (andexanet alfa)*	3	S Specialty Drug
ANDEXXA 200 MG RECON SOLN *coagulation factor xa recomb inact-zhzo (andexanet alfa)*	3	S Specialty Drug
BAL IN OIL 100 MG/ML SOLUTION *dimercaprol*	3	
BRIDION 200 MG/2ML SOLUTION *sugammadex sodium*	3	
BRIDION 500 MG/5ML SOLUTION *sugammadex sodium*	3	
CALCIUM DISODIUM VERSENATE 1 GM/5ML SOLUTION *edetate calcium disodium*	1	
CETYLEV 2.5 GM EFFER TAB *acetylcysteine (antidote)*	3	
CETYLEV 500 MG EFFER TAB *acetylcysteine (antidote)*	3	
CYANOKIT 5 GM RECON SOLN *hydroxocobalamin (antidote)*	3	
deferoxamine mesylate 2 gm recon soln	1	
deferoxamine mesylate 500 mg recon soln	1	
DESFERAL 500 MG RECON SOLN *deferoxamine mesylate*	3	
DIGIFAB 40 MG RECON SOLN *digoxin immune fab*	3	
fomepizole 1.5 gm/1.5ml solution	1	
PRALIDOXIME CHLORIDE 600 MG/2ML SOLN A-INJ *pralidoxime chloride*	1	
PRAXBIND 2.5 GM/50ML SOLUTION *idarucizumab*	3	S Specialty Drug
PROTOPAM CHLORIDE 1 GM RECON SOLN *pralidoxime chloride*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROVAYBLUE 50 MG/10ML SOLUTION *methylene blue (antidote)*	3	
RADIOGARDASE 0.5 GM CAP *prussian blue insoluble (ferric hexacyanoferrate ii)*	3	
SODIUM NITRITE 30 MG/ML SOLUTION *sodium nitrite*	1	
SODIUM THIOSULFATE 25 % SOLUTION *sodium thiosulfate*	1	
VISTOGARD 10 GM PACKET *uridine triacetate (emergency treatment)*	3	S Specialty Drug
BENZODIAZEPINE ANTAGONISTS		
flumazenil 0.5 mg/5ml solution	1	
flumazenil 1 mg/10ml solution	1	
OPIOID ANTAGONISTS		
NALOXONE HCL 0.4 MG/ML SOLN CART *naloxone hcl*	3	
naloxone hcl 0.4 mg/ml solution	1	
NALOXONE HCL 2 MG/0.4ML SOLN A-INJ *naloxone hcl*	3	
naloxone hcl 2 mg/2ml soln prsyr	1	
naloxone hcl 4 mg/10ml solution	1	
naltrexone hcl 50 mg tab	1	
NARCAN 4 MG/0.1ML LIQUID *naloxone hcl*	2	QL 2 / 30 DAYS
VIVITROL 380 MG RECON SUSP *naltrexone*	3	S Specialty Drug
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ALOXI 0.25 MG/5ML SOLUTION *palonosetron hcl*	3	
ANZEMET 100 MG TAB *dolasetron mesylate*	3	QL 7 / 30 DAYS
ANZEMET 50 MG TAB *dolasetron mesylate*	3	QL 7 / 30 DAYS
GRANISETRON HCL 0.1 MG/ML SOLUTION *granisetron hcl*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
granisetron hcl 1 mg tab	1	QL 14 / 30 DAYS
granisetron hcl 1 mg/ml solution	1	
granisetron hcl 4 mg/4ml solution	1	
ondansetron 4 mg tab disp	1	QL 21 / 30 DAYS
ondansetron 8 mg tab disp	1	QL 21 / 30 DAYS
ONDANSETRON HCL 24 MG TAB *ondansetron hcl*	3	QL 1 / 30 DAYS
ondansetron hcl 24 mg tab	1	QL 1 / 30 DAYS
ondansetron hcl 4 mg tab	1	QL 21 / 30 DAYS
ondansetron hcl 4 mg/2ml solution	1	
ondansetron hcl 4 mg/5ml solution	1	QL 100 / 30 DAYS
ondansetron hcl 40 mg/20ml solution	1	
ondansetron hcl 8 mg tab	1	QL 21 / 30 DAYS
PALONOSETRON HCL 0.25 MG/2ML SOLUTION *palonosetron hcl*	1	
palonosetron hcl 0.25 mg/5ml soln prsyr	1	
PALONOSETRON HCL 0.25 MG/5ML SOLUTION *palonosetron hcl*	1	
palonosetron hcl 0.25 mg/5ml solution	1	
SANCUSO 3.1 MG/24HR PATCH *granisetron*	3	QL 2 / 30 DAYS
SUSTOL 10 MG/0.4ML PRSYR *granisetron*	3	
ZUPLENZ 4 MG FILM *ondansetron*	3	QL 20 / 30 DAYS
ZUPLENZ 8 MG FILM *ondansetron*	3	QL 20 / 30 DAYS
ANTIEMETIC COMBINATIONS		
AKYNZEO 235-0.25 MG RECON SOLN *fosnetupitant choride-palonosetron hcl*	3	
AKYNZEO 235-0.25 MG/20ML SOLUTION *fosnetupitant choride-palonosetron hcl*	3	
BONJESTA 20-20 MG TAB ER *doxylamine-pyridoxine*	3	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
doxylamine-pyridoxine 10-10 mg tab dr	1	QL 120 / 30 DAYS
ANTIEMETICS - ANTICHOLINERGIC		
DIMENHYDRINATE 50 MG/ML SOLUTION *dimenhydrinate*	1	
meclizine hcl 12.5 mg tab	1	
meclizine hcl 25 mg tab	1	
scopolamine 1 mg/3days patch 72hr	1	
TIGAN 100 MG/ML SOLUTION *trimethobenzamide hcl*	3	
trimethobenzamide hcl 300 mg cap	1	
ANTIEMETICS - MISCELLANEOUS		
CESAMET 1 MG CAP *nabilone*	3	QL 42 / 30 DAYS
dronabinol 10 mg cap	1	QL 150 / 30 DAYS
dronabinol 2.5 mg cap	1	QL 150 / 30 DAYS
dronabinol 5 mg cap	1	QL 150 / 30 DAYS
SYNDROS 5 MG/ML SOLUTION *dronabinol*	3	QL 390 / 30 DAYS AL1 At least 18 yrs old
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant 125 mg cap	1	QL 2 / 30 DAYS
aprepitant 40 mg cap	1	QL 2.4 / 30 DAYS
aprepitant 80 & 125 mg cap	1	QL 6 / 30 DAYS
aprepitant 80 mg cap	1	QL 4 / 30 DAYS
CINVANTI 130 MG/18ML EMULSION *aprepitant*	3	
EMEND 125 MG/5ML RECON SUSP *aprepitant*	2	QL 6 / 30 DAYS
EMEND 150 MG RECON SOLN *fosaprepitant dimeglumine*	3	QL 2 / Rx
FOSAPREPITANT DIMEGLUMINE 150 MG RECON SOLN *fosaprepitant dimeglumine*	1	QL 2 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fosaprepitant dimeglumine 150 mg recon soln	1	QL 2 / Rx
VARUBI (180 MG DOSE) 2 X 90 MG TAB THPK *rolapitant hcl*	2	QL 4 / 30 DAYS
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
CANCIDAS 50 MG RECON SOLN *caspofungin acetate*	3	
CANCIDAS 70 MG RECON SOLN *caspofungin acetate*	3	
CASPOFUNGIN ACETATE 50 MG RECON SOLN *caspofungin acetate*	1	
caspofungin acetate 50 mg recon soln	1	
CASPOFUNGIN ACETATE 70 MG RECON SOLN *caspofungin acetate*	1	
caspofungin acetate 70 mg recon soln	1	
ERAXIS 100 MG RECON SOLN *anidulafungin*	3	
ERAXIS 50 MG RECON SOLN *anidulafungin*	3	
micafungin sodium 100 mg recon soln	1	
micafungin sodium 50 mg recon soln	1	
MYCAMINE 100 MG RECON SOLN *micafungin sodium*	3	
MYCAMINE 50 MG RECON SOLN *micafungin sodium*	3	
ABELCET 5 MG/ML SUSPENSION *amphotericin b lipid*	3	
AMBISOME 50 MG RECON SUSP *amphotericin b liposome*	3	
AMPHOTERICIN B 50 MG RECON SOLN *amphotericin b*	1	
flucytosine 250 mg cap	1	
flucytosine 500 mg cap	1	
griseofulvin microsize 125 mg/5ml suspension	1	
griseofulvin microsize 500 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
griseofulvin ultramicrosize 125 mg tab	1	
griseofulvin ultramicrosize 250 mg tab	1	
nystatin 500000 unit tab	1	
terbinafine hcl 250 mg tab	1	
TRIAZOLES		
CRESEMBA 186 MG CAP *isavuconazonium sulfate*	3	PA
CRESEMBA 372 MG RECON SOLN *isavuconazonium sulfate*	3	PA
fluconazole 10 mg/ml recon susp	1	
fluconazole 100 mg tab	1	
fluconazole 150 mg tab	1	QL 30 / 30 DAYS
fluconazole 200 mg tab	1	
fluconazole 40 mg/ml recon susp	1	
fluconazole 50 mg tab	1	
fluconazole in sodium chloride 200-0.9 mg/100ml-% solution	1	
fluconazole in sodium chloride 400-0.9 mg/200ml-% solution	1	
itraconazole 10 mg/ml solution	1	
itraconazole 100 mg cap	1	
NOXAFIL 300 MG/16.7ML SOLUTION *posaconazole*	3	PA
NOXAFIL 40 MG/ML SUSPENSION *posaconazole*	2	PA
posaconazole 100 mg tab dr	1	PA
TOLSURA 65 MG CAP *itraconazole*	3	
VFEND IV 200 MG RECON SOLN *voriconazole*	3	PA
voriconazole 200 mg recon soln	1	PA
voriconazole 200 mg tab	1	QL 120 / 30 DAYS PA
voriconazole 40 mg/ml recon susp	1	QL 600 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
voriconazole 50 mg tab	1	QL 120 / 30 DAYS PA
ANTIHISTAMINES		
ANTIHISTAMINES - ALKYLAMINES		
DEXCHLORPHENIRAMINE MALEATE 2 MG/5ML SOLUTION *dexchlorpheniramine maleate*	3	AL1 At least 2 yrs old
RYCLORA 2 MG/5ML SOLUTION *dexchlorpheniramine maleate*	3	AL1 At least 2 yrs old
ANTIHISTAMINES - ETHANOLAMINES		
CARBINOXAMINE MALEATE 4 MG TAB *carbinoxamine maleate*	3	AL1 At least 6 yrs old
carbinoxamine maleate 4 mg tab	1	AL1 At least 6 yrs old
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION *carbinoxamine maleate*	3	AL1 At least 2 yrs old
carbinoxamine maleate 4 mg/5ml solution	1	AL1 At least 2 yrs old
CARBINOXAMINE MALEATE 6 MG TAB *carbinoxamine maleate*	3	AL1 At least 6 yrs old
CLEMASTINE FUMARATE 2.68 MG TAB *clemastine fumarate*	3	AL1 At least 2 yrs old
diphen 12.5 mg/5ml elixir	1	
diphenhydramine hcl 12.5 mg/5ml elixir	1	
diphenhydramine hcl 50 mg/ml solution	1	
KARBINAL ER 4 MG/5ML SUSP *carbinoxamine maleate*	3	AL1 At least 2 yrs old
RYVENT 6 MG TAB *carbinoxamine maleate*	3	AL1 At least 6 yrs old
ANTIHISTAMINES - NON-SEDATING		
cetirizine hcl 1 mg/ml solution	1	QL 300 / 30 DAYS
cetirizine hcl 5 mg/5ml solution	1	QL 300 / 30 DAYS
CLARINEX 0.5 MG/ML SYRUP *desloratadine*	3	QL 300 / 30 DAYS
DESLORATADINE 2.5 MG TAB DISP *desloratadine*	3	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desloratadine 5 mg tab	1	QL 30 / 30 DAYS
DESLORATADINE 5 MG TAB DISP *desloratadine*	3	QL 30 / 30 DAYS
levocetirizine dihydrochloride 2.5 mg/5ml solution	1	QL 900 / 30 DAYS
levocetirizine dihydrochloride 5 mg tab	1	QL 30 / 30 DAYS
QUZYTTIR 10 MG/ML SOLUTION *cetirizine hcl*	3	
ANTIHISTAMINES - PHENOTHIAZINES		
phenadoz 12.5 mg suppos	1	AL1 At least 2 yrs old
phenadoz 25 mg suppos	1	AL1 At least 2 yrs old
PHENERGAN 25 MG/ML SOLUTION *promethazine hcl*	3	AL1 At least 2 yrs old
PHENERGAN 50 MG/ML SOLUTION *promethazine hcl*	3	AL1 At least 2 yrs old
promethazine hcl 12.5 mg suppos	1	AL1 At least 2 yrs old
promethazine hcl 12.5 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 25 mg suppos	1	AL1 At least 2 yrs old
promethazine hcl 25 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 25 mg/ml solution	1	AL1 At least 2 yrs old
promethazine hcl 50 mg suppos	1	AL1 At least 2 yrs old
promethazine hcl 50 mg tab	1	AL1 At least 2 yrs old
promethazine hcl 50 mg/ml solution	1	AL1 At least 2 yrs old
promethazine hcl 6.25 mg/5ml solution	1	AL1 At least 2 yrs old
promethazine hcl 6.25 mg/5ml syrup	1	AL1 At least 2 yrs old
promethegan 12.5 mg suppos	1	AL1 At least 2 yrs old
promethegan 25 mg suppos	1	AL1 At least 2 yrs old
PROMETHEGAN 50 MG SUPPOS *promethazine hcl*	3	AL1 At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIHISTAMINES - PIPERIDINES		
cyproheptadine hcl 2 mg/5ml syrup	1	AL1 At least 2 yrs old
cyproheptadine hcl 4 mg tab	1	AL1 At least 2 yrs old
ANTIHYPERLIPIDEMICS		
ACL INHIB-INTESTINAL CHOLESTEROL ABSORPTION INHIB COMB		
NEXLIZET 180-10 MG TAB *bempedoic acid-ezetimibe*	2	PA
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180 MG TAB *bempedoic acid*	2	PA
ANTIHYPERLIPIDEMICS - MISC.		
VASCEPA 0.5 GM CAP *icosapent ethyl*	2	QL 120 / 30 DAYS
VASCEPA 1 GM CAP *icosapent ethyl*	2	QL 120 / 30 DAYS
BILE ACID SEQUESTRANTS		
cholestyramine 4 gm packet	1	QL 120 / 30 DAYS
cholestyramine 4 gm/dose powder	1	QL 720 / 30 DAYS
cholestyramine light 4 gm packet	1	QL 120 / 30 DAYS
cholestyramine light 4 gm/dose powder	1	QL 720 / 30 DAYS
colesevelam hcl 3.75 gm packet	1	QL 30 / 30 DAYS
colesevelam hcl 625 mg tab	1	QL 180 / 30 DAYS
colestipol hcl 1 gm tab	1	QL 120 / 30 DAYS
colestipol hcl 5 gm granules	1	QL 180 / 30 DAYS
colestipol hcl 5 gm packet	1	QL 180 / 30 DAYS
prevalite 4 gm packet	1	QL 120 / 30 DAYS
prevalite 4 gm/dose powder	1	QL 720 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIBRIC ACID DERIVATIVES		
ANTARA 30 MG CAP *fenofibrate micronized*	3	QL 60 / 30 DAYS
ANTARA 90 MG CAP *fenofibrate micronized*	3	QL 30 / 30 DAYS
fenofibrate 120 mg tab	1	QL 30 / 30 DAYS
fenofibrate 134 mg cap	1	QL 30 / 30 DAYS
fenofibrate 145 mg tab	1	QL 30 / 30 DAYS
FENOFIBRATE 150 MG CAP *fenofibrate*	3	QL 30 / 30 DAYS
fenofibrate 160 mg tab	1	QL 30 / 30 DAYS
fenofibrate 200 mg cap	1	QL 30 / 30 DAYS
fenofibrate 40 mg tab	1	QL 60 / 30 DAYS
fenofibrate 48 mg tab	1	QL 60 / 30 DAYS
FENOFIBRATE 50 MG CAP *fenofibrate*	3	QL 60 / 30 DAYS
fenofibrate 54 mg tab	1	QL 60 / 30 DAYS
fenofibrate 67 mg cap	1	QL 30 / 30 DAYS
fenofibrate micronized 130 mg cap	1	QL 30 / 30 DAYS
fenofibrate micronized 134 mg cap	1	QL 30 / 30 DAYS
fenofibrate micronized 200 mg cap	1	QL 30 / 30 DAYS
fenofibrate micronized 43 mg cap	1	QL 60 / 30 DAYS
fenofibrate micronized 67 mg cap	1	QL 30 / 30 DAYS
FENOFIBRIC ACID 105 MG TAB *fenofibric acid*	3	QL 30 / 30 DAYS
fenofibric acid 135 mg cap dr	1	QL 30 / 30 DAYS
FENOFIBRIC ACID 35 MG TAB *fenofibric acid*	3	QL 60 / 30 DAYS
fenofibric acid 45 mg cap dr	1	QL 60 / 30 DAYS
FIBRICOR 105 MG TAB *fenofibric acid*	3	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIBRICOR 35 MG TAB *fenofibric acid*	3	QL 60 / 30 DAYS
gemfibrozil 600 mg tab	1	QL 60 / 30 DAYS
LIPOFEN 150 MG CAP *fenofibrate*	2	QL 30 / 30 DAYS
LIPOFEN 50 MG CAP *fenofibrate*	2	QL 60 / 30 DAYS
TRIGLIDE 160 MG TAB *fenofibrate*	3	QL 30 / 30 DAYS
HMG COA REDUCTASE INHIBITORS		
ALTOPREV 20 MG TAB ER 24H *lovastatin*	3	
ALTOPREV 40 MG TAB ER 24H *lovastatin*	3	
ALTOPREV 60 MG TAB ER 24H *lovastatin*	3	
atorvastatin calcium 10 mg tab	1	ACA Affordable Care Act
atorvastatin calcium 20 mg tab	1	ACA Affordable Care Act
atorvastatin calcium 40 mg tab	1	
atorvastatin calcium 80 mg tab	1	
FLOLIPID 20 MG/5ML SUSPENSION *simvastatin*	3	
FLOLIPID 40 MG/5ML SUSPENSION *simvastatin*	3	
fluvastatin sodium 20 mg cap	1	
fluvastatin sodium 40 mg cap	1	
fluvastatin sodium er 80 mg tab er 24h	1	
lovastatin 10 mg tab	1	ACA Affordable Care Act
lovastatin 20 mg tab	1	ACA Affordable Care Act
lovastatin 40 mg tab	1	ACA Affordable Care Act
pravastatin sodium 10 mg tab	1	ACA Affordable Care Act
pravastatin sodium 20 mg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pravastatin sodium 40 mg tab	1	ACA Affordable Care Act
pravastatin sodium 80 mg tab	1	ACA Affordable Care Act
rosuvastatin calcium 10 mg tab	1	ACA Affordable Care Act
rosuvastatin calcium 20 mg tab	1	
rosuvastatin calcium 40 mg tab	1	
rosuvastatin calcium 5 mg tab	1	ACA Affordable Care Act
simvastatin 10 mg tab	1	ACA Affordable Care Act
simvastatin 20 mg tab	1	ACA Affordable Care Act
SIMVASTATIN 20 MG/5ML SUSPENSION *simvastatin*	3	
simvastatin 40 mg tab	1	ACA Affordable Care Act
simvastatin 5 mg tab	1	ACA Affordable Care Act
simvastatin 80 mg tab	1	
INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB		
ezetimibe-simvastatin 10-10 mg tab	1	QL 30 / 30 DAYS
ezetimibe-simvastatin 10-20 mg tab	1	QL 30 / 30 DAYS
ezetimibe-simvastatin 10-40 mg tab	1	QL 30 / 30 DAYS
ezetimibe-simvastatin 10-80 mg tab	1	QL 30 / 30 DAYS
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
ezetimibe 10 mg tab	1	QL 30 / 30 DAYS
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS		
JUXTAPID 10 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug
JUXTAPID 20 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug
JUXTAPID 30 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JUXTAPID 40 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug
JUXTAPID 5 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug
JUXTAPID 60 MG CAP *lomitapide mesylate*	3	QL 30 / 30 DAYS PA S Specialty Drug
NICOTINIC ACID DERIVATIVES		
NIACIN (ANTIHYPERLIPIDEMIC) 500 MG TAB *niacin (antihyperlipidemic)*	3	
niacin er (antihyperlipidemic) 1000 mg tab er	1	QL 60 / 30 DAYS
niacin er (antihyperlipidemic) 500 mg tab er	1	QL 90 / 30 DAYS
niacin er (antihyperlipidemic) 750 mg tab er	1	QL 60 / 30 DAYS
NIACOR 500 MG TAB *niacin (antihyperlipidemic)*	3	QL 360 / 30 DAYS
PCSK9 INHIBITORS		
REPATHA 140 MG/ML SOLN PRSYR *evolocumab*	2	QL 2 / 28 DAYS
REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART *evolocumab*	2	QL 3.5 / 30 DAYS
REPATHA SURECLICK 140 MG/ML SOLN A-INJ *evolocumab*	2	QL 2 / 28 DAYS
ANTIHYPERTENSIVES		
ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS		
amlodipine besy-benazepril hcl 10-20 mg cap	1	
amlodipine besy-benazepril hcl 10-40 mg cap	1	
amlodipine besy-benazepril hcl 2.5-10 mg cap	1	
amlodipine besy-benazepril hcl 5-10 mg cap	1	
amlodipine besy-benazepril hcl 5-20 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine besy-benazepril hcl 5-40 mg cap	1	
PRESTALIA 14-10 MG TAB *perindopril arginine-amlodipine besylate*	3	
PRESTALIA 3.5-2.5 MG TAB *perindopril arginine-amlodipine besylate*	3	
PRESTALIA 7-5 MG TAB *perindopril arginine-amlodipine besylate*	3	
TRANDOLAPRIL-VERAPAMIL HCL ER 1-240 MG TAB ER *trandolapril-verapamil hcl*	3	
trandolapril-verapamil hcl er 2-180 mg tab er	1	
trandolapril-verapamil hcl er 2-240 mg tab er	1	
trandolapril-verapamil hcl er 4-240 mg tab er	1	
ACE INHIBITORS		
benazepril hcl 10 mg tab	1	
benazepril hcl 20 mg tab	1	
benazepril hcl 40 mg tab	1	
benazepril hcl 5 mg tab	1	
captopril 100 mg tab	1	
captopril 12.5 mg tab	1	
captopril 25 mg tab	1	
captopril 50 mg tab	1	
enalapril maleate 10 mg tab	1	
enalapril maleate 2.5 mg tab	1	
enalapril maleate 20 mg tab	1	
enalapril maleate 5 mg tab	1	
enalaprilat 1.25 mg/ml injectable	1	
EPANED 1 MG/ML SOLUTION *enalapril maleate*	3	
fosinopril sodium 10 mg tab	1	
fosinopril sodium 20 mg tab	1	
fosinopril sodium 40 mg tab	1	
lisinopril 10 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lisinopril 2.5 mg tab	1	
lisinopril 20 mg tab	1	
lisinopril 30 mg tab	1	
lisinopril 40 mg tab	1	
lisinopril 5 mg tab	1	
moexipril hcl 15 mg tab	1	
moexipril hcl 7.5 mg tab	1	
perindopril erbumine 2 mg tab	1	
perindopril erbumine 4 mg tab	1	
perindopril erbumine 8 mg tab	1	
QBRELIS 1 MG/ML SOLUTION *lisinopril*	3	
quinapril hcl 10 mg tab	1	
quinapril hcl 20 mg tab	1	
quinapril hcl 40 mg tab	1	
quinapril hcl 5 mg tab	1	
ramipril 1.25 mg cap	1	
ramipril 10 mg cap	1	
ramipril 2.5 mg cap	1	
ramipril 5 mg cap	1	
trandolapril 1 mg tab	1	
trandolapril 2 mg tab	1	
trandolapril 4 mg tab	1	
ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE		
benazepril-hydrochlorothiazide 10-12.5 mg tab	1	
benazepril-hydrochlorothiazide 20-12.5 mg tab	1	
benazepril-hydrochlorothiazide 20-25 mg tab	1	
benazepril-hydrochlorothiazide 5-6.25 mg tab	1	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-15 MG TAB *captopril & hydrochlorothiazide*	3	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-25 MG TAB *captopril & hydrochlorothiazide*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-15 MG TAB *captopril & hydrochlorothiazide*	3	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-25 MG TAB *captopril & hydrochlorothiazide*	3	
enalapril-hydrochlorothiazide 10-25 mg tab	1	
enalapril-hydrochlorothiazide 5-12.5 mg tab	1	
fosinopril sodium-hctz 10-12.5 mg tab	1	
fosinopril sodium-hctz 20-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 10-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 20-12.5 mg tab	1	
lisinopril-hydrochlorothiazide 20-25 mg tab	1	
moexipril-hydrochlorothiazide 15-12.5 mg tab	1	
moexipril-hydrochlorothiazide 15-25 mg tab	1	
moexipril-hydrochlorothiazide 7.5-12.5 mg tab	1	
quinapril-hydrochlorothiazide 10-12.5 mg tab	1	
quinapril-hydrochlorothiazide 20-12.5 mg tab	1	
quinapril-hydrochlorothiazide 20-25 mg tab	1	
ADRENOLYTICS-CENTRAL & THIAZIDE/THIAZIDE-LIKE COMB		
METHYLDOPA-HYDROCHLOROTHIAZIDE 250-15 MG TAB *methyldopa & hydrochlorothiazide*	3	
METHYLDOPA-HYDROCHLOROTHIAZIDE 250-25 MG TAB *methyldopa & hydrochlorothiazide*	3	
AGENTS FOR PHEOCHROMOCYTOMA		
DEMSER 250 MG CAP *metyrosine*	3	S Specialty Drug
metyrosine 250 mg cap	1	S Specialty Drug
phenoxybenzamine hcl 10 mg cap	1	
phentolamine mesylate 5 mg recon soln	1	
ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES		
amlodipine-valsartan-hctz 10-160-12.5 mg tab	1	
amlodipine-valsartan-hctz 10-160-25 mg tab	1	
amlodipine-valsartan-hctz 10-320-25 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine-valsartan-hctz 5-160-12.5 mg tab	1	
amlodipine-valsartan-hctz 5-160-25 mg tab	1	
olmesartan-amlodipine-hctz 20-5-12.5 mg tab	1	
olmesartan-amlodipine-hctz 40-10-12.5 mg tab	1	
olmesartan-amlodipine-hctz 40-10-25 mg tab	1	
olmesartan-amlodipine-hctz 40-5-12.5 mg tab	1	
olmesartan-amlodipine-hctz 40-5-25 mg tab	1	
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB		
amlodipine besylate-valsartan 10-160 mg tab	1	
amlodipine besylate-valsartan 10-320 mg tab	1	
amlodipine besylate-valsartan 5-160 mg tab	1	
amlodipine besylate-valsartan 5-320 mg tab	1	
amlodipine-olmesartan 10-20 mg tab	1	
amlodipine-olmesartan 10-40 mg tab	1	
amlodipine-olmesartan 5-20 mg tab	1	
amlodipine-olmesartan 5-40 mg tab	1	
telmisartan-amlodipine 40-10 mg tab	1	
telmisartan-amlodipine 40-5 mg tab	1	
telmisartan-amlodipine 80-10 mg tab	1	
telmisartan-amlodipine 80-5 mg tab	1	
ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE		
candesartan cilexetil-hctz 16-12.5 mg tab	1	
candesartan cilexetil-hctz 32-12.5 mg tab	1	
candesartan cilexetil-hctz 32-25 mg tab	1	
EDARBYCLOR 40-12.5 MG TAB *azilsartan medoxomil-chlorthalidone*	3	
EDARBYCLOR 40-25 MG TAB *azilsartan medoxomil-chlorthalidone*	3	
irbesartan-hydrochlorothiazide 150-12.5 mg tab	1	
irbesartan-hydrochlorothiazide 300-12.5 mg tab	1	
losartan potassium-hctz 100-12.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
losartan potassium-hctz 100-25 mg tab	1	
losartan potassium-hctz 50-12.5 mg tab	1	
olmesartan medoxomil-hctz 20-12.5 mg tab	1	
olmesartan medoxomil-hctz 40-12.5 mg tab	1	
olmesartan medoxomil-hctz 40-25 mg tab	1	
telmisartan-hctz 40-12.5 mg tab	1	
telmisartan-hctz 80-12.5 mg tab	1	
telmisartan-hctz 80-25 mg tab	1	
valsartan-hydrochlorothiazide 160-12.5 mg tab	1	
valsartan-hydrochlorothiazide 160-25 mg tab	1	
valsartan-hydrochlorothiazide 320-12.5 mg tab	1	
valsartan-hydrochlorothiazide 320-25 mg tab	1	
valsartan-hydrochlorothiazide 80-12.5 mg tab	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan cilexetil 16 mg tab	1	
candesartan cilexetil 32 mg tab	1	
candesartan cilexetil 4 mg tab	1	
candesartan cilexetil 8 mg tab	1	
EDARBI 40 MG TAB *azilsartan medoxomil*	3	
EDARBI 80 MG TAB *azilsartan medoxomil*	3	
EPROSARTAN MESYLATE 600 MG TAB *eprosartan mesylate*	3	
irbesartan 150 mg tab	1	
irbesartan 300 mg tab	1	
irbesartan 75 mg tab	1	
losartan potassium 100 mg tab	1	
losartan potassium 25 mg tab	1	
losartan potassium 50 mg tab	1	
olmesartan medoxomil 20 mg tab	1	
olmesartan medoxomil 40 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olmesartan medoxomil 5 mg tab	1	
telmisartan 20 mg tab	1	
telmisartan 40 mg tab	1	
telmisartan 80 mg tab	1	
valsartan 160 mg tab	1	
valsartan 320 mg tab	1	
valsartan 40 mg tab	1	
valsartan 80 mg tab	1	
ANTIADRENERGICS - CENTRALLY ACTING		
clonidine 0.1 mg/24hr patch wk	1	
clonidine 0.2 mg/24hr patch wk	1	
clonidine 0.3 mg/24hr patch wk	1	
clonidine hcl 0.1 mg tab	1	
clonidine hcl 0.2 mg tab	1	
clonidine hcl 0.3 mg tab	1	
guanfacine hcl 1 mg tab	1	
guanfacine hcl 2 mg tab	1	
methyldopa 250 mg tab	1	
methyldopa 500 mg tab	1	
METHYLDOPATE HCL 250 MG/5ML SOLUTION *methyldopate hcl*	1	
ANTIADRENERGICS - PERIPHERALLY ACTING		
doxazosin mesylate 1 mg tab	1	
doxazosin mesylate 2 mg tab	1	
doxazosin mesylate 4 mg tab	1	
doxazosin mesylate 8 mg tab	1	
prazosin hcl 1 mg cap	1	
prazosin hcl 2 mg cap	1	
prazosin hcl 5 mg cap	1	
terazosin hcl 1 mg cap	1	
terazosin hcl 10 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
terazosin hcl 2 mg cap	1	
terazosin hcl 5 mg cap	1	
ANTIHYPERTENSIVES - MISC.		
VECAMYL 2.5 MG TAB *mecamylamine hcl*	3	S Specialty Drug
BETA BLOCKER & ANGIOTENSIN II RECEPTOR ANTAGONIST COMB		
BYVALSON 5-80 MG TAB *nebivolol-valsartan*	3	
BETA BLOCKER & DIURETIC COMBINATIONS		
atenolol-chlorthalidone 100-25 mg tab	1	
atenolol-chlorthalidone 50-25 mg tab	1	
bisoprolol-hydrochlorothiazide 10-6.25 mg tab	1	
bisoprolol-hydrochlorothiazide 2.5-6.25 mg tab	1	
bisoprolol-hydrochlorothiazide 5-6.25 mg tab	1	
CORZIDE 80-5 MG TAB *nadolol & bendroflumethiazide*	3	
DUTOPROL 100-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
DUTOPROL 25-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
DUTOPROL 50-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
METOPROLOL-HCTZ ER 100-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
METOPROLOL-HCTZ ER 25-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
METOPROLOL-HCTZ ER 50-12.5 MG TAB ER 24H *metoprolol & hydrochlorothiazide*	3	
metoprolol-hydrochlorothiazide 100-25 mg tab	1	
METOPROLOL-HYDROCHLOROTHIAZIDE 100-50 MG TAB *metoprolol & hydrochlorothiazide*	3	
metoprolol-hydrochlorothiazide 50-25 mg tab	1	
NADOLOL-BENDROFLUMETHIAZIDE 40-5 MG TAB *nadolol & bendroflumethiazide*	3	
PROPRANOLOL-HCTZ 40-25 MG TAB *propranolol & hydrochlorothiazide*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROPRANOLOL-HCTZ 80-25 MG TAB *propranolol & hydrochlorothiazide*	3	
DIRECT RENIN INHIBITORS		
aliskiren fumarate 150 mg tab	1	QL 30 / 30 DAYS
aliskiren fumarate 300 mg tab	1	QL 30 / 30 DAYS
DIRECT RENIN INHIBITORS & THIAZIDE/THIAZIDE-LIKE COMB		
TEKTURNA HCT 150-12.5 MG TAB *aliskiren-hydrochlorothiazide*	3	QL 30 / 30 DAYS
TEKTURNA HCT 150-25 MG TAB *aliskiren-hydrochlorothiazide*	3	QL 30 / 30 DAYS
TEKTURNA HCT 300-12.5 MG TAB *aliskiren-hydrochlorothiazide*	3	QL 30 / 30 DAYS
TEKTURNA HCT 300-25 MG TAB *aliskiren-hydrochlorothiazide*	3	QL 30 / 30 DAYS
DOPAMINE D1 RECEPTOR AGONISTS		
CORLOPAM 10 MG/ML SOLUTION *fenoldopam mesylate*	3	
CORLOPAM 20 MG/2ML SOLUTION *fenoldopam mesylate*	3	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone 25 mg tab	1	
eplerenone 50 mg tab	1	
VASODILATORS		
hydralazine hcl 10 mg tab	1	
hydralazine hcl 100 mg tab	1	
hydralazine hcl 20 mg/ml solution	1	
hydralazine hcl 25 mg tab	1	
hydralazine hcl 50 mg tab	1	
minoxidil 10 mg tab	1	
minoxidil 2.5 mg tab	1	
NIPRIDE RTU 10-0.9 MG/50ML-% SOLUTION *nitroprusside sodium-sodium chloride*	3	
NIPRIDE RTU 20-0.9 MG/100ML-% SOLUTION *nitroprusside sodium-sodium chloride*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NIPRIDE RTU 50-0.9 MG/100ML-% SOLUTION *nitroprusside sodium-sodium chloride*	3	
NITROPRESS 25 MG/ML SOLUTION *nitroprusside sodium*	3	
nitroprusside sodium 25 mg/ml solution	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone-proguanil hcl 250-100 mg tab	1	
atovaquone-proguanil hcl 62.5-25 mg tab	1	
COARTEM 20-120 MG TAB *artemether-lumefantrine*	3	
ARAKODA 100 MG TAB *tafenoquine succinate*	3	
chloroquine phosphate 250 mg tab	1	
CHLOROQUINE PHOSPHATE 500 MG TAB *chloroquine phosphate*	3	
chloroquine phosphate 500 mg tab	1	
hydroxychloroquine sulfate 200 mg tab	1	
KRINTAFEL 150 MG TAB *tafenoquine succinate*	3	
MEFLOQUINE HCL 250 MG TAB *mefloquine hcl*	2	
primaquine phosphate 26.3 mg tab	1	
pyrimethamine 25 mg tab	1	S Specialty Drug
quinine sulfate 324 mg cap	1	QL 42 / 365 DAYS
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
BLOXIVERZ 10 MG/10ML SOLUTION *neostigmine methylsulfate*	3	
BLOXIVERZ 5 MG/10ML SOLUTION *neostigmine methylsulfate*	3	
ENLON 10 MG/ML SOLUTION *edrophonium chloride*	3	
FIRDAPSE 10 MG TAB *amifampridine phosphate*	3	QL 240 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GUANIDINE HCL 125 MG TAB *guanidine hcl*	3	
NEOSTIGMINE METHYLSULFATE 10 MG/10ML SOLUTION *neostigmine methylsulfate*	1	
neostigmine methylsulfate 10 mg/10ml solution	1	
NEOSTIGMINE METHYLSULFATE 3 MG/3ML SOLN PRSYR *neostigmine methylsulfate*	1	
NEOSTIGMINE METHYLSULFATE 5 MG/10ML SOLUTION *neostigmine methylsulfate*	1	
neostigmine methylsulfate 5 mg/10ml solution	1	
PYRIDOSTIGMINE BROMIDE 30 MG TAB *pyridostigmine bromide*	3	
pyridostigmine bromide 60 mg tab	1	
pyridostigmine bromide 60 mg/5ml solution	1	
pyridostigmine bromide er 180 mg tab er	1	
REGONOL 10 MG/2ML SOLUTION *pyridostigmine bromide*	3	
RUZURGI 10 MG TAB *amifampridine*	3	QL 300 / 30 DAYS PA S Specialty Drug
ANTIMYCOBACTERIAL AGENTS		
ANTI TB COMBINATIONS		
RIFAMATE 150-300 MG CAP *isoniazid & rifampin*	3	
RIFATER 50-120-300 MG TAB *isoniazid-rifampin w/ pyrazinamide*	3	
CAPASTAT SULFATE 1 GM RECON SOLN *capreomycin sulfate*	3	
cycloserine 250 mg cap	1	
ethambutol hcl 100 mg tab	1	
ethambutol hcl 400 mg tab	1	
ISONIAZID 100 MG TAB *isoniazid*	1	
isoniazid 100 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ISONIAZID 100 MG/ML SOLUTION *isoniazid*	1	
isoniazid 300 mg tab	1	
ISONIAZID 50 MG/5ML SYRUP *isoniazid*	3	
PASER 4 GM PACKET *aminosalicylic acid*	3	
PRETOMANID 200 MG TAB *pretomanid*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old
PRIFTIN 150 MG TAB *rifapentine*	2	QL 37.5 / 30 DAYS
PYRAZINAMIDE 500 MG TAB *pyrazinamide*	1	
pyrazinamide 500 mg tab	1	
rifabutin 150 mg cap	1	
RIFADIN 600 MG RECON SOLN *rifampin*	3	
rifampin 150 mg cap	1	
rifampin 300 mg cap	1	
rifampin 600 mg recon soln	1	
SIRTURO 100 MG TAB *bedaquiline fumarate*	3	S Specialty Drug
SIRTURO 20 MG TAB *bedaquiline fumarate*	3	S Specialty Drug
TRECATOR 250 MG TAB *ethionamide*	3	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
BELRAPZO 100 MG/4ML SOLUTION *bendamustine hcl*	3	S Specialty Drug
BENDAMUSTINE HCL 100 MG/4ML SOLUTION *bendamustine hcl*	1	S Specialty Drug
BENDEKA 100 MG/4ML SOLUTION *bendamustine hcl*	3	S Specialty Drug
busulfan 6 mg/ml solution	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BUSULFEX 6 MG/ML SOLUTION *busulfan*	3	S Specialty Drug
carboplatin 150 mg/15ml solution	1	S Specialty Drug
carboplatin 450 mg/45ml solution	1	S Specialty Drug
carboplatin 50 mg/5ml solution	1	S Specialty Drug
carboplatin 600 mg/60ml solution	1	S Specialty Drug
cisplatin 100 mg/100ml solution	1	S Specialty Drug
CISPLATIN 200 MG/200ML SOLUTION *cisplatin*	1	S Specialty Drug
CISPLATIN 50 MG RECON SOLN *cisplatin*	1	S Specialty Drug
cisplatin 50 mg/50ml solution	1	S Specialty Drug
HEXALEN 50 MG CAP *altretamine*	2	PA S Specialty Drug
MYLERAN 2 MG TAB *busulfan*	2	S Specialty Drug
oxaliplatin 100 mg recon soln	1	S Specialty Drug
oxaliplatin 100 mg/20ml solution	1	S Specialty Drug
oxaliplatin 50 mg recon soln	1	S Specialty Drug
oxaliplatin 50 mg/10ml solution	1	S Specialty Drug
paraplatin 150 mg/15ml solution	1	S Specialty Drug
paraplatin 450 mg/45ml solution	1	S Specialty Drug
paraplatin 50 mg/5ml solution	1	S Specialty Drug
paraplatin 600 mg/60ml solution	1	S Specialty Drug
TEPADINA 100 MG RECON SOLN *thiotepa*	3	S Specialty Drug
TEPADINA 15 MG RECON SOLN *thiotepa*	3	S Specialty Drug
thiotepa 100 mg recon soln	1	S Specialty Drug
thiotepa 15 mg recon soln	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TREANDA 100 MG RECON SOLN *bendamustine hcl*	3	S Specialty Drug
TREANDA 25 MG RECON SOLN *bendamustine hcl*	3	S Specialty Drug
ZEPZELCA 4 MG RECON SOLN *lurbinectedin*	3	S Specialty Drug
ANDROGEN BIOSYNTHESIS INHIBITORS		
abiraterone acetate 250 mg tab	1	QL 120 / 30 DAYS PA S Specialty Drug
YONSA 125 MG TAB *abiraterone acetate*	2	QL 120 / 30 DAYS PA S Specialty Drug
ZYTIGA 500 MG TAB *abiraterone acetate*	2	QL 60 / 30 DAYS PA S Specialty Drug
ANTIADRENALS		
LYSODREN 500 MG TAB *mitotane*	2	PA S Specialty Drug
ANTIANDROGENS		
bicalutamide 50 mg tab	1	S Specialty Drug
ERLEADA 60 MG TAB *apalutamide*	2	QL 120 / 30 DAYS PA S Specialty Drug
flutamide 125 mg cap	1	S Specialty Drug
nilutamide 150 mg tab	1	S Specialty Drug
NUBEQA 300 MG TAB *darolutamide*	2	QL 120 / 30 DAYS PA S Specialty Drug
XTANDI 40 MG CAP *enzalutamide*	2	QL 120 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIESTROGENS		
SOLTAMOX 10 MG/5ML SOLUTION *tamoxifen citrate*	2	ACA Affordable Care Act
tamoxifen citrate 10 mg tab	1	ACA Affordable Care Act
tamoxifen citrate 20 mg tab	1	ACA Affordable Care Act
toremifene citrate 60 mg tab	1	S Specialty Drug
ANTIMETABOLITES		
adrucil 2.5 gm/50ml solution	1	S Specialty Drug
adrucil 5 gm/100ml solution	1	S Specialty Drug
adrucil 500 mg/10ml solution	1	S Specialty Drug
ALIMTA 100 MG RECON SOLN *pemetrexed disodium*	3	S Specialty Drug
ALIMTA 500 MG RECON SOLN *pemetrexed disodium*	3	S Specialty Drug
ARRANON 5 MG/ML SOLUTION *nelarabine*	3	S Specialty Drug
azacitidine 100 mg recon susp	1	S Specialty Drug
capecitabine 150 mg tab	1	PA S Specialty Drug
capecitabine 500 mg tab	1	PA S Specialty Drug
cladribine 10 mg/10ml solution	1	S Specialty Drug
clofarabine 1 mg/ml solution	1	S Specialty Drug
cytarabine (pf) 100 mg/ml solution	1	S Specialty Drug
cytarabine (pf) 20 mg/ml solution	1	S Specialty Drug
CYTARABINE 20 MG/ML SOLUTION *cytarabine*	1	S Specialty Drug
DACOGEN 50 MG RECON SOLN *decitabine*	3	S Specialty Drug
decitabine 50 mg recon soln	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
floxuridine 0.5 gm recon soln	1	S Specialty Drug
fludarabine phosphate 50 mg recon soln	1	S Specialty Drug
fludarabine phosphate 50 mg/2ml solution	1	S Specialty Drug
fluorouracil 1 gm/20ml solution	1	S Specialty Drug
fluorouracil 2.5 gm/50ml solution	1	S Specialty Drug
fluorouracil 5 gm/100ml solution	1	S Specialty Drug
fluorouracil 500 mg/10ml solution	1	S Specialty Drug
FOLOTYN 20 MG/ML SOLUTION *pralatrexate*	3	S Specialty Drug
FOLOTYN 40 MG/2ML SOLUTION *pralatrexate*	3	S Specialty Drug
gemcitabine hcl 1 gm recon soln	1	S Specialty Drug
GEMCITABINE HCL 1 GM/10ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
GEMCITABINE HCL 1 GM/26.3ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
gemcitabine hcl 1 gm/26.3ml solution	1	S Specialty Drug
GEMCITABINE HCL 1.5 GM/15ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
gemcitabine hcl 2 gm recon soln	1	S Specialty Drug
GEMCITABINE HCL 2 GM/20ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
GEMCITABINE HCL 2 GM/52.6ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
gemcitabine hcl 2 gm/52.6ml solution	1	S Specialty Drug
gemcitabine hcl 200 mg recon soln	1	S Specialty Drug
GEMCITABINE HCL 200 MG/2ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
GEMCITABINE HCL 200 MG/5.26ML SOLUTION *gemcitabine hcl*	1	S Specialty Drug
gemcitabine hcl 200 mg/5.26ml solution	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GEMZAR 1 GM RECON SOLN *gemcitabine hcl*	3	S Specialty Drug
GEMZAR 200 MG RECON SOLN *gemcitabine hcl*	3	S Specialty Drug
INFUGEM 1200-0.9 MG/120ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1300-0.9 MG/130ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1400-0.9 MG/140ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1500-0.9 MG/150ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1600-0.9 MG/160ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1700-0.9 MG/170ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1800-0.9 MG/180ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 1900-0.9 MG/190ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 2000-0.9 MG/200ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
INFUGEM 2200-0.9 MG/220ML-% SOLUTION *gemcitabine hcl-sodium chloride*	3	S Specialty Drug
mercaptopurine 50 mg tab	1	S Specialty Drug
methotrexate 2.5 mg tab	1	
methotrexate sodium (pf) 1 gm/40ml solution	1	
methotrexate sodium (pf) 250 mg/10ml solution	1	
methotrexate sodium (pf) 50 mg/2ml solution	1	
methotrexate sodium 1 gm recon soln	1	
methotrexate sodium 2.5 mg tab	1	
METHOTREXATE SODIUM 250 MG/10ML SOLUTION *methotrexate sodium*	3	
methotrexate sodium 50 mg/2ml solution	1	
PURIXAN 2000 MG/100ML SUSPENSION *mercaptopurine*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TABLOID 40 MG TAB *thioguanine*	2	S Specialty Drug
TREXALL 10 MG TAB *methotrexate sodium*	3	
TREXALL 15 MG TAB *methotrexate sodium*	3	
TREXALL 5 MG TAB *methotrexate sodium*	3	
TREXALL 7.5 MG TAB *methotrexate sodium*	3	
VIDAZA 100 MG RECON SUSP *azacitidine*	3	S Specialty Drug
XATMEP 2.5 MG/ML SOLUTION *methotrexate*	3	QL 120 / 30 DAYS AL1 Up to 18 yrs old
ANTINEOPLASTIC - AUTOLOGOUS CELLULAR IMMUNOTHERAPY		
KYMRIAH SUSPENSION *tisagenlecleucel*	3	S Specialty Drug
PROVENGE SUSPENSION *sipuleucel-t*	3	QL 540 / 30 DAYS S Specialty Drug
YESCARTA SUSPENSION *axicabtagene ciloleucel*	3	S Specialty Drug
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 10 MG TAB *venetoclax*	2	QL 60 / 30 DAYS PA S Specialty Drug
VENCLEXTA 100 MG TAB *venetoclax*	2	QL 180 / 30 DAYS PA S Specialty Drug
VENCLEXTA 50 MG TAB *venetoclax*	2	QL 30 / 30 DAYS PA S Specialty Drug
VENCLEXTA STARTING PACK 10 & 50 & 100 MG TAB THPK *venetoclax*	2	QL 42 / 180 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS		
BLINCYTO 35 MCG RECON SOLN *blinatumomab*	3	S Specialty Drug
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
BRAFTOVI 50 MG CAP *encorafenib*	3	QL 180 / 30 DAYS PA S Specialty Drug
BRAFTOVI 75 MG CAP *encorafenib*	3	QL 180 / 30 DAYS PA S Specialty Drug
TAFINLAR 50 MG CAP *dabrafenib mesylate*	2	QL 120 / 30 DAYS PA S Specialty Drug
TAFINLAR 75 MG CAP *dabrafenib mesylate*	2	QL 120 / 30 DAYS PA S Specialty Drug
ZELBORAF 240 MG TAB *vemurafenib*	2	QL 240 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - FGFR KINASE INHIBITORS		
BALVERSA 3 MG TAB *erdafitinib*	3	QL 90 / 30 DAYS PA S Specialty Drug
BALVERSA 4 MG TAB *erdafitinib*	3	QL 60 / 30 DAYS PA S Specialty Drug
BALVERSA 5 MG TAB *erdafitinib*	3	QL 30 / 30 DAYS PA S Specialty Drug
PEMAZYRE 13.5 MG TAB *pemigatinib*	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEMAZYRE 4.5 MG TAB *pemigatinib*	3	PA S Specialty Drug
PEMAZYRE 9 MG TAB *pemigatinib*	3	PA S Specialty Drug
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100 MG TAB *glasdegib maleate*	3	QL 30 / 30 DAYS PA S Specialty Drug
DAURISMO 25 MG TAB *glasdegib maleate*	3	QL 60 / 30 DAYS PA S Specialty Drug
ERIVEDGE 150 MG CAP *vismodegib*	2	QL 30 / 30 DAYS PA S Specialty Drug
ODOMZO 200 MG CAP *sonidegib phosphate*	2	QL 30 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS		
BELEODAQ 500 MG RECON SOLN *belinostat*	3	S Specialty Drug
FARYDAK 10 MG CAP *panobinostat lactate*	2	QL 6 / 21 DAYS PA S Specialty Drug
FARYDAK 15 MG CAP *panobinostat lactate*	2	QL 6 / 21 DAYS PA S Specialty Drug
FARYDAK 20 MG CAP *panobinostat lactate*	2	QL 6 / 21 DAYS PA S Specialty Drug
ISTODAX (OVERFILL) 10 MG RECON SOLN *romidepsin*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROMIDEPSIN 10 MG RECON SOLN *romidepsin*	1	S Specialty Drug
ROMIDEPSIN 27.5 MG/5.5ML SOLUTION *romidepsin*	1	S Specialty Drug
ZOLINZA 100 MG CAP *vorinostat*	2	QL 120 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1 MG CAP *pomalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
POMALYST 2 MG CAP *pomalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
POMALYST 3 MG CAP *pomalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
POMALYST 4 MG CAP *pomalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
ANTINEOPLASTIC - MEK INHIBITORS		
COTELLIC 20 MG TAB *cobimetinib fumarate*	2	QL 63 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
KOSELUGO 10 MG CAP *selumetinib sulfate*	3	PA S Specialty Drug
KOSELUGO 25 MG CAP *selumetinib sulfate*	3	PA S Specialty Drug
MEKINIST 0.5 MG TAB *trametinib dimethyl sulfoxide*	2	QL 90 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEKINIST 2 MG TAB *trametinib dimethyl sulfoxide*	2	QL 30 / 30 DAYS PA S Specialty Drug
MEKTOVI 15 MG TAB *binimetinib*	3	QL 180 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS		
TAZVERIK 200 MG TAB *tazemetostat hbr*	3	QL 240 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - MONOCLONAL ANTIBODIES		
ARZERRA 100 MG/5ML CONC *ofatumumab*	3	S Specialty Drug
ARZERRA 1000 MG/50ML CONC *ofatumumab*	3	S Specialty Drug
BAVENCIO 200 MG/10ML SOLUTION *avelumab*	3	S Specialty Drug
DARZALEX 100 MG/5ML SOLUTION *daratumumab*	3	S Specialty Drug
DARZALEX 400 MG/20ML SOLUTION *daratumumab*	3	S Specialty Drug
EMPLICITI 300 MG RECON SOLN *elotuzumab*	3	S Specialty Drug
EMPLICITI 400 MG RECON SOLN *elotuzumab*	3	S Specialty Drug
ERBITUX 100 MG/50ML SOLUTION *cetuximab*	3	S Specialty Drug
ERBITUX 200 MG/100ML SOLUTION *cetuximab*	3	S Specialty Drug
GAZYVA 1000 MG/40ML SOLUTION *obinutuzumab*	3	S Specialty Drug
HERCEPTIN 150 MG RECON SOLN *trastuzumab*	3	S Specialty Drug
HERCEPTIN 440 MG RECON SOLN *trastuzumab*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HERZUMA 150 MG RECON SOLN *trastuzumab-pkrb*	3	S Specialty Drug
HERZUMA 420 MG RECON SOLN *trastuzumab-pkrb*	3	S Specialty Drug
IMFINZI 120 MG/2.4ML SOLUTION *durvalumab*	3	S Specialty Drug
IMFINZI 500 MG/10ML SOLUTION *durvalumab*	3	S Specialty Drug
KANJINTI 150 MG RECON SOLN *trastuzumab-anns*	3	S Specialty Drug
KANJINTI 420 MG RECON SOLN *trastuzumab-anns*	3	S Specialty Drug
KEYTRUDA 100 MG/4ML SOLUTION *pembrolizumab*	3	S Specialty Drug
LARTRUVO 190 MG/19ML SOLUTION *olaratumab*	3	S Specialty Drug
LARTRUVO 500 MG/50ML SOLUTION *olaratumab*	3	S Specialty Drug
LIBTAYO 350 MG/7ML SOLUTION *cemiplimab-rwlc*	3	S Specialty Drug
LUMOXITI 1 MG RECON SOLN *moxetumomab pasudotox-tdfk*	3	
OGIVRI 150 MG RECON SOLN *trastuzumab-dkst*	3	S Specialty Drug
OGIVRI 420 MG RECON SOLN *trastuzumab-dkst*	3	S Specialty Drug
ONTRUZANT 150 MG RECON SOLN *trastuzumab-dttb*	3	S Specialty Drug
ONTRUZANT 420 MG RECON SOLN *trastuzumab-dttb*	3	S Specialty Drug
OPDIVO 100 MG/10ML SOLUTION *nivolumab*	3	S Specialty Drug
OPDIVO 240 MG/24ML SOLUTION *nivolumab*	3	S Specialty Drug
OPDIVO 40 MG/4ML SOLUTION *nivolumab*	3	S Specialty Drug
PERJETA 420 MG/14ML SOLUTION *pertuzumab*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PORTRAZZA 800 MG/50ML SOLUTION *necitumumab*	3	S Specialty Drug
POTELIGEO 20 MG/5ML SOLUTION *mogamulizumab-kpkc*	3	S Specialty Drug
RITUXAN 100 MG/10ML SOLUTION *rituximab*	3	S Specialty Drug
RITUXAN 500 MG/50ML SOLUTION *rituximab*	3	S Specialty Drug
RUXIENCE 100 MG/10ML SOLUTION *rituximab-pvvr*	3	S Specialty Drug
RUXIENCE 500 MG/50ML SOLUTION *rituximab-pvvr*	3	S Specialty Drug
SARCLISA 100 MG/5ML SOLUTION *isatuximab-irfc*	3	S Specialty Drug
SARCLISA 500 MG/25ML SOLUTION *isatuximab-irfc*	3	S Specialty Drug
TECENTRIQ 1200 MG/20ML SOLUTION *atezolizumab*	3	S Specialty Drug
TECENTRIQ 840 MG/14ML SOLUTION *atezolizumab*	3	S Specialty Drug
TRAZIMERA 420 MG RECON SOLN *trastuzumab-qyyp*	3	S Specialty Drug
TRUXIMA 100 MG/10ML SOLUTION *rituximab-abbs*	3	S Specialty Drug
TRUXIMA 500 MG/50ML SOLUTION *rituximab-abbs*	3	S Specialty Drug
UNITUXIN 17.5 MG/5ML SOLUTION *dinutuximab*	3	S Specialty Drug
VECTIBIX 100 MG/5ML SOLUTION *panitumumab*	3	S Specialty Drug
VECTIBIX 400 MG/20ML SOLUTION *panitumumab*	3	S Specialty Drug
YERVOY 200 MG/40ML SOLUTION *ipilimumab*	3	S Specialty Drug
YERVOY 50 MG/10ML SOLUTION *ipilimumab*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
AFINITOR 10 MG TAB *everolimus*	2	QL 30 / 30 DAYS PA S Specialty Drug
AFINITOR DISPERZ 2 MG TAB SOL *everolimus*	2	QL 60 / 30 DAYS PA S Specialty Drug
AFINITOR DISPERZ 3 MG TAB SOL *everolimus*	2	QL 90 / 30 DAYS PA S Specialty Drug
AFINITOR DISPERZ 5 MG TAB SOL *everolimus*	2	QL 60 / 30 DAYS PA S Specialty Drug
everolimus 2.5 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
everolimus 5 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
everolimus 7.5 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
temsirolimus 25 mg/ml solution	1	QL 8.7 / 30 DAYS S Specialty Drug
TORISEL 25 MG/ML SOLUTION *temsirolimus*	3	QL 8.7 / 30 DAYS S Specialty Drug
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
NEXAVAR 200 MG TAB *sorafenib tosylate*	2	QL 120 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYDAPT 25 MG CAP *midostaurin*	2	QL 240 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
STIVARGA 40 MG TAB *regorafenib*	2	QL 84 / 28 DAYS PA S Specialty Drug
SUTENT 12.5 MG CAP *sunitinib malate*	2	QL 90 / 30 DAYS PA S Specialty Drug
SUTENT 25 MG CAP *sunitinib malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
SUTENT 37.5 MG CAP *sunitinib malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
SUTENT 50 MG CAP *sunitinib malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - PROTEASOME INHIBITORS		
BORTEZOMIB 3.5 MG RECON SOLN *bortezomib*	1	S Specialty Drug
KYPROLIS 10 MG RECON SOLN *carfilzomib*	3	S Specialty Drug
KYPROLIS 30 MG RECON SOLN *carfilzomib*	3	S Specialty Drug
KYPROLIS 60 MG RECON SOLN *carfilzomib*	3	S Specialty Drug
NINLARO 2.3 MG CAP *ixazomib citrate*	2	QL 3 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NINLARO 3 MG CAP *ixazomib citrate*	2	QL 3 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
NINLARO 4 MG CAP *ixazomib citrate*	2	QL 3 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VELCADE 3.5 MG RECON SOLN *bortezomib*	3	S Specialty Drug
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS		
ROZLYTREK 100 MG CAP *entrectinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
ROZLYTREK 200 MG CAP *entrectinib*	2	QL 90 / 30 DAYS PA S Specialty Drug
VITRAKVI 100 MG CAP *larotrectinib sulfate*	2	QL 60 / 30 DAYS PA S Specialty Drug
VITRAKVI 20 MG/ML SOLUTION *larotrectinib sulfate*	2	QL 300 / 30 DAYS PA S Specialty Drug
VITRAKVI 25 MG CAP *larotrectinib sulfate*	2	QL 180 / 30 DAYS PA S Specialty Drug
ANTINEOPLASTIC - TYROSINE KINASE INHIBITORS		
ALECENSA 150 MG CAP *alectinib hcl*	2	QL 240 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALUNBRIG 180 MG TAB *brigatinib*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ALUNBRIG 30 MG TAB *brigatinib*	2	QL 180 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ALUNBRIG 90 & 180 MG TAB THPK *brigatinib*	2	QL 30 / 180 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ALUNBRIG 90 MG TAB *brigatinib*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
AYVAKIT 100 MG TAB *avapritinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
AYVAKIT 200 MG TAB *avapritinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
AYVAKIT 300 MG TAB *avapritinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
BOSULIF 100 MG TAB *bosutinib*	2	QL 120 / 30 DAYS PA S Specialty Drug
BOSULIF 400 MG TAB *bosutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOSULIF 500 MG TAB *bosutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
BRUKINSA 80 MG CAP *zanubrutinib*	3	QL 120 / 30 DAYS PA S Specialty Drug
CABOMETYX 20 MG TAB *cabozantinib s-malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
CABOMETYX 40 MG TAB *cabozantinib s-malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
CABOMETYX 60 MG TAB *cabozantinib s-malate*	2	QL 30 / 30 DAYS PA S Specialty Drug
CALQUENCE 100 MG CAP *acalabrutinib*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
CAPRELSA 100 MG TAB *vandetanib*	2	QL 60 / 30 DAYS PA S Specialty Drug
CAPRELSA 300 MG TAB *vandetanib*	2	QL 30 / 30 DAYS PA S Specialty Drug
COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT *cabozantinib s-malate*	2	QL 56 / 28 DAYS PA S Specialty Drug
COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT *cabozantinib s-malate*	2	QL 112 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMETRIQ (60 MG DAILY DOSE) 20 MG KIT *cabozantinib s-malate*	2	QL 84 / 28 DAYS PA S Specialty Drug
erlotinib hcl 100 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
erlotinib hcl 150 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
erlotinib hcl 25 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
GILOTRIF 20 MG TAB *afatinib dimaleate*	2	QL 30 / 30 DAYS PA S Specialty Drug
GILOTRIF 30 MG TAB *afatinib dimaleate*	2	QL 30 / 30 DAYS PA S Specialty Drug
GILOTRIF 40 MG TAB *afatinib dimaleate*	2	QL 30 / 30 DAYS PA S Specialty Drug
ICLUSIG 15 MG TAB *ponatinib hcl*	2	QL 60 / 30 DAYS PA S Specialty Drug
ICLUSIG 45 MG TAB *ponatinib hcl*	2	QL 30 / 30 DAYS PA S Specialty Drug
imatinib mesylate 100 mg tab	1	QL 90 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
imatinib mesylate 400 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
IMBRUVICA 140 MG CAP *ibrutinib*	2	QL 120 / 30 DAYS PA S Specialty Drug
IMBRUVICA 140 MG TAB *ibrutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
IMBRUVICA 280 MG TAB *ibrutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
IMBRUVICA 420 MG TAB *ibrutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
IMBRUVICA 560 MG TAB *ibrutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
IMBRUVICA 70 MG CAP *ibrutinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
INLYTA 1 MG TAB *axitinib*	2	QL 180 / 30 DAYS PA S Specialty Drug
INLYTA 5 MG TAB *axitinib*	2	QL 120 / 30 DAYS PA S Specialty Drug
IRESSA 250 MG TAB *gefitinib*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK *lenvatinib mesylate*	2	QL 30 / 30 DAYS PA S Specialty Drug
LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK *lenvatinib mesylate*	2	QL 90 / 30 DAYS PA S Specialty Drug
LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK *lenvatinib mesylate*	2	QL 60 / 30 DAYS PA S Specialty Drug
LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK *lenvatinib mesylate*	2	QL 90 / 30 DAYS PA S Specialty Drug
LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK *lenvatinib mesylate*	2	QL 60 / 30 DAYS PA S Specialty Drug
LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK *lenvatinib mesylate*	2	QL 90 / 30 DAYS PA S Specialty Drug
LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK *lenvatinib mesylate*	2	QL 30 / 30 DAYS PA S Specialty Drug
LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK *lenvatinib mesylate*	2	QL 60 / 30 DAYS PA S Specialty Drug
LORBRENA 100 MG TAB *lorlatinib*	3	QL 30 / 30 DAYS PA S Specialty Drug
LORBRENA 25 MG TAB *lorlatinib*	3	QL 90 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NERLYNX 40 MG TAB *neratinib maleate*	3	QL 180 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
QINLOCK 50 MG TAB *ripretinib*	3	PA S Specialty Drug
RETEVMO 40 MG CAP *selpercatinib*	3	PA S Specialty Drug
RETEVMO 80 MG CAP *selpercatinib*	3	PA S Specialty Drug
SPRYCEL 100 MG TAB *dasatinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
SPRYCEL 140 MG TAB *dasatinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
SPRYCEL 20 MG TAB *dasatinib*	2	QL 90 / 30 DAYS PA S Specialty Drug
SPRYCEL 50 MG TAB *dasatinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
SPRYCEL 70 MG TAB *dasatinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
SPRYCEL 80 MG TAB *dasatinib*	2	QL 30 / 30 DAYS PA S Specialty Drug
TABRECTA 150 MG TAB *capmatinib hcl*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TABRECTA 200 MG TAB *capmatinib hcl*	2	PA S Specialty Drug
TAGRISSO 40 MG TAB *osimertinib mesylate*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
TAGRISSO 80 MG TAB *osimertinib mesylate*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
TASIGNA 150 MG CAP *nilotinib hcl*	2	QL 120 / 30 DAYS PA S Specialty Drug
TASIGNA 200 MG CAP *nilotinib hcl*	2	QL 120 / 30 DAYS PA S Specialty Drug
TASIGNA 50 MG CAP *nilotinib hcl*	2	QL 120 / 30 DAYS PA S Specialty Drug
TUKYSA 150 MG TAB *tucatinib*	3	PA S Specialty Drug
TUKYSA 50 MG TAB *tucatinib*	3	PA S Specialty Drug
TURALIO 200 MG CAP *pexidartinib hcl*	3	QL 120 / 30 DAYS PA S Specialty Drug
TYKERB 250 MG TAB *lapatinib ditosylate*	2	QL 180 / 30 DAYS PA S Specialty Drug
VIZIMPRO 15 MG TAB *dacomitinib*	3	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIZIMPRO 30 MG TAB *dacomitinib*	3	QL 30 / 30 DAYS PA S Specialty Drug
VIZIMPRO 45 MG TAB *dacomitinib*	3	QL 30 / 30 DAYS PA S Specialty Drug
VOTRIENT 200 MG TAB *pazopanib hcl*	2	QL 120 / 30 DAYS PA S Specialty Drug
XALKORI 200 MG CAP *crizotinib*	2	QL 60 / 30 DAYS PA S Specialty Drug
XALKORI 250 MG CAP *crizotinib*	2	QL 60 / 30 DAYS PA S Specialty Drug
XOSPATA 40 MG TAB *gilteritinib fumarate*	3	QL 90 / 30 DAYS PA S Specialty Drug
ZYKADIA 150 MG CAP *ceritinib*	2	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ZYKADIA 150 MG TAB *ceritinib*	2	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO (100 MG ONCE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 20 / 28 DAYS PA S Specialty Drug
XPOVIO (40 MG ONCE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 8 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XPOVIO (40 MG TWICE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 16 / 28 DAYS PA S Specialty Drug
XPOVIO (60 MG ONCE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 12 / 28 DAYS PA S Specialty Drug
XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 24 / 28 DAYS PA S Specialty Drug
XPOVIO (80 MG ONCE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 16 / 28 DAYS PA S Specialty Drug
XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK *selinexor*	3	QL 32 / 28 DAYS PA S Specialty Drug
ANTINEOPLASTIC -ANTIBODY FOR RADIOPHARMACEUTICAL THERAPY		
ZEVALIN Y-90 3.2 MG/2ML KIT *ibritumomab tiuxetan for yttrium-90 (y-90)*	3	S Specialty Drug
ANTINEOPLASTIC ANTIBIOTICS		
ADRIAMYCIN 10 MG RECON SOLN *doxorubicin hcl*	3	S Specialty Drug
adriamycin 2 mg/ml solution	1	S Specialty Drug
ADRIAMYCIN 50 MG RECON SOLN *doxorubicin hcl*	3	S Specialty Drug
bleomycin sulfate 15 unit recon soln	1	S Specialty Drug
bleomycin sulfate 30 unit recon soln	1	S Specialty Drug
COSMEGEN 0.5 MG RECON SOLN *dactinomycin*	3	S Specialty Drug
dactinomycin 0.5 mg recon soln	1	S Specialty Drug
DAUNORUBICIN HCL 20 MG/4ML SOLUTION *daunorubicin hcl*	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
daunorubicin hcl 20 mg/4ml solution	1	S Specialty Drug
DAUNORUBICIN HCL 50 MG/10ML SOLUTION *daunorubicin hcl*	1	S Specialty Drug
DOXIL 2 MG/ML INJECTABLE *doxorubicin hcl liposomal*	3	S Specialty Drug
doxorubicin hcl 10 mg recon soln	1	S Specialty Drug
doxorubicin hcl 2 mg/ml solution	1	S Specialty Drug
doxorubicin hcl 50 mg recon soln	1	S Specialty Drug
doxorubicin hcl liposomal 2 mg/ml injectable	1	S Specialty Drug
ELLENCE 200 MG/100ML SOLUTION *epirubicin hcl*	3	S Specialty Drug
ELLENCE 50 MG/25ML SOLUTION *epirubicin hcl*	3	S Specialty Drug
epirubicin hcl 200 mg/100ml solution	1	S Specialty Drug
epirubicin hcl 50 mg/25ml solution	1	S Specialty Drug
IDAMYCIN PFS 10 MG/10ML SOLUTION *idarubicin hcl*	3	S Specialty Drug
IDAMYCIN PFS 20 MG/20ML SOLUTION *idarubicin hcl*	3	S Specialty Drug
IDAMYCIN PFS 5 MG/5ML SOLUTION *idarubicin hcl*	3	S Specialty Drug
idarubicin hcl 10 mg/10ml solution	1	S Specialty Drug
idarubicin hcl 20 mg/20ml solution	1	S Specialty Drug
idarubicin hcl 5 mg/5ml solution	1	S Specialty Drug
mitomycin 20 mg recon soln	1	S Specialty Drug
mitomycin 40 mg recon soln	1	S Specialty Drug
mitomycin 5 mg recon soln	1	S Specialty Drug
mitoxantrone hcl 20 mg/10ml conc	1	S Specialty Drug
mitoxantrone hcl 25 mg/12.5ml conc	1	S Specialty Drug
mitoxantrone hcl 30 mg/15ml conc	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mutamycin 20 mg recon soln	1	S Specialty Drug
mutamycin 40 mg recon soln	1	S Specialty Drug
mutamycin 5 mg recon soln	1	S Specialty Drug
valrubicin 40 mg/ml solution	1	S Specialty Drug
VALSTAR 40 MG/ML SOLUTION *valrubicin*	3	S Specialty Drug
ANTINEOPLASTIC ANTIBODY-DRUG COMPLEXES		
ADCETRIS 50 MG RECON SOLN *brentuximab vedotin*	3	S Specialty Drug
BESPONSA 0.9 MG RECON SOLN *inotuzumab ozogamicin*	3	S Specialty Drug
ENHERTU 100 MG RECON SOLN *fam-trastuzumab deruxtecan-nxki*	3	S Specialty Drug
KADCYLA 100 MG RECON SOLN *ado-trastuzumab emtansine*	3	S Specialty Drug
KADCYLA 160 MG RECON SOLN *ado-trastuzumab emtansine*	3	S Specialty Drug
MYLOTARG 4.5 MG RECON SOLN *gemtuzumab ozogamicin*	3	S Specialty Drug
PADCEV 20 MG RECON SOLN *enfortumab vedotin-ejfv*	3	S Specialty Drug
PADCEV 30 MG RECON SOLN *enfortumab vedotin-ejfv*	3	S Specialty Drug
POLIVY 140 MG RECON SOLN *polatuzumab vedotin-piiq*	3	QL 30 / 30 DAYS S Specialty Drug
TRODELVY 180 MG RECON SOLN *sacituzumab govitecan-hziy*	3	S Specialty Drug
ANTINEOPLASTIC COMBINATIONS		
HERCEPTIN HYLECTA 600-10000 MG-UNT/5ML SOLUTION *trastuzumab-hyaluronidase-oysk*	3	S Specialty Drug
KISQALI FEMARA (400 MG DOSE) 200 & 2.5 MG TAB THPK *ribociclib succinate-letrozole*	2	QL 70 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KISQALI FEMARA (600 MG DOSE) 200 & 2.5 MG TAB THPK *ribociclib succinate-letrozole*	2	QL 91 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
KISQALI FEMARA(200 MG DOSE) 200 & 2.5 MG TAB THPK *ribociclib succinate-letrozole*	2	QL 49 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
LONSURF 15-6.14 MG TAB *trifluridine-tipiracil*	2	QL 100 / 28 DAYS PA S Specialty Drug
LONSURF 20-8.19 MG TAB *trifluridine-tipiracil*	2	QL 80 / 28 DAYS PA S Specialty Drug
RITUXAN HYCELA 1400-23400 MG -UT/11.7ML SOLUTION *rituximab-hyaluronidase human*	3	S Specialty Drug
RITUXAN HYCELA 1600-26800 MG -UT/13.4ML SOLUTION *rituximab-hyaluronidase human*	3	S Specialty Drug
VYXEOS 44-100 MG RECON SUSP *daunorubicin-cytarabine liposome*	3	S Specialty Drug
ANTINEOPLASTIC ENZYMES		
ASPARLAS 3750 UNIT/5ML SOLUTION *calaspargase pegol-mknl*	3	S Specialty Drug
ERWINAZE 10000 UNIT RECON SOLN *asparaginase erwinia chrysanthemi*	3	S Specialty Drug
ONCASPAR 750 UNIT/ML SOLUTION *pegaspargase*	3	S Specialty Drug
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
AZEDRA DOSIMETRIC 15 MCI/ML SOLUTION *iobenguane i 131*	3	S Specialty Drug
AZEDRA THERAPEUTIC 15 MCI/ML SOLUTION *iobenguane i 131*	3	S Specialty Drug
LUTATHERA 370 MBQ/ML SOLUTION *lutetium lu 177 dotatate*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
METASTRON 1 MCI/ML SOLUTION *strontium-89 chloride*	3	
QUADRAMET 1850 MBQ/ML SOLUTION *samarium sm 153 lexidronam*	3	
STRONTIUM CHLORIDE SR-89 1 MCI/ML SOLUTION *strontium-89 chloride*	1	
XOFIGO 30 MCCI/ML SOLUTION *radium ra 223 dichloride*	3	S Specialty Drug
ANTINEOPLASTICS - INTERLEUKINS		
ELZONRIS 1000 MCG/ML SOLUTION *tagraxofusp-erzs*	3	S Specialty Drug
PROLEUKIN 22000000 UNIT RECON SOLN *aldesleukin*	3	S Specialty Drug
ANTINEOPLASTICS - PHOTOACTIVATED AGENTS		
PHOTOFRIN 75 MG RECON SOLN *porfimer sodium*	3	S Specialty Drug
ANTINEOPLASTICS MISC.		
ACTIMMUNE 2000000 UNIT/0.5ML SOLUTION *interferon gamma-1b*	2	S Specialty Drug
ALFERON N 5000000 UNIT/ML SOLUTION *interferon alfa-n3*	3	S Specialty Drug
arsenic trioxide 10 mg/10ml solution	1	S Specialty Drug
arsenic trioxide 12 mg/6ml solution	1	S Specialty Drug
DACARBAZINE 100 MG RECON SOLN *dacarbazine*	1	S Specialty Drug
dacarbazine 200 mg recon soln	1	S Specialty Drug
hydroxyurea 500 mg cap	1	S Specialty Drug
INTRON A 10000000 UNIT RECON SOLN *interferon alfa-2b*	2	S Specialty Drug
INTRON A 10000000 UNIT/ML SOLUTION *interferon alfa-2b*	2	S Specialty Drug
INTRON A 18000000 UNIT RECON SOLN *interferon alfa-2b*	2	S Specialty Drug
INTRON A 50000000 UNIT RECON SOLN *interferon alfa-2b*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTRON A 6000000 UNIT/ML SOLUTION *interferon alfa-2b*	2	S Specialty Drug
MATULANE 50 MG CAP *procarbazine hcl*	2	PA S Specialty Drug
NIPENT 10 MG RECON SOLN *pentostatin*	3	S Specialty Drug
SYLATRON 200 MCG KIT *peginterferon alfa-2b (antineoplastic)*	2	PA S Specialty Drug
SYLATRON 300 MCG KIT *peginterferon alfa-2b (antineoplastic)*	2	PA S Specialty Drug
SYLATRON 600 MCG KIT *peginterferon alfa-2b (antineoplastic)*	2	PA S Specialty Drug
SYNRIBO 3.5 MG RECON SOLN *omacetaxine mepesuccinate*	2	S Specialty Drug
TICE BCG 50 MG RECON SUSP *bcg live intravesical*	3	S Specialty Drug
TRISENOX 12 MG/6ML SOLUTION *arsenic trioxide*	3	S Specialty Drug
AROMATASE INHIBITORS		
anastrozole 1 mg tab	1	ACA Affordable Care Act
exemestane 25 mg tab	1	
letrozole 2.5 mg tab	1	ACA Affordable Care Act
CARBOXYPEPTIDASE ENZYME AGENTS		
VORAXAZE 1000 UNIT RECON SOLN *glucarpidase*	3	
CARDIAC PROTECTIVE AGENTS		
dexrazoxane hcl 250 mg recon soln	1	
dexrazoxane hcl 500 mg recon soln	1	
TOTECT 500 MG RECON SOLN *dexrazoxane hcl*	3	
ZINECARD 250 MG RECON SOLN *dexrazoxane hcl*	3	
ZINECARD 500 MG RECON SOLN *dexrazoxane hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CHEMOTHERAPY ADJUNCTS - HYPERURICEMIA AGENTS		
ELITEK 1.5 MG RECON SOLN *rasburicase*	3	S Specialty Drug
ELITEK 7.5 MG RECON SOLN *rasburicase*	3	S Specialty Drug
CHEMOTHERAPY ADJUNCTS - KERATINOCYTE GROWTH FACTORS		
KEPIVANCE 6.25 MG RECON SOLN *palifermin*	3	
CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS		
IBRANCE 100 MG CAP *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
IBRANCE 100 MG TAB *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
IBRANCE 125 MG CAP *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
IBRANCE 125 MG TAB *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
IBRANCE 75 MG CAP *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
IBRANCE 75 MG TAB *palbociclib*	2	QL 21 / 28 DAYS PA S Specialty Drug
KISQALI (200 MG DOSE) 200 MG TAB THPK *ribociclib succinate*	2	QL 21 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KISQALI (400 MG DOSE) 200 MG TAB THPK *ribociclib succinate*	2	QL 42 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
KISQALI (600 MG DOSE) 200 MG TAB THPK *ribociclib succinate*	2	QL 63 / 28 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 100 MG TAB *abemaciclib*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 150 MG TAB *abemaciclib*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 200 MG TAB *abemaciclib*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VERZENIO 50 MG TAB *abemaciclib*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ESTROGEN RECEPTOR ANTAGONIST		
FASLODEX 250 MG/5ML SOLUTION *fulvestrant*	3	QL 37.5 / 30 DAYS S Specialty Drug
FULVESTRANT 250 MG/5ML SOLUTION *fulvestrant*	1	QL 37.5 / 30 DAYS S Specialty Drug
fulvestrant 250 mg/5ml solution	1	QL 37.5 / 30 DAYS S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESTROGENS-ANTINEOPLASTIC		
EMCYT 140 MG CAP *estramustine phosphate sodium*	2	S Specialty Drug
FOLIC ACID ANTAGONISTS RESCUE AGENTS		
FUSILEV 50 MG RECON SOLN *levoleucovorin calcium*	3	
KHAPZORY 175 MG RECON SOLN *levoleucovorin*	3	
KHAPZORY 300 MG RECON SOLN *levoleucovorin*	3	
leucovorin calcium 10 mg tab	1	
leucovorin calcium 100 mg recon soln	1	
LEUCOVORIN CALCIUM 100 MG/10ML SOLUTION *leucovorin calcium*	1	
leucovorin calcium 15 mg tab	1	
leucovorin calcium 200 mg recon soln	1	
leucovorin calcium 25 mg tab	1	
leucovorin calcium 350 mg recon soln	1	
leucovorin calcium 5 mg tab	1	
leucovorin calcium 50 mg recon soln	1	
leucovorin calcium 500 mg recon soln	1	
leucovorin calcium 500 mg/50ml solution	1	
LEVOLEUCOVORIN CALCIUM 175 MG RECON SOLN *levoleucovorin calcium*	1	
levoleucovorin calcium 50 mg recon soln	1	
levoleucovorin calcium pf 175 mg/17.5ml solution	1	
levoleucovorin calcium pf 250 mg/25ml solution	1	
GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS		
FIRMAGON (240 MG DOSE) 120 MG/VIAL RECON SOLN *degarelix acetate*	3	S Specialty Drug
FIRMAGON 80 MG RECON SOLN *degarelix acetate*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMIDAZOTETRAZINES		
TEMODAR 100 MG RECON SOLN *temozolomide*	3	S Specialty Drug
temozolomide 100 mg cap	1	PA S Specialty Drug
temozolomide 140 mg cap	1	PA S Specialty Drug
temozolomide 180 mg cap	1	PA S Specialty Drug
temozolomide 20 mg cap	1	PA S Specialty Drug
temozolomide 250 mg cap	1	PA S Specialty Drug
temozolomide 5 mg cap	1	PA S Specialty Drug
ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS		
TIBSOVO 250 MG TAB *ivosidenib*	3	QL 60 / 30 DAYS PA S Specialty Drug
ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS		
IDHIFA 100 MG TAB *enasidenib mesylate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
IDHIFA 50 MG TAB *enasidenib mesylate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
JANUS ASSOCIATED KINASE (JAK) INHIBITORS		
INREBIC 100 MG CAP *fedratinib hcl*	3	QL 120 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JAKAFI 10 MG TAB *ruxolitinib phosphate*	2	QL 60 / 30 DAYS PA S Specialty Drug
JAKAFI 15 MG TAB *ruxolitinib phosphate*	2	QL 60 / 30 DAYS PA S Specialty Drug
JAKAFI 20 MG TAB *ruxolitinib phosphate*	2	QL 60 / 30 DAYS PA S Specialty Drug
JAKAFI 25 MG TAB *ruxolitinib phosphate*	2	QL 60 / 30 DAYS PA S Specialty Drug
JAKAFI 5 MG TAB *ruxolitinib phosphate*	2	QL 60 / 30 DAYS PA S Specialty Drug
LHRH ANALOGS		
ELIGARD 22.5 MG KIT *leuprolide acetate (3 month)*	3	S Specialty Drug
ELIGARD 30 MG KIT *leuprolide acetate (4 month)*	3	S Specialty Drug
ELIGARD 45 MG KIT *leuprolide acetate (6 month)*	3	S Specialty Drug
ELIGARD 7.5 MG KIT *leuprolide acetate*	3	S Specialty Drug
leuprolide acetate 1 mg/0.2ml kit	1	S Specialty Drug
LUPRON DEPOT (1-MONTH) 3.75 MG KIT *leuprolide acetate*	2	S Specialty Drug
LUPRON DEPOT (1-MONTH) 7.5 MG KIT *leuprolide acetate*	2	S Specialty Drug
LUPRON DEPOT (3-MONTH) 11.25 MG KIT *leuprolide acetate (3 month)*	2	S Specialty Drug
LUPRON DEPOT (3-MONTH) 22.5 MG KIT *leuprolide acetate (3 month)*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT (4-MONTH) 30 MG KIT *leuprolide acetate (4 month)*	2	S Specialty Drug
LUPRON DEPOT (6-MONTH) 45 MG KIT *leuprolide acetate (6 month)*	2	S Specialty Drug
TRELSTAR MIXJECT 11.25 MG RECON SUSP *triptorelin pamoate*	3	S Specialty Drug
TRELSTAR MIXJECT 22.5 MG RECON SUSP *triptorelin pamoate*	3	S Specialty Drug
TRELSTAR MIXJECT 3.75 MG RECON SUSP *triptorelin pamoate*	3	S Specialty Drug
VANTAS 50 MG KIT *histrelin acetate*	3	S Specialty Drug
ZOLADEX 10.8 MG IMPLANT *goserelin acetate*	3	S Specialty Drug
ZOLADEX 3.6 MG IMPLANT *goserelin acetate*	3	S Specialty Drug
MITOTIC INHIBITORS		
ABRAXANE 100 MG RECON SUSP *paclitaxel protein-bound particles*	3	S Specialty Drug
DOCETAXEL (NON-ALCOHOL) 160 MG/8ML SOLUTION *docetaxel*	1	S Specialty Drug
DOCETAXEL (NON-ALCOHOL) 20 MG/ML SOLUTION *docetaxel*	1	S Specialty Drug
DOCETAXEL (NON-ALCOHOL) 80 MG/4ML SOLUTION *docetaxel*	1	S Specialty Drug
DOCETAXEL 160 MG/16ML SOLUTION *docetaxel*	1	S Specialty Drug
docetaxel 160 mg/16ml solution	1	S Specialty Drug
DOCETAXEL 160 MG/8ML CONC *docetaxel*	1	S Specialty Drug
docetaxel 160 mg/8ml conc	1	S Specialty Drug
DOCETAXEL 20 MG/2ML SOLUTION *docetaxel*	1	S Specialty Drug
docetaxel 20 mg/2ml solution	1	S Specialty Drug
DOCETAXEL 20 MG/ML CONC *docetaxel*	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
docetaxel 20 mg/ml conc	1	S Specialty Drug
DOCETAXEL 200 MG/10ML CONC *docetaxel*	1	S Specialty Drug
DOCETAXEL 80 MG/4ML CONC *docetaxel*	1	S Specialty Drug
docetaxel 80 mg/4ml conc	1	S Specialty Drug
DOCETAXEL 80 MG/8ML SOLUTION *docetaxel*	1	S Specialty Drug
docetaxel 80 mg/8ml solution	1	S Specialty Drug
ETOPOPHOS 100 MG RECON SOLN *etoposide phosphate*	3	S Specialty Drug
etoposide 1 gm/50ml solution	1	S Specialty Drug
etoposide 100 mg/5ml solution	1	S Specialty Drug
ETOPOSIDE 50 MG CAP *etoposide*	2	S Specialty Drug
etoposide 500 mg/25ml solution	1	S Specialty Drug
HALAVEN 1 MG/2ML SOLUTION *eribulin mesylate*	3	S Specialty Drug
IXEMPRA KIT 15 MG RECON SOLN *ixabepilone*	3	S Specialty Drug
IXEMPRA KIT 45 MG RECON SOLN *ixabepilone*	3	S Specialty Drug
JEVTANA 60 MG/1.5ML SOLUTION *cabazitaxel*	3	QL 5 / 30 DAYS S Specialty Drug
MARQIBO 5 MG/31ML SUSPENSION *vincristine sulfate liposome*	3	S Specialty Drug
NAVELBINE 10 MG/ML SOLUTION *vinorelbine tartrate*	3	S Specialty Drug
NAVELBINE 50 MG/5ML SOLUTION *vinorelbine tartrate*	3	S Specialty Drug
paclitaxel 100 mg/16.7ml conc	1	S Specialty Drug
PACLITAXEL 150 MG/25ML CONC *paclitaxel*	1	S Specialty Drug
paclitaxel 30 mg/5ml conc	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
paclitaxel 300 mg/50ml conc	1	S Specialty Drug
TAXOTERE 20 MG/ML CONC *docetaxel*	3	S Specialty Drug
TAXOTERE 80 MG/4ML CONC *docetaxel*	3	S Specialty Drug
TENIPOSIDE 10 MG/ML SOLUTION *teniposide*	1	S Specialty Drug
toposar 1 gm/50ml solution	1	S Specialty Drug
toposar 100 mg/5ml solution	1	S Specialty Drug
toposar 500 mg/25ml solution	1	S Specialty Drug
VINBLASTINE SULFATE 1 MG/ML SOLUTION *vinblastine sulfate*	1	S Specialty Drug
vincasar pfs 1 mg/ml solution	1	S Specialty Drug
VINCRISTINE SULFATE 1 MG/ML SOLUTION *vincristine sulfate*	1	S Specialty Drug
vinorelbine tartrate 10 mg/ml solution	1	S Specialty Drug
vinorelbine tartrate 50 mg/5ml solution	1	S Specialty Drug
NITROGEN MUSTARDS		
ALKERAN 50 MG RECON SOLN *melphalan hcl*	3	S Specialty Drug
cyclophosphamide 1 gm recon soln	1	S Specialty Drug
cyclophosphamide 2 gm recon soln	1	S Specialty Drug
cyclophosphamide 25 mg cap	1	S Specialty Drug
cyclophosphamide 50 mg cap	1	S Specialty Drug
cyclophosphamide 500 mg recon soln	1	S Specialty Drug
EVOMELA 50 MG RECON SOLN *melphalan hcl*	3	S Specialty Drug
IFEX 1 GM RECON SOLN *ifosfamide*	3	S Specialty Drug
IFEX 3 GM RECON SOLN *ifosfamide*	3	S Specialty Drug
ifosfamide 1 gm recon soln	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ifosfamide 1 gm/20ml solution	1	S Specialty Drug
IFOSFAMIDE 3 GM RECON SOLN *ifosfamide*	1	S Specialty Drug
ifosfamide 3 gm/60ml solution	1	S Specialty Drug
LEUKERAN 2 MG TAB *chlorambucil*	2	S Specialty Drug
melphalan 2 mg tab	1	S Specialty Drug
melphalan hcl 50 mg recon soln	1	S Specialty Drug
MUSTARGEN 10 MG RECON SOLN *mechlorethamine hcl*	3	S Specialty Drug
NITROSOUREAS		
BICNU 100 MG RECON SOLN *carmustine*	3	S Specialty Drug
carmustine 100 mg recon soln	1	S Specialty Drug
GLEOSTINE 10 MG CAP *lomustine*	2	S Specialty Drug
GLEOSTINE 100 MG CAP *lomustine*	2	S Specialty Drug
GLEOSTINE 40 MG CAP *lomustine*	2	S Specialty Drug
GLIADEL WAFER 7.7 MG WAFER *carmustine in polifeprosan*	3	S Specialty Drug
ZANOSAR 1 GM RECON SOLN *streptozocin*	3	S Specialty Drug
ONCOLYTIC VIRAL AGENTS - HSV1		
IMLYGIC 1000000 UNIT/ML SUSPENSION *talimogene laherparepvec*	3	S Specialty Drug
IMLYGIC 100000000 UNIT/ML SUSPENSION *talimogene laherparepvec*	3	S Specialty Drug
PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
ALIQOPA 60 MG RECON SOLN *copanlisib hcl*	3	S Specialty Drug
COPIKTRA 15 MG CAP *duvelisib*	3	QL 56 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COPIKTRA 25 MG CAP *duvelisib*	3	QL 56 / 28 DAYS PA S Specialty Drug
PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK *alpelisib*	2	QL 28 / 28 DAYS PA S Specialty Drug
PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK *alpelisib*	2	QL 56 / 28 DAYS PA S Specialty Drug
PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK *alpelisib*	2	QL 56 / 28 DAYS PA S Specialty Drug
ZYDELIG 100 MG TAB *idelalisib*	2	QL 60 / 30 DAYS PA S Specialty Drug
ZYDELIG 150 MG TAB *idelalisib*	2	QL 60 / 30 DAYS PA S Specialty Drug
POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
LYNPARZA 100 MG TAB *olaparib*	2	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
LYNPARZA 150 MG TAB *olaparib*	2	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
LYNPARZA 50 MG CAP *olaparib*	2	QL 480 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RUBRACA 250 MG TAB *rucaparib camsylate*	2	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
RUBRACA 300 MG TAB *rucaparib camsylate*	2	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
TALZENNA 0.25 MG CAP *talazoparib tosylate*	2	QL 90 / 30 DAYS PA S Specialty Drug
TALZENNA 1 MG CAP *talazoparib tosylate*	2	QL 30 / 30 DAYS PA S Specialty Drug
ZEJULA 100 MG CAP *niraparib tosylate*	3	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
PROGESTINS-ANTINEOPLASTIC		
DEPO-PROVERA 400 MG/ML SUSPENSION *medroxyprogesterone acetate (antineoplastic)*	3	
HYDROXYPROGESTERONE CAPROATE 1.25 GM/5ML SOLUTION *hydroxyprogesterone caproate (antineoplastic)*	1	GL Female S Specialty Drug
megestrol acetate 20 mg tab	1	
megestrol acetate 40 mg tab	1	
megestrol acetate 40 mg/ml suspension	1	
megestrol acetate 400 mg/10ml suspension	1	
RETINOIDS		
tretinoin 10 mg cap	1	QL 90 / 365 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE RETINOID X RECEPTOR AGONISTS		
bexarotene 75 mg cap	1	PA S Specialty Drug
TETRAHYDROISOQUINOLINES		
YONDELIS 1 MG RECON SOLN *trabectedin*	3	S Specialty Drug
TOPOISOMERASE I INHIBITORS		
CAMPTOSAR 100 MG/5ML SOLUTION *irinotecan hcl*	3	S Specialty Drug
CAMPTOSAR 300 MG/15ML SOLUTION *irinotecan hcl*	3	S Specialty Drug
CAMPTOSAR 40 MG/2ML SOLUTION *irinotecan hcl*	3	S Specialty Drug
HYCAMTIN 0.25 MG CAP *topotecan hcl*	2	PA S Specialty Drug
HYCAMTIN 1 MG CAP *topotecan hcl*	2	PA S Specialty Drug
HYCAMTIN 4 MG RECON SOLN *topotecan hcl*	3	S Specialty Drug
irinotecan hcl 100 mg/5ml solution	1	S Specialty Drug
irinotecan hcl 300 mg/15ml solution	1	S Specialty Drug
irinotecan hcl 40 mg/2ml solution	1	S Specialty Drug
IRINOTECAN HCL 500 MG/25ML SOLUTION *irinotecan hcl*	1	S Specialty Drug
ONIVYDE 43 MG/10ML INJECTABLE *irinotecan hcl liposome*	3	S Specialty Drug
topotecan hcl 4 mg recon soln	1	S Specialty Drug
TOPOTECAN HCL 4 MG/4ML SOLUTION *topotecan hcl*	1	S Specialty Drug
topotecan hcl 4 mg/4ml solution	1	S Specialty Drug
URINARY TRACT PROTECTIVE AGENTS		
ETHYOL 500 MG RECON SOLN *amifostine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mesna 100 mg/ml solution	1	
MESNEX 100 MG/ML SOLUTION *mesna*	3	
MESNEX 400 MG TAB *mesna*	2	
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS		
AVASTIN 100 MG/4ML SOLUTION *bevacizumab*	3	S Specialty Drug
AVASTIN 400 MG/16ML SOLUTION *bevacizumab*	3	S Specialty Drug
CYRAMZA 100 MG/10ML SOLUTION *ramucirumab*	3	S Specialty Drug
CYRAMZA 500 MG/50ML SOLUTION *ramucirumab*	3	S Specialty Drug
MVASI 100 MG/4ML SOLUTION *bevacizumab-awwb*	3	S Specialty Drug
MVASI 400 MG/16ML SOLUTION *bevacizumab-awwb*	3	S Specialty Drug
ZALTRAP 100 MG/4ML SOLUTION *ziv-aflibercept*	3	S Specialty Drug
ZALTRAP 200 MG/8ML SOLUTION *ziv-aflibercept*	3	S Specialty Drug
ZIRABEV 100 MG/4ML SOLUTION *bevacizumab-bvzr*	3	S Specialty Drug
ZIRABEV 400 MG/16ML SOLUTION *bevacizumab-bvzr*	3	S Specialty Drug
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ADENOSINE RECEPTOR ANTAGONIST		
NOURIANZ 20 MG TAB *istradefylline*	3	QL 30 / 30 DAYS S Specialty Drug
NOURIANZ 40 MG TAB *istradefylline*	3	QL 30 / 30 DAYS S Specialty Drug
ANTIPARKINSON ANTICHOLINERGICS		
benztropine mesylate 0.5 mg tab	1	
benztropine mesylate 1 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
benztropine mesylate 1 mg/ml solution	1	
benztropine mesylate 2 mg tab	1	
COGENTIN 1 MG/ML SOLUTION *benztropine mesylate*	3	
trihexyphenidyl hcl 0.4 mg/ml solution	1	
trihexyphenidyl hcl 2 mg tab	1	
trihexyphenidyl hcl 5 mg tab	1	
ANTIPARKINSON DOPAMINERGICS		
amantadine hcl 100 mg cap	1	
amantadine hcl 100 mg tab	1	
amantadine hcl 50 mg/5ml syrup	1	
bromocriptine mesylate 2.5 mg tab	1	
bromocriptine mesylate 5 mg cap	1	
GOCOVRI 137 MG CAP ER 24H *amantadine hcl*	3	QL 60 / 30 DAYS PA S Specialty Drug
GOCOVRI 68.5 MG CAP ER 24H *amantadine hcl*	3	QL 30 / 30 DAYS PA S Specialty Drug
INBRIJA 42 MG CAP *levodopa*	2	QL 30 / 30 DAYS S Specialty Drug
OSMOLEX ER 129 & 193 MG TB24 THPK *amantadine hcl*	3	QL 60 / 30 DAYS PA
OSMOLEX ER 129 MG TAB ER 24H *amantadine hcl*	3	QL 30 / 30 DAYS PA
OSMOLEX ER 193 MG TAB ER 24H *amantadine hcl*	3	QL 30 / 30 DAYS PA
OSMOLEX ER 258 MG TAB ER 24H *amantadine hcl*	3	QL 30 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
rasagiline mesylate 0.5 mg tab	1	
rasagiline mesylate 1 mg tab	1	
selegiline hcl 5 mg cap	1	
SELEGILINE HCL 5 MG TAB *selegiline hcl*	3	
selegiline hcl 5 mg tab	1	
XADAGO 100 MG TAB *safinamide mesylate*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old
XADAGO 50 MG TAB *safinamide mesylate*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old
ZELAPAR 1.25 MG TAB DISP *selegiline hcl*	3	
CENTRAL/PERIPHERAL COMT INHIBITORS		
tolcapone 100 mg tab	1	
DECARBOXYLASE INHIBITORS		
carbidopa 25 mg tab	1	
LEVODOPA COMBINATIONS		
carbidopa-levodopa 10-100 mg tab	1	
carbidopa-levodopa 10-100 mg tab disp	1	
carbidopa-levodopa 25-100 mg tab	1	
carbidopa-levodopa 25-100 mg tab disp	1	
carbidopa-levodopa 25-250 mg tab	1	
carbidopa-levodopa 25-250 mg tab disp	1	
carbidopa-levodopa er 25-100 mg tab er	1	
carbidopa-levodopa er 50-200 mg tab er	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 12.5-50-200 MG TAB *carbidopa-levodopa-entacapone*	3	
CARBIDOPA-LEVODOPA-ENTACAPONE 18.75-75-200 MG TAB *carbidopa-levodopa-entacapone*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARBIDOPA-LEVODOPA-ENTACAPONE 25-100-200 MG TAB *carbidopa-levodopa-entacapone*	3	
CARBIDOPA-LEVODOPA-ENTACAPONE 31.25-125-200 MG TAB *carbidopa-levodopa-entacapone*	3	
CARBIDOPA-LEVODOPA-ENTACAPONE 37.5-150-200 MG TAB *carbidopa-levodopa-entacapone*	3	
CARBIDOPA-LEVODOPA-ENTACAPONE 50-200-200 MG TAB *carbidopa-levodopa-entacapone*	3	
DUOPA 4.63-20 MG/ML SUSPENSION *carbidopa-levodopa*	3	QL 30 / 30 DAYS S Specialty Drug
RYTARY 23.75-95 MG CAP ER *carbidopa-levodopa*	3	
RYTARY 36.25-145 MG CAP ER *carbidopa-levodopa*	3	
RYTARY 48.75-195 MG CAP ER *carbidopa-levodopa*	3	
RYTARY 61.25-245 MG CAP ER *carbidopa-levodopa*	3	
STALEVO 100 25-100-200 MG TAB *carbidopa-levodopa-entacapone*	3	
STALEVO 125 31.25-125-200 MG TAB *carbidopa-levodopa-entacapone*	3	
STALEVO 150 37.5-150-200 MG TAB *carbidopa-levodopa-entacapone*	3	
STALEVO 200 50-200-200 MG TAB *carbidopa-levodopa-entacapone*	3	
STALEVO 50 12.5-50-200 MG TAB *carbidopa-levodopa-entacapone*	3	
STALEVO 75 18.75-75-200 MG TAB *carbidopa-levodopa-entacapone*	3	
NONERGOLINE DOPAMINE RECEPTOR AGONISTS		
APOKYN 30 MG/3ML SOLN CART *apomorphine hydrochloride*	3	QL 60 / 30 DAYS S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KYNMOBI 10 MG FILM *apomorphine hydrochloride*	2	
KYNMOBI 15 MG FILM *apomorphine hydrochloride*	2	
KYNMOBI 20 MG FILM *apomorphine hydrochloride*	2	
KYNMOBI 25 MG FILM *apomorphine hydrochloride*	2	
KYNMOBI 30 MG FILM *apomorphine hydrochloride*	2	
NEUPRO 1 MG/24HR PATCH 24HR *rotigotine*	3	
NEUPRO 2 MG/24HR PATCH 24HR *rotigotine*	3	
NEUPRO 3 MG/24HR PATCH 24HR *rotigotine*	3	
NEUPRO 4 MG/24HR PATCH 24HR *rotigotine*	3	
NEUPRO 6 MG/24HR PATCH 24HR *rotigotine*	3	
NEUPRO 8 MG/24HR PATCH 24HR *rotigotine*	3	
pramipexole dihydrochloride 0.125 mg tab	1	
pramipexole dihydrochloride 0.25 mg tab	1	
pramipexole dihydrochloride 0.5 mg tab	1	
pramipexole dihydrochloride 0.75 mg tab	1	
pramipexole dihydrochloride 1 mg tab	1	
pramipexole dihydrochloride 1.5 mg tab	1	
pramipexole dihydrochloride er 0.375 mg tab er 24h	1	
pramipexole dihydrochloride er 0.75 mg tab er 24h	1	
pramipexole dihydrochloride er 1.5 mg tab er 24h	1	
pramipexole dihydrochloride er 2.25 mg tab er 24h	1	
pramipexole dihydrochloride er 3 mg tab er 24h	1	
pramipexole dihydrochloride er 3.75 mg tab er 24h	1	
pramipexole dihydrochloride er 4.5 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ropinirole hcl 0.25 mg tab	1	
ropinirole hcl 0.5 mg tab	1	
ropinirole hcl 1 mg tab	1	
ropinirole hcl 2 mg tab	1	
ropinirole hcl 3 mg tab	1	
ropinirole hcl 4 mg tab	1	
ropinirole hcl 5 mg tab	1	
ropinirole hcl er 12 mg tab er 24h	1	
ropinirole hcl er 2 mg tab er 24h	1	
ropinirole hcl er 4 mg tab er 24h	1	
ropinirole hcl er 6 mg tab er 24h	1	
ropinirole hcl er 8 mg tab er 24h	1	
PERIPHERAL COMT INHIBITORS		
entacapone 200 mg tab	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
LITHIUM 8 MEQ/5ML SOLUTION *lithium*	2	
LITHIUM CARBONATE 150 MG CAP *lithium carbonate*	3	
lithium carbonate 150 mg cap	1	
lithium carbonate 300 mg cap	1	
lithium carbonate 300 mg tab	1	
LITHIUM CARBONATE 600 MG CAP *lithium carbonate*	3	
lithium carbonate 600 mg cap	1	
lithium carbonate er 300 mg tab er	1	
lithium carbonate er 450 mg tab er	1	
LITHOBID 300 MG TAB ER *lithium carbonate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPSYCHOTICS - MISC.		
CAPLYTA 42 MG CAP *lumateperone tosylate*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
EQUETRO 100 MG CAP ER 12H *carbamazepine (antipsychotic)*	3	
EQUETRO 200 MG CAP ER 12H *carbamazepine (antipsychotic)*	3	
EQUETRO 300 MG CAP ER 12H *carbamazepine (antipsychotic)*	3	
GEODON 20 MG RECON SOLN *ziprasidone mesylate*	3	QL 2 / 30 DAYS ST
LATUDA 120 MG TAB *lurasidone hcl*	3	QL 30 / 30 DAYS ST AL1 At least 10 yrs old
LATUDA 20 MG TAB *lurasidone hcl*	3	QL 30 / 30 DAYS ST AL1 At least 10 yrs old
LATUDA 40 MG TAB *lurasidone hcl*	3	QL 30 / 30 DAYS ST AL1 At least 10 yrs old
LATUDA 60 MG TAB *lurasidone hcl*	3	QL 30 / 30 DAYS ST AL1 At least 10 yrs old
LATUDA 80 MG TAB *lurasidone hcl*	3	QL 60 / 30 DAYS ST AL1 At least 10 yrs old
NUPLAZID 10 MG TAB *pimavanserin tartrate*	3	QL 30 / 30 DAYS PA S Specialty Drug
NUPLAZID 17 MG TAB *pimavanserin tartrate*	3	QL 60 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUPLAZID 34 MG CAP *pimavanserin tartrate*	3	QL 30 / 30 DAYS PA S Specialty Drug
VRAYLAR 1.5 & 3 MG CAP THPK *cariprazine hcl*	3	QL 7 / 180 DAYS ST AL1 At least 18 yrs old
VRAYLAR 1.5 MG CAP *cariprazine hcl*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
VRAYLAR 3 MG CAP *cariprazine hcl*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
VRAYLAR 4.5 MG CAP *cariprazine hcl*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
VRAYLAR 6 MG CAP *cariprazine hcl*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ziprasidone hcl 20 mg cap	1	QL 60 / 30 DAYS AL1 At least 18 yrs old
ziprasidone hcl 40 mg cap	1	QL 60 / 30 DAYS AL1 At least 18 yrs old
ziprasidone hcl 60 mg cap	1	QL 60 / 30 DAYS AL1 At least 18 yrs old
ziprasidone hcl 80 mg cap	1	QL 60 / 30 DAYS AL1 At least 18 yrs old
ziprasidone mesylate 20 mg recon soln	1	QL 2 / 30 DAYS
BENZISOXAZOLES		
FANAPT 1 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FANAPT 10 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT 12 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT 2 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT 4 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT 6 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT 8 MG TAB *iloperidone*	3	QL 60 / 30 DAYS ST AL1 At least 18 yrs old
FANAPT TITRATION PACK 1 & 2 & 4 & 6 MG TAB *iloperidone*	3	QL 8 / 180 DAYS ST AL1 At least 18 yrs old
INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR *paliperidone palmitate*	3	QL 0.75 / 28 DAYS ST AL1 At least 18 yrs old
INVEGA SUSTENNA 156 MG/ML SUSP PRSYR *paliperidone palmitate*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old
INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR *paliperidone palmitate*	3	QL 1.5 / 28 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR *paliperidone palmitate*	3	QL 0.25 / 28 DAYS ST AL1 At least 18 yrs old
INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR *paliperidone palmitate*	3	QL 0.5 / 28 DAYS ST AL1 At least 18 yrs old
INVEGA TRINZA 273 MG/0.875ML SUSP PRSYR *paliperidone palmitate*	3	QL 1 / 90 DAYS ST AL1 At least 18 yrs old
INVEGA TRINZA 410 MG/1.315ML SUSP PRSYR *paliperidone palmitate*	3	QL 1 / 90 DAYS ST AL1 At least 18 yrs old
INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR *paliperidone palmitate*	3	QL 2 / 90 DAYS ST AL1 At least 18 yrs old
INVEGA TRINZA 819 MG/2.625ML SUSP PRSYR *paliperidone palmitate*	3	QL 3 / 90 DAYS ST AL1 At least 18 yrs old
paliperidone er 1.5 mg tab er 24h	1	QL 30 / 30 DAYS AL1 At least 12 yrs old
paliperidone er 3 mg tab er 24h	1	QL 30 / 30 DAYS AL1 At least 12 yrs old
paliperidone er 6 mg tab er 24h	1	QL 60 / 30 DAYS AL1 At least 12 yrs old
paliperidone er 9 mg tab er 24h	1	QL 30 / 30 DAYS AL1 At least 12 yrs old
PERSERIS 120 MG PRSYR *risperidone*	3	QL 1 / 30 DAYS ST AL1 At least 18 yrs old
PERSERIS 90 MG PRSYR *risperidone*	3	QL 1 / 30 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RISPERDAL CONSTA 12.5 MG SRER *risperidone microspheres*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
RISPERDAL CONSTA 25 MG SRER *risperidone microspheres*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
RISPERDAL CONSTA 37.5 MG SRER *risperidone microspheres*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
RISPERDAL CONSTA 50 MG SRER *risperidone microspheres*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
risperidone 0.25 mg tab	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
RISPERIDONE 0.25 MG TAB DISP *risperidone*	3	QL 60 / 30 DAYS ST AL1 At least 5 yrs old
risperidone 0.5 mg tab	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 0.5 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 1 mg tab	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 1 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 1 mg/ml solution	1	QL 480 / 30 DAYS AL1 At least 5 yrs old
risperidone 2 mg tab	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 2 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
risperidone 3 mg tab	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 3 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone 4 mg tab	1	QL 120 / 30 DAYS AL1 At least 5 yrs old
risperidone 4 mg tab disp	1	QL 120 / 30 DAYS AL1 At least 5 yrs old
risperidone m-tab 0.5 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone m-tab 1 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
risperidone m-tab 2 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 5 yrs old
BUTYROPHENONES		
HALDOL 5 MG/ML SOLUTION *haloperidol lactate*	3	
HALDOL DECANOATE 100 MG/ML SOLUTION *haloperidol decanoate*	3	
HALDOL DECANOATE 50 MG/ML SOLUTION *haloperidol decanoate*	3	
haloperidol 0.5 mg tab	1	
haloperidol 1 mg tab	1	
haloperidol 10 mg tab	1	
haloperidol 2 mg tab	1	
haloperidol 20 mg tab	1	
haloperidol 5 mg tab	1	
haloperidol decanoate 100 mg/ml solution	1	
haloperidol decanoate 50 mg/ml solution	1	
haloperidol lactate 2 mg/ml conc	1	
haloperidol lactate 5 mg/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIBENZO-OXEPINO PYRROLES		
SAPHRIS 10 MG SL TAB *asenapine maleate*	3	QL 60 / 30 DAYS ST AL1 At least 10 yrs old
SAPHRIS 2.5 MG SL TAB *asenapine maleate*	3	QL 60 / 30 DAYS ST AL1 At least 10 yrs old
SAPHRIS 5 MG SL TAB *asenapine maleate*	3	QL 60 / 30 DAYS ST AL1 At least 10 yrs old
SECUADO 3.8 MG/24HR PATCH 24HR *asenapine*	3	QL 30 / 30 DAYS ST
SECUADO 5.7 MG/24HR PATCH 24HR *asenapine*	3	QL 30 / 30 DAYS ST
SECUADO 7.6 MG/24HR PATCH 24HR *asenapine*	3	QL 30 / 30 DAYS ST
DIBENZODIAZEPINES		
clozapine 100 mg tab	1	QL 270 / 30 DAYS AL1 At least 18 yrs old
clozapine 100 mg tab disp	1	QL 90 / 30 DAYS AL1 At least 18 yrs old
CLOZAPINE 12.5 MG TAB DISP *clozapine*	3	QL 90 / 30 DAYS ST AL1 At least 18 yrs old
CLOZAPINE 150 MG TAB DISP *clozapine*	3	QL 180 / 30 DAYS ST AL1 At least 18 yrs old
clozapine 200 mg tab	1	QL 120 / 30 DAYS AL1 At least 18 yrs old
CLOZAPINE 200 MG TAB DISP *clozapine*	3	QL 120 / 30 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clozapine 25 mg tab	1	QL 90 / 30 DAYS AL1 At least 18 yrs old
clozapine 25 mg tab disp	1	QL 270 / 30 DAYS AL1 At least 18 yrs old
clozapine 50 mg tab	1	QL 90 / 30 DAYS AL1 At least 18 yrs old
FAZACLO 150 MG TAB DISP *clozapine*	3	QL 180 / 30 DAYS ST AL1 At least 18 yrs old
FAZACLO 200 MG TAB DISP *clozapine*	3	QL 120 / 30 DAYS ST AL1 At least 18 yrs old
VERSACLOZ 50 MG/ML SUSPENSION *clozapine*	3	QL 540 / 30 DAYS ST AL1 At least 18 yrs old
DIBENZOTHIAZEPINES		
quetiapine fumarate 100 mg tab	1	QL 90 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate 200 mg tab	1	QL 90 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate 25 mg tab	1	QL 90 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate 300 mg tab	1	QL 60 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate 400 mg tab	1	QL 60 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate 50 mg tab	1	QL 90 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate er 150 mg tab er 24h	1	QL 30 / 30 DAYS AL1 At least 10 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quetiapine fumarate er 200 mg tab er 24h	1	QL 30 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate er 300 mg tab er 24h	1	QL 60 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate er 400 mg tab er 24h	1	QL 60 / 30 DAYS AL1 At least 10 yrs old
quetiapine fumarate er 50 mg tab er 24h	1	QL 60 / 30 DAYS AL1 At least 10 yrs old
DIBENZOXAZEPINES		
ADASUVE 10 MG AER POW BA *loxapine*	3	AL1 At least 18 yrs old
loxapine succinate 10 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 25 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 5 mg cap	1	AL1 At least 18 yrs old
loxapine succinate 50 mg cap	1	AL1 At least 18 yrs old
DIHYDROINDOLONES		
MOLINDONE HCL 10 MG TAB *molindone hcl*	3	
MOLINDONE HCL 25 MG TAB *molindone hcl*	3	
MOLINDONE HCL 5 MG TAB *molindone hcl*	3	
PHENOTHIAZINES		
chlorpromazine hcl 10 mg tab	1	
chlorpromazine hcl 100 mg tab	1	
chlorpromazine hcl 200 mg tab	1	
chlorpromazine hcl 25 mg tab	1	
chlorpromazine hcl 25 mg/ml solution	1	
chlorpromazine hcl 50 mg tab	1	
CHLORPROMAZINE HCL 50 MG/2ML SOLUTION *chlorpromazine hcl*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
compro 25 mg suppos	1	
fluphenazine decanoate 25 mg/ml solution	1	
fluphenazine hcl 1 mg tab	1	
fluphenazine hcl 10 mg tab	1	
fluphenazine hcl 2.5 mg tab	1	
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR *fluphenazine hcl*	3	
FLUPHENAZINE HCL 2.5 MG/ML SOLUTION *fluphenazine hcl*	1	
fluphenazine hcl 5 mg tab	1	
FLUPHENAZINE HCL 5 MG/ML CONC *fluphenazine hcl*	3	
perphenazine 16 mg tab	1	AL1 At least 12 yrs old
perphenazine 2 mg tab	1	AL1 At least 12 yrs old
perphenazine 4 mg tab	1	AL1 At least 12 yrs old
perphenazine 8 mg tab	1	AL1 At least 12 yrs old
prochlorperazine 25 mg suppos	1	
prochlorperazine edisylate 10 mg/2ml solution	1	
PROCHLORPERAZINE EDISYLATE 50 MG/10ML SOLUTION *prochlorperazine edisylate*	1	
prochlorperazine maleate 10 mg tab	1	
prochlorperazine maleate 5 mg tab	1	
trifluoperazine hcl 1 mg tab	1	
trifluoperazine hcl 10 mg tab	1	
trifluoperazine hcl 2 mg tab	1	
trifluoperazine hcl 5 mg tab	1	
QUINOLINONE DERIVATIVES		
ABILIFY MAINTENA 300 MG PRSYR *aripiprazole*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old
ABILIFY MAINTENA 300 MG SRER *aripiprazole*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ABILIFY MAINTENA 400 MG PRSYR *aripiprazole*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old
ABILIFY MAINTENA 400 MG SRER *aripiprazole*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 10 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 15 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 2 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 20 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 30 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
ABILIFY MYCITE 5 MG TAB *aripiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
aripiprazole 1 mg/ml solution	1	QL 900 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 10 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 10 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 6 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aripiprazole 15 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 15 mg tab disp	1	QL 60 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 2 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 20 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 30 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
aripiprazole 5 mg tab	1	QL 30 / 30 DAYS AL1 At least 6 yrs old
ARISTADA 1064 MG/3.9ML PRSYR *aripiprazole lauroxil*	3	QL 3.9 / 56 DAYS ST AL1 At least 18 yrs old
ARISTADA 441 MG/1.6ML PRSYR *aripiprazole lauroxil*	3	QL 1.6 / 28 DAYS ST AL1 At least 18 yrs old
ARISTADA 662 MG/2.4ML PRSYR *aripiprazole lauroxil*	3	QL 2.4 / 28 DAYS ST AL1 At least 18 yrs old
ARISTADA 882 MG/3.2ML PRSYR *aripiprazole lauroxil*	3	QL 3.2 / 28 DAYS ST AL1 At least 18 yrs old
ARISTADA INITIO 675 MG/2.4ML PRSYR *aripiprazole lauroxil*	3	QL 2.4 / 180 DAYS ST AL1 At least 18 yrs old
REXULTI 0.25 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REXULTI 0.5 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
REXULTI 1 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
REXULTI 2 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
REXULTI 3 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
REXULTI 4 MG TAB *brexpiprazole*	3	QL 30 / 30 DAYS ST AL1 At least 18 yrs old
THIENBENZODIAZEPINES		
olanzapine 10 mg recon soln	1	QL 90 / 30 DAYS AL1 At least 13 yrs old
olanzapine 10 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 10 mg tab disp	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 15 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 15 mg tab disp	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 2.5 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 20 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olanzapine 20 mg tab disp	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 5 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 5 mg tab disp	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
olanzapine 7.5 mg tab	1	QL 30 / 30 DAYS AL1 At least 13 yrs old
ZYPREXA 10 MG RECON SOLN *olanzapine*	3	QL 90 / 30 DAYS ST AL1 At least 13 yrs old
ZYPREXA RELPREVV 210 MG RECON SUSP *olanzapine pamoate*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
ZYPREXA RELPREVV 300 MG RECON SUSP *olanzapine pamoate*	3	QL 2 / 28 DAYS ST AL1 At least 18 yrs old
ZYPREXA RELPREVV 405 MG RECON SUSP *olanzapine pamoate*	3	QL 1 / 28 DAYS ST AL1 At least 18 yrs old
THIOXANTHENES		
thiothixene 1 mg cap	1	
thiothixene 10 mg cap	1	
thiothixene 2 mg cap	1	
thiothixene 5 mg cap	1	
ANTIVIRALS		
ANTIRETROVIRAL COMBINATIONS		
abacavir sulfate-lamivudine 600-300 mg tab	1	QL 30 / 30 DAYS
abacavir-lamivudine-zidovudine 300-150-300 mg tab	1	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATRIPLA 600-200-300 MG TAB *efavirenz-emtricitabine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
BIKTARVY 50-200-25 MG TAB *bictegravir-emtricitabine-tenofovir alafenamide fumarate*	2	QL 30 / 30 DAYS
CIMDUO 300-300 MG TAB *lamivudine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
COMPLERA 200-25-300 MG TAB *emtricitabine-rilpivirine-tenofovir disoproxil fumarate*	3	QL 30 / 30 DAYS
DELSTRIGO 100-300-300 MG TAB *doravirine-lamivudine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
DESCOVY 200-25 MG TAB *emtricitabine-tenofovir alafenamide fumarate*	2	QL 30 / 30 DAYS ACA Affordable Care Act
DOVATO 50-300 MG TAB *dolutegravir sodium-lamivudine*	2	QL 30 / 30 DAYS
efavirenz-lamivudine-tenofovir 400-300-300 mg tab	1	
efavirenz-lamivudine-tenofovir 600-300-300 mg tab	1	
EVOTAZ 300-150 MG TAB *atazanavir sulfate-cobicistat*	2	QL 30 / 30 DAYS
GENVOYA 150-150-200-10 MG TAB *elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide*	2	QL 30 / 30 DAYS
JULUCA 50-25 MG TAB *dolutegravir sodium-rilpivirine hcl*	2	QL 30 / 30 DAYS
KALETRA 100-25 MG TAB *lopinavir-ritonavir*	2	QL 180 / 30 DAYS
KALETRA 200-50 MG TAB *lopinavir-ritonavir*	2	QL 120 / 30 DAYS
lamivudine-zidovudine 150-300 mg tab	1	QL 60 / 30 DAYS
lopinavir-ritonavir 400-100 mg/5ml solution	1	QL 480 / 30 DAYS
ODEFSEY 200-25-25 MG TAB *emtricitabine-rilpivirine-tenofovir alafenamide fumarate*	2	QL 30 / 30 DAYS
PREZCOBIX 800-150 MG TAB *darunavir-cobicistat*	2	QL 30 / 30 DAYS
STRIBILD 150-150-200-300 MG TAB *elvitegravir-cobicistat-emtricitabine-tenofovir df*	3	QL 30 / 30 DAYS
SYMFI 600-300-300 MG TAB *efavirenz-lamivudine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMFI LO 400-300-300 MG TAB *efavirenz-lamivudine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
TEMIXYS 300-300 MG TAB *lamivudine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
TRIUMEQ 600-50-300 MG TAB *abacavir-dolutegravir-lamivudine*	2	QL 30 / 30 DAYS
TRUVADA 100-150 MG TAB *emtricitabine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS ACA Affordable Care Act
TRUVADA 133-200 MG TAB *emtricitabine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS ACA Affordable Care Act
TRUVADA 167-250 MG TAB *emtricitabine-tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS ACA Affordable Care Act
TRUVADA 200-300 MG TAB *emtricitabine-tenofovir disoproxil fumarate*	1	QL 30 / 30 DAYS ACA Affordable Care Act
ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)		
SELZENTRY 150 MG TAB *maraviroc*	3	QL 60 / 30 DAYS
SELZENTRY 20 MG/ML SOLUTION *maraviroc*	3	QL 1840 / 30 DAYS
SELZENTRY 25 MG TAB *maraviroc*	3	QL 240 / 30 DAYS
SELZENTRY 300 MG TAB *maraviroc*	3	QL 120 / 30 DAYS
SELZENTRY 75 MG TAB *maraviroc*	3	QL 60 / 30 DAYS
ANTIRETROVIRALS - CD4-DIRECTED POST-ATTACHMENT INHIBITOR		
TROGARZO 200 MG/1.33ML SOLUTION *ibalizumab-uiyk*	3	S Specialty Drug
ANTIRETROVIRALS - FUSION INHIBITORS		
FUZEON 90 MG RECON SOLN *enfuvirtide*	3	QL 60 / 30 DAYS S Specialty Drug
ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR		
RUKOBIA 600 MG TAB ER 12H *fostemsavir tromethamine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIRETROVIRALS - INTEGRASE INHIBITORS		
ISENTRESS 100 MG CHEW TAB *raltegravir potassium*	2	QL 180 / 30 DAYS
ISENTRESS 100 MG PACKET *raltegravir potassium*	2	QL 60 / 30 DAYS
ISENTRESS 25 MG CHEW TAB *raltegravir potassium*	2	QL 180 / 30 DAYS
ISENTRESS 400 MG TAB *raltegravir potassium*	2	QL 60 / 30 DAYS
ISENTRESS HD 600 MG TAB *raltegravir potassium*	2	QL 60 / 30 DAYS
TIVICAY 10 MG TAB *dolutegravir sodium*	2	QL 60 / 30 DAYS
TIVICAY 25 MG TAB *dolutegravir sodium*	2	QL 60 / 30 DAYS
TIVICAY 50 MG TAB *dolutegravir sodium*	2	QL 60 / 30 DAYS
TIVICAY PD 5 MG TAB SOL *dolutegravir sodium*	2	
ANTIRETROVIRALS - PROTEASE INHIBITORS		
APTIVUS 100 MG/ML SOLUTION *tipranavir*	3	QL 380 / 30 DAYS
APTIVUS 250 MG CAP *tipranavir*	3	QL 120 / 30 DAYS
atazanavir sulfate 150 mg cap	1	QL 30 / 30 DAYS
atazanavir sulfate 200 mg cap	1	QL 60 / 30 DAYS
atazanavir sulfate 300 mg cap	1	QL 30 / 30 DAYS
CRIXIVAN 200 MG CAP *indinavir sulfate*	3	QL 270 / 30 DAYS
CRIXIVAN 400 MG CAP *indinavir sulfate*	3	QL 180 / 30 DAYS
fosamprenavir calcium 700 mg tab	1	QL 120 / 30 DAYS
INVIRASE 200 MG CAP *saquinavir mesylate*	3	QL 300 / 30 DAYS
INVIRASE 500 MG TAB *saquinavir mesylate*	3	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEXIVA 50 MG/ML SUSPENSION *fosamprenavir calcium*	3	QL 1800 / 30 DAYS
NORVIR 100 MG CAP *ritonavir*	3	QL 360 / 30 DAYS
NORVIR 100 MG PACKET *ritonavir*	3	QL 360 / 30 DAYS
NORVIR 80 MG/ML SOLUTION *ritonavir*	2	QL 480 / 30 DAYS
PREZISTA 100 MG/ML SUSPENSION *darunavir ethanolate*	2	QL 400 / 30 DAYS
PREZISTA 150 MG TAB *darunavir ethanolate*	2	QL 180 / 30 DAYS
PREZISTA 600 MG TAB *darunavir ethanolate*	2	QL 60 / 30 DAYS
PREZISTA 75 MG TAB *darunavir ethanolate*	2	QL 300 / 30 DAYS
PREZISTA 800 MG TAB *darunavir ethanolate*	2	QL 30 / 30 DAYS
REYATAZ 50 MG PACKET *atazanavir sulfate*	3	QL 240 / 30 DAYS
ritonavir 100 mg tab	1	QL 360 / 30 DAYS
VIRACEPT 250 MG TAB *nelfinavir mesylate*	3	QL 270 / 30 DAYS
VIRACEPT 625 MG TAB *nelfinavir mesylate*	3	QL 120 / 30 DAYS
ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES		
EDURANT 25 MG TAB *rilpivirine hcl*	3	QL 30 / 30 DAYS
efavirenz 200 mg cap	1	QL 60 / 30 DAYS
efavirenz 50 mg cap	1	QL 90 / 30 DAYS
efavirenz 600 mg tab	1	QL 30 / 30 DAYS
INTELENCE 100 MG TAB *etravirine*	2	QL 60 / 30 DAYS
INTELENCE 200 MG TAB *etravirine*	2	QL 60 / 30 DAYS
INTELENCE 25 MG TAB *etravirine*	2	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nevirapine 200 mg tab	1	QL 60 / 30 DAYS
nevirapine 50 mg/5ml suspension	1	QL 1200 / 30 DAYS
nevirapine er 100 mg tab er 24h	1	QL 90 / 30 DAYS
NEVIRAPINE ER 100 MG TAB ER 24H *nevirapine*	3	QL 90 / 30 DAYS
nevirapine er 400 mg tab er 24h	1	QL 30 / 30 DAYS
RESCRIPTOR 100 MG TAB *delavirdine mesylate*	3	QL 360 / 30 DAYS
RESCRIPTOR 200 MG TAB *delavirdine mesylate*	3	QL 180 / 30 DAYS
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES		
abacavir sulfate 20 mg/ml solution	1	QL 960 / 30 DAYS
abacavir sulfate 300 mg tab	1	QL 60 / 30 DAYS
DIDANOSINE 200 MG CAP DR *didanosine*	3	QL 30 / 30 DAYS
DIDANOSINE 250 MG CAP DR *didanosine*	3	QL 30 / 30 DAYS
DIDANOSINE 400 MG CAP DR *didanosine*	3	QL 30 / 30 DAYS
VIDEX 2 GM RECON SOLN *didanosine*	2	QL 1200 / 30 DAYS
VIDEX 4 GM RECON SOLN *didanosine*	2	QL 1200 / 30 DAYS
VIDEX EC 125 MG CAP DR *didanosine*	3	QL 30 / 30 DAYS
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES		
emtricitabine 200 mg cap	1	
EMTRIVA 10 MG/ML SOLUTION *emtricitabine*	3	QL 680 / 28 DAYS
EMTRIVA 200 MG CAP *emtricitabine*	3	QL 30 / 30 DAYS
lamivudine 10 mg/ml solution	1	QL 960 / 30 DAYS
lamivudine 150 mg tab	1	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamivudine 300 mg tab	1	QL 30 / 30 DAYS
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES		
RETROVIR 10 MG/ML SOLUTION *zidovudine*	3	
stavudine 15 mg cap	1	QL 60 / 30 DAYS
stavudine 20 mg cap	1	QL 60 / 30 DAYS
stavudine 30 mg cap	1	QL 60 / 30 DAYS
stavudine 40 mg cap	1	QL 60 / 30 DAYS
ZERIT 1 MG/ML RECON SOLN *stavudine*	3	QL 2400 / 30 DAYS
zidovudine 100 mg cap	1	QL 180 / 30 DAYS
zidovudine 300 mg tab	1	QL 60 / 30 DAYS
zidovudine 50 mg/5ml syrup	1	QL 1920 / 30 DAYS
ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES		
tenofovir disoproxil fumarate 300 mg tab	1	QL 30 / 30 DAYS
VIREAD 150 MG TAB *tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
VIREAD 200 MG TAB *tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
VIREAD 250 MG TAB *tenofovir disoproxil fumarate*	2	QL 30 / 30 DAYS
VIREAD 40 MG/GM POWDER *tenofovir disoproxil fumarate*	2	QL 240 / 30 DAYS
ANTIRETROVIRALS ADJUVANTS		
TYBOST 150 MG TAB *cobicistat*	3	QL 30 / 30 DAYS
CMV AGENTS		
cidofovir 75 mg/ml solution	1	
CYTOVENE 500 MG RECON SOLN *ganciclovir sodium*	3	
FOSCAVIR 6000 MG/250ML SOLUTION *foscarnet sodium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ganciclovir sodium 500 mg recon soln	1	
GANCICLOVIR SODIUM 500 MG/10ML SOLUTION *ganciclovir sodium*	1	
PREVYMIS 240 MG TAB *letermovir*	3	QL 100 / 365 DAYS AL1 At least 18 yrs old
PREVYMIS 240 MG/12ML SOLUTION *letermovir*	3	AL1 At least 18 yrs old
PREVYMIS 480 MG TAB *letermovir*	3	QL 100 / 365 DAYS AL1 At least 18 yrs old
PREVYMIS 480 MG/24ML SOLUTION *letermovir*	3	AL1 At least 18 yrs old
valganciclovir hcl 450 mg tab	1	QL 120 / 30 DAYS
valganciclovir hcl 50 mg/ml recon soln	1	
HEPATITIS B AGENTS		
adefovir dipivoxil 10 mg tab	1	
BARACLUDE 0.05 MG/ML SOLUTION *entecavir*	2	QL 600 / 30 DAYS
entecavir 0.5 mg tab	1	QL 30 / 30 DAYS
entecavir 1 mg tab	1	QL 30 / 30 DAYS
EPIVIR HBV 5 MG/ML SOLUTION *lamivudine (hbv)*	3	
lamivudine 100 mg tab	1	
VEMLIDY 25 MG TAB *tenofovir alafenamide fumarate*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old
HEPATITIS C AGENT - COMBINATIONS		
EPCLUSA 400-100 MG TAB *sofosbuvir-velpatasvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
HARVONI 33.75-150 MG PACKET *ledipasvir-sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HARVONI 45-200 MG PACKET *ledipasvir-sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
HARVONI 45-200 MG TAB *ledipasvir-sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
HARVONI 90-400 MG TAB *ledipasvir-sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
MAVYRET 100-40 MG TAB *glecaprevir-pibrentasvir*	2	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
VOSEVI 400-100-100 MG TAB *sofosbuvir-velpatasvir-voxilaprevir*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
HEPATITIS C AGENTS		
MODERIBA (1200 MG PACK) 600 MG TAB THPK *ribavirin (hepatitis c)*	3	S Specialty Drug
moderiba 200 mg tab	1	QL 180 / 30 DAYS S Specialty Drug
PEGASYS 180 MCG/0.5ML SOLUTION *peginterferon alfa-2a*	2	PA S Specialty Drug
PEGASYS 180 MCG/ML SOLUTION *peginterferon alfa-2a*	2	PA S Specialty Drug
PEGASYS PROCLICK 135 MCG/0.5ML SOLUTION *peginterferon alfa-2a*	2	PA S Specialty Drug
PEGASYS PROCLICK 180 MCG/0.5ML SOLUTION *peginterferon alfa-2a*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEGINTRON 50 MCG/0.5ML KIT *peginterferon alfa-2b*	3	PA S Specialty Drug
REBETOL 40 MG/ML SOLUTION *ribavirin (hepatitis c)*	3	QL 300 / 30 DAYS S Specialty Drug
ribasphere 200 mg cap	1	QL 180 / 30 DAYS S Specialty Drug
ribasphere 200 mg tab	1	QL 180 / 30 DAYS S Specialty Drug
RIBASPHERE 400 MG TAB *ribavirin (hepatitis c)*	3	QL 90 / 30 DAYS S Specialty Drug
RIBASPHERE 600 MG TAB *ribavirin (hepatitis c)*	3	QL 60 / 30 DAYS S Specialty Drug
RIBASPHERE RIBAPAK (1000 PACK) 400 & 600 MG TAB THPK *ribavirin (hepatitis c)*	3	QL 60 / 30 DAYS S Specialty Drug
RIBASPHERE RIBAPAK (1200 PACK) 600 MG TAB THPK *ribavirin (hepatitis c)*	3	QL 60 / 30 DAYS S Specialty Drug
RIBASPHERE RIBAPAK (600 PACK) 200 & 400 MG TAB THPK *ribavirin (hepatitis c)*	3	S Specialty Drug
RIBASPHERE RIBAPAK (800 PACK) 400 MG TAB THPK *ribavirin (hepatitis c)*	3	S Specialty Drug
ribavirin 200 mg cap	1	QL 180 / 30 DAYS S Specialty Drug
ribavirin 200 mg tab	1	QL 180 / 30 DAYS S Specialty Drug
SOVALDI 150 MG PACKET *sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
SOVALDI 200 MG PACKET *sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOVALDI 200 MG TAB *sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
SOVALDI 400 MG TAB *sofosbuvir*	2	QL 30 / 30 DAYS PA S Specialty Drug
HERPES AGENTS - PURINE ANALOGUES		
acyclovir 200 mg cap	1	
acyclovir 200 mg/5ml suspension	1	
acyclovir 400 mg tab	1	
acyclovir 800 mg tab	1	
acyclovir sodium 50 mg/ml solution	1	
SITAVIG 50 MG TAB *acyclovir*	3	QL 2 / Rx AL1 At least 18 yrs old
valacyclovir hcl 1 gm tab	1	
valacyclovir hcl 500 mg tab	1	
HERPES AGENTS - THYMIDINE ANALOGUES		
famciclovir 125 mg tab	1	
famciclovir 250 mg tab	1	
famciclovir 500 mg tab	1	
NEURAMINIDASE INHIBITORS		
oseltamivir phosphate 30 mg cap	1	QL 40 / 120 DAYS
oseltamivir phosphate 45 mg cap	1	QL 20 / 120 DAYS
oseltamivir phosphate 6 mg/ml recon susp	1	QL 300 / 120 DAYS
oseltamivir phosphate 75 mg cap	1	QL 20 / 120 DAYS
RAPIVAB 200 MG/20ML SOLUTION *peramivir*	3	
RELENZA DISKHALER 5 MG/BLISTER AER POW BA *zanamivir*	3	QL 40 / 120 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PA ENDONUCLEASE INHIBITORS		
XOFLUZA (40 MG DOSE) 2 X 20 MG TAB THPK *baloxavir marboxil*	3	QL 4 / 120 DAYS
XOFLUZA (80 MG DOSE) 2 X 40 MG TAB THPK *baloxavir marboxil*	3	QL 4 / 120 DAYS
RSV AGENTS - NUCLEOSIDE ANALOGUES		
ribavirin 6 gm recon soln	1	
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
carvedilol 12.5 mg tab	1	
carvedilol 25 mg tab	1	
carvedilol 3.125 mg tab	1	
carvedilol 6.25 mg tab	1	
carvedilol phosphate er 10 mg cap er 24h	1	
carvedilol phosphate er 20 mg cap er 24h	1	
carvedilol phosphate er 40 mg cap er 24h	1	
carvedilol phosphate er 80 mg cap er 24h	1	
labetalol hcl 100 mg tab	1	
labetalol hcl 200 mg tab	1	
labetalol hcl 300 mg tab	1	
labetalol hcl 5 mg/ml solution	1	
BETA BLOCKERS CARDIO-SELECTIVE		
acebutolol hcl 200 mg cap	1	
acebutolol hcl 400 mg cap	1	
atenolol 100 mg tab	1	
atenolol 25 mg tab	1	
atenolol 50 mg tab	1	
betaxolol hcl 10 mg tab	1	
betaxolol hcl 20 mg tab	1	
bisoprolol fumarate 10 mg tab	1	
bisoprolol fumarate 5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BREVIBLOC 100 MG/10ML SOLUTION *esmolol hcl*	3	
BREVIBLOC IN NACL 2000 MG/100ML SOLUTION *esmolol hcl-sodium chloride*	3	
BREVIBLOC IN NACL 2500 MG/250ML SOLUTION *esmolol hcl-sodium chloride*	3	
BREVIBLOC PREMIXED 2500 MG/250ML SOLUTION *esmolol hcl-sodium chloride*	3	
BREVIBLOC PREMIXED DS 2000 MG/100ML SOLUTION *esmolol hcl-sodium chloride*	3	
BYSTOLIC 10 MG TAB *nebivolol hcl*	3	
BYSTOLIC 2.5 MG TAB *nebivolol hcl*	3	
BYSTOLIC 20 MG TAB *nebivolol hcl*	3	
BYSTOLIC 5 MG TAB *nebivolol hcl*	3	
esmolol hcl 100 mg/10ml solution	1	
ESMOLOL HCL 2000 MG/100ML SOLUTION *esmolol hcl*	1	
ESMOLOL HCL 2500 MG/250ML SOLUTION *esmolol hcl*	1	
esmolol hcl-sodium chloride 2000 mg/100ml solution	1	
esmolol hcl-sodium chloride 2500 mg/250ml solution	1	
KAPSPARGO SPRINKLE 100 MG CP24 SPRNK *metoprolol succinate*	3	
KAPSPARGO SPRINKLE 200 MG CP24 SPRNK *metoprolol succinate*	3	
KAPSPARGO SPRINKLE 25 MG CP24 SPRNK *metoprolol succinate*	3	
KAPSPARGO SPRINKLE 50 MG CP24 SPRNK *metoprolol succinate*	3	
metoprolol succinate er 100 mg tab er 24h	1	
metoprolol succinate er 200 mg tab er 24h	1	
metoprolol succinate er 25 mg tab er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metoprolol succinate er 50 mg tab er 24h	1	
metoprolol tartrate 100 mg tab	1	
metoprolol tartrate 25 mg tab	1	
metoprolol tartrate 37.5 mg tab	1	
METOPROLOL TARTRATE 5 MG/5ML SOLN CART *metoprolol tartrate*	1	
metoprolol tartrate 5 mg/5ml solution	1	
metoprolol tartrate 50 mg tab	1	
metoprolol tartrate 75 mg tab	1	
BETA BLOCKERS NON-SELECTIVE		
HEMANGEOL 4.28 MG/ML SOLUTION *propranolol hcl*	3	
INDERAL XL 120 MG CAP ER 24H *propranolol hcl sustained-release beads*	3	
INDERAL XL 80 MG CAP ER 24H *propranolol hcl sustained-release beads*	3	
INNOPRAN XL 120 MG CAP ER 24H *propranolol hcl sustained-release beads*	3	
INNOPRAN XL 80 MG CAP ER 24H *propranolol hcl sustained-release beads*	3	
nadolol 20 mg tab	1	
nadolol 40 mg tab	1	
nadolol 80 mg tab	1	
pindolol 10 mg tab	1	
pindolol 5 mg tab	1	
propranolol hcl 1 mg/ml solution	1	
propranolol hcl 10 mg tab	1	
propranolol hcl 20 mg tab	1	
PROPRANOLOL HCL 20 MG/5ML SOLUTION *propranolol hcl*	2	
propranolol hcl 40 mg tab	1	
PROPRANOLOL HCL 40 MG/5ML SOLUTION *propranolol hcl*	2	
propranolol hcl 60 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
propranolol hcl 80 mg tab	1	
propranolol hcl er 120 mg cap er 24h	1	
propranolol hcl er 160 mg cap er 24h	1	
propranolol hcl er 60 mg cap er 24h	1	
propranolol hcl er 80 mg cap er 24h	1	
sorine 120 mg tab	1	
sorine 160 mg tab	1	
sorine 240 mg tab	1	
sorine 80 mg tab	1	
sotalol hcl (af) 120 mg tab	1	
sotalol hcl (af) 160 mg tab	1	
sotalol hcl (af) 80 mg tab	1	
sotalol hcl 120 mg tab	1	
SOTALOL HCL 150 MG/10ML SOLUTION *sotalol hcl*	1	
sotalol hcl 160 mg tab	1	
sotalol hcl 240 mg tab	1	
sotalol hcl 80 mg tab	1	
SOTYLIZE 5 MG/ML SOLUTION *sotalol hcl*	3	
timolol maleate 10 mg tab	1	
timolol maleate 20 mg tab	1	
timolol maleate 5 mg tab	1	
CALCIUM CHANNEL BLOCKERS		
afeditab cr 30 mg tab er 24h	1	
afeditab cr 60 mg tab er 24h	1	
amlodipine besylate 10 mg tab	1	
amlodipine besylate 2.5 mg tab	1	
amlodipine besylate 5 mg tab	1	
CARDENE IV 20-0.86 MG/200ML-% SOLUTION *nicardipine hcl in sodium chloride*	3	
CARDENE IV 20-4.8 MG/200ML-% SOLUTION *nicardipine hcl in dextrose*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARDENE IV 40-0.83 MG/200ML-% SOLUTION *nicardipine hcl in sodium chloride*	3	
CARDIZEM LA 120 MG TAB ER 24H *diltiazem hcl coated beads*	3	
cartia xt 120 mg cap er 24h	1	
cartia xt 180 mg cap er 24h	1	
cartia xt 240 mg cap er 24h	1	
cartia xt 300 mg cap er 24h	1	
CLEVIPREX 25 MG/50ML EMULSION *clevidipine*	3	
CLEVIPREX 50 MG/100ML EMULSION *clevidipine*	3	
dilt-xr 120 mg cap er 24h	1	
dilt-xr 180 mg cap er 24h	1	
dilt-xr 240 mg cap er 24h	1	
diltiazem cd 120 mg cap er 24h	1	
diltiazem cd 180 mg cap er 24h	1	
diltiazem cd 240 mg cap er 24h	1	
diltiazem cd 300 mg cap er 24h	1	
DILTIAZEM HCL 100 MG RECON SOLN *diltiazem hcl*	1	
diltiazem hcl 120 mg tab	1	
diltiazem hcl 125 mg/25ml solution	1	
diltiazem hcl 25 mg/5ml solution	1	
diltiazem hcl 30 mg tab	1	
diltiazem hcl 50 mg/10ml solution	1	
diltiazem hcl 60 mg tab	1	
diltiazem hcl 90 mg tab	1	
diltiazem hcl er 120 mg cap er 12h	1	
diltiazem hcl er 120 mg cap er 24h	1	
diltiazem hcl er 180 mg cap er 24h	1	
diltiazem hcl er 240 mg cap er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem hcl er 60 mg cap er 12h	1	
diltiazem hcl er 90 mg cap er 12h	1	
diltiazem hcl er beads 120 mg cap er 24h	1	
diltiazem hcl er beads 180 mg cap er 24h	1	
diltiazem hcl er beads 240 mg cap er 24h	1	
diltiazem hcl er beads 300 mg cap er 24h	1	
diltiazem hcl er beads 360 mg cap er 24h	1	
diltiazem hcl er beads 420 mg cap er 24h	1	
diltiazem hcl er coated beads 120 mg cap er 24h	1	
diltiazem hcl er coated beads 180 mg cap er 24h	1	
diltiazem hcl er coated beads 180 mg tab er 24h	1	
diltiazem hcl er coated beads 240 mg cap er 24h	1	
diltiazem hcl er coated beads 240 mg tab er 24h	1	
diltiazem hcl er coated beads 300 mg cap er 24h	1	
diltiazem hcl er coated beads 300 mg tab er 24h	1	
diltiazem hcl er coated beads 360 mg cap er 24h	1	
diltiazem hcl er coated beads 360 mg tab er 24h	1	
diltiazem hcl er coated beads 420 mg tab er 24h	1	
felodipine er 10 mg tab er 24h	1	
felodipine er 2.5 mg tab er 24h	1	
felodipine er 5 mg tab er 24h	1	
isradipine 2.5 mg cap	1	
isradipine 5 mg cap	1	
KATERZIA 1 MG/ML SUSPENSION *amlodipine benzoate*	3	AL1 Up to 18 yrs old
matzim la 180 mg tab er 24h	1	
matzim la 240 mg tab er 24h	1	
matzim la 300 mg tab er 24h	1	
matzim la 360 mg tab er 24h	1	
matzim la 420 mg tab er 24h	1	
nicardipine hcl 2.5 mg/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicardipine hcl 20 mg cap	1	
nicardipine hcl 30 mg cap	1	
NICARDIPINE HCL IN NACL 20-0.9 MG/200ML-% SOLUTION *nicardipine hcl in sodium chloride*	1	
NICARDIPINE HCL IN NACL 40-0.9 MG/200ML-% SOLUTION *nicardipine hcl in sodium chloride*	1	
nifedipine 10 mg cap	1	
nifedipine 20 mg cap	1	
nifedipine er 30 mg tab er 24h	1	
nifedipine er 60 mg tab er 24h	1	
nifedipine er 90 mg tab er 24h	1	
nifedipine er osmotic release 30 mg tab er 24h	1	
nifedipine er osmotic release 60 mg tab er 24h	1	
nifedipine er osmotic release 90 mg tab er 24h	1	
nimodipine 30 mg cap	1	
nisoldipine er 17 mg tab er 24h	1	
NISOLDIPINE ER 20 MG TAB ER 24H *nisoldipine*	3	
NISOLDIPINE ER 25.5 MG TAB ER 24H *nisoldipine*	3	
NISOLDIPINE ER 30 MG TAB ER 24H *nisoldipine*	3	
nisoldipine er 34 mg tab er 24h	1	
NISOLDIPINE ER 40 MG TAB ER 24H *nisoldipine*	3	
nisoldipine er 8.5 mg tab er 24h	1	
NYMALIZE 30 MG/10ML SOLUTION *nimodipine*	3	
NYMALIZE 6 MG/ML SOLUTION *nimodipine*	3	
NYMALIZE 60 MG/20ML SOLUTION *nimodipine*	3	
taztia xt 120 mg cap er 24h	1	
taztia xt 180 mg cap er 24h	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
taztia xt 240 mg cap er 24h	1	
taztia xt 300 mg cap er 24h	1	
taztia xt 360 mg cap er 24h	1	
tiadylt er 120 mg cap er 24h	1	
tiadylt er 180 mg cap er 24h	1	
tiadylt er 240 mg cap er 24h	1	
tiadylt er 300 mg cap er 24h	1	
tiadylt er 360 mg cap er 24h	1	
tiadylt er 420 mg cap er 24h	1	
verapamil hcl 120 mg tab	1	
verapamil hcl 2.5 mg/ml solution	1	
verapamil hcl 40 mg tab	1	
verapamil hcl 80 mg tab	1	
verapamil hcl er 100 mg cap er 24h	1	
VERAPAMIL HCL ER 100 MG CAP ER 24H *verapamil hcl*	3	
verapamil hcl er 120 mg cap er 24h	1	
verapamil hcl er 120 mg tab er	1	
verapamil hcl er 180 mg cap er 24h	1	
verapamil hcl er 180 mg tab er	1	
verapamil hcl er 200 mg cap er 24h	1	
VERAPAMIL HCL ER 200 MG CAP ER 24H *verapamil hcl*	3	
verapamil hcl er 240 mg cap er 24h	1	
verapamil hcl er 240 mg tab er	1	
verapamil hcl er 300 mg cap er 24h	1	
VERAPAMIL HCL ER 300 MG CAP ER 24H *verapamil hcl*	3	
VERAPAMIL HCL ER 360 MG CAP ER 24H *verapamil hcl*	3	
VERELAN PM 100 MG CAP ER 24H *verapamil hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERELAN PM 200 MG CAP ER 24H *verapamil hcl*	3	
VERELAN PM 300 MG CAP ER 24H *verapamil hcl*	3	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
digitek 125 mcg tab	1	
digitek 250 mcg tab	1	
digox 125 mcg tab	1	
digox 250 mcg tab	1	
DIGOXIN 0.05 MG/ML SOLUTION *digoxin*	3	
digoxin 0.05 mg/ml solution	1	
digoxin 0.25 mg/ml solution	1	
digoxin 125 mcg tab	1	
digoxin 250 mcg tab	1	
LANOXIN 0.25 MG/ML SOLUTION *digoxin*	3	
LANOXIN 125 MCG TAB *digoxin*	3	
LANOXIN 187.5 MCG TAB *digoxin*	3	
LANOXIN 250 MCG TAB *digoxin*	3	
LANOXIN 62.5 MCG TAB *digoxin*	3	
LANOXIN PEDIATRIC 0.1 MG/ML SOLUTION *digoxin*	3	
PHOSPHODIESTERASE INHIBITORS		
milrinone lactate 10 mg/10ml solution	1	
milrinone lactate 20 mg/20ml solution	1	
milrinone lactate 50 mg/50ml solution	1	
milrinone lactate in dextrose 20-5 mg/100ml-% solution	1	
milrinone lactate in dextrose 40-5 mg/200ml-% solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARDIOVASCULAR AGENTS - MISC.		
CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB		
amlodipine-atorvastatin 10-10 mg tab	1	
amlodipine-atorvastatin 10-20 mg tab	1	
amlodipine-atorvastatin 10-40 mg tab	1	
amlodipine-atorvastatin 10-80 mg tab	1	
amlodipine-atorvastatin 2.5-10 mg tab	1	
amlodipine-atorvastatin 2.5-20 mg tab	1	
amlodipine-atorvastatin 2.5-40 mg tab	1	
amlodipine-atorvastatin 5-10 mg tab	1	
amlodipine-atorvastatin 5-20 mg tab	1	
amlodipine-atorvastatin 5-40 mg tab	1	
amlodipine-atorvastatin 5-80 mg tab	1	
CARDIOPLEGIC SOLUTIONS		
cardioplegic solution	1	
PLEGISOL SOLUTION *cardioplegic soln*	3	
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO 24-26 MG TAB *sacubitril-valsartan*	2	
ENTRESTO 49-51 MG TAB *sacubitril-valsartan*	2	
ENTRESTO 97-103 MG TAB *sacubitril-valsartan*	2	
NITRATE & VASODILATOR COMBINATIONS		
BIDIL 20-37.5 MG TAB *isosorbide dinitrate-hydralazine hcl*	3	
PROSTAGLANDIN - IMPOTENCE AGENTS		
CAVERJECT 20 MCG RECON SOLN *alprostadil (vasodilator)*	3	GL Male
CAVERJECT 40 MCG RECON SOLN *alprostadil (vasodilator)*	3	GL Male
CAVERJECT IMPULSE 10 MCG KIT *alprostadil (vasodilator)*	3	GL Male

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAVERJECT IMPULSE 20 MCG KIT *alprostadil (vasodilator)*	3	GL Male
EDEX 10 MCG KIT *alprostadil (vasodilator)*	3	GL Male
EDEX 20 MCG KIT *alprostadil (vasodilator)*	3	GL Male
EDEX 40 MCG KIT *alprostadil (vasodilator)*	3	GL Male
MUSE 1000 MCG PELLET *alprostadil (vasodilator)*	3	GL Male
MUSE 125 MCG PELLET *alprostadil (vasodilator)*	3	GL Male
MUSE 250 MCG PELLET *alprostadil (vasodilator)*	3	GL Male
MUSE 500 MCG PELLET *alprostadil (vasodilator)*	3	GL Male
PROSTAGLANDIN VASODILATORS		
epoprostenol sodium 0.5 mg recon soln	1	S Specialty Drug
epoprostenol sodium 1.5 mg recon soln	1	S Specialty Drug
FLOLAN 0.5 MG RECON SOLN *epoprostenol sodium*	3	S Specialty Drug
FLOLAN 1.5 MG RECON SOLN *epoprostenol sodium*	3	S Specialty Drug
ORENITRAM 0.125 MG TAB ER *treprostinil diolamine*	3	QL 90 / 30 DAYS PA S Specialty Drug
ORENITRAM 0.25 MG TAB ER *treprostinil diolamine*	3	QL 90 / 30 DAYS PA S Specialty Drug
ORENITRAM 1 MG TAB ER *treprostinil diolamine*	3	QL 90 / 30 DAYS PA S Specialty Drug
ORENITRAM 2.5 MG TAB ER *treprostinil diolamine*	3	QL 90 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENITRAM 5 MG TAB ER *treprostinil diolamine*	3	QL 90 / 30 DAYS PA S Specialty Drug
REMODULIN 100 MG/20ML SOLUTION *treprostinil*	3	S Specialty Drug
REMODULIN 20 MG/20ML SOLUTION *treprostinil*	3	S Specialty Drug
REMODULIN 200 MG/20ML SOLUTION *treprostinil*	3	S Specialty Drug
REMODULIN 50 MG/20ML SOLUTION *treprostinil*	3	S Specialty Drug
treprostinil 100 mg/20ml solution	1	S Specialty Drug
treprostinil 20 mg/20ml solution	1	S Specialty Drug
treprostinil 200 mg/20ml solution	1	S Specialty Drug
treprostinil 50 mg/20ml solution	1	S Specialty Drug
TYVASO 0.6 MG/ML SOLUTION *treprostinil*	3	QL 81.2 / 28 DAYS PA S Specialty Drug
TYVASO REFILL 0.6 MG/ML SOLUTION *treprostinil*	3	QL 81.2 / 28 DAYS PA S Specialty Drug
TYVASO STARTER 0.6 MG/ML SOLUTION *treprostinil*	3	QL 81.2 / 180 DAYS PA S Specialty Drug
VELETRI 0.5 MG RECON SOLN *epoprostenol sodium*	3	S Specialty Drug
VELETRI 1.5 MG RECON SOLN *epoprostenol sodium*	3	S Specialty Drug
VENTAVIS 10 MCG/ML SOLUTION *iloprost*	3	QL 270 / 30 DAYS PA S Specialty Drug
VENTAVIS 20 MCG/ML SOLUTION *iloprost*	3	QL 270 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
ADEMPAS 0.5 MG TAB *riociguat*	3	QL 90 / 30 DAYS PA S Specialty Drug
ADEMPAS 1 MG TAB *riociguat*	3	QL 90 / 30 DAYS PA S Specialty Drug
ADEMPAS 1.5 MG TAB *riociguat*	3	QL 90 / 30 DAYS PA S Specialty Drug
ADEMPAS 2 MG TAB *riociguat*	3	QL 90 / 30 DAYS PA S Specialty Drug
ADEMPAS 2.5 MG TAB *riociguat*	3	QL 90 / 30 DAYS PA S Specialty Drug
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
ambrisentan 10 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
ambrisentan 5 mg tab	1	QL 30 / 30 DAYS PA S Specialty Drug
bosentan 125 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
bosentan 62.5 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
OPSUMIT 10 MG TAB *macitentan*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRACLEER 32 MG TAB SOL *bosentan*	2	QL 120 / 30 DAYS PA S Specialty Drug
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
alyq 20 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
REVATIO 10 MG/12.5ML SOLUTION *sildenafil citrate (pulmonary hypertension)*	3	AL1 At least 18 yrs old S Specialty Drug
sildenafil citrate 10 mg/12.5ml solution	1	AL1 At least 18 yrs old S Specialty Drug
sildenafil citrate 10 mg/ml recon susp	1	QL 224 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
sildenafil citrate 20 mg tab	1	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
tadalafil (pah) 20 mg tab	1	QL 60 / 30 DAYS PA S Specialty Drug
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI 1000 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 1200 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UPTRAVI 1400 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 1600 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 200 & 800 MCG TAB THPK *selexipag*	2	QL 200 / 180 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 200 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 400 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 600 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
UPTRAVI 800 MCG TAB *selexipag*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS		
sildenafil citrate 100 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sildenafil citrate 25 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
sildenafil citrate 50 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
STENDRA 100 MG TAB *avanafil*	3	QL 6 / 30 DAYS GL Male
STENDRA 200 MG TAB *avanafil*	3	QL 6 / 30 DAYS GL Male
STENDRA 50 MG TAB *avanafil*	3	QL 6 / 30 DAYS GL Male
tadalafil 10 mg tab	1	QL 6 / 30 DAYS GL Male
tadalafil 2.5 mg tab	1	QL 30 / 30 DAYS GL Male
tadalafil 20 mg tab	1	QL 6 / 30 DAYS GL Male
tadalafil 5 mg tab	1	QL 30 / 30 DAYS GL Male
vardenafil hcl 10 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
vardenafil hcl 10 mg tab disp	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
vardenafil hcl 2.5 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
vardenafil hcl 20 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vardenafil hcl 5 mg tab	1	QL 6 / 30 DAYS GL Male AL1 At least 18 yrs old
SEPTAL AGENTS - ABLATION		
ABLYSINOL SOLUTION *dehydrated alcohol*	3	
SINUS NODE INHIBITORS		
CORLANOR 5 MG TAB *ivabradine hcl*	2	QL 60 / 30 DAYS PA
CORLANOR 5 MG/5ML SOLUTION *ivabradine hcl*	2	QL 600 / 30 DAYS PA
CORLANOR 7.5 MG TAB *ivabradine hcl*	2	QL 60 / 30 DAYS PA
TRANSTHYRETIN STABILIZERS		
VYNDAMAX 61 MG CAP *tafamidis*	2	QL 30 / 30 DAYS PA S Specialty Drug
VYNDAQEL 20 MG CAP *tafamidis meglumine (cardiac)*	2	QL 120 / 30 DAYS PA S Specialty Drug
VASOACTIVE NATRIURETIC PEPTIDES		
NATRECOR 1.5 MG RECON SOLN *nesiritide*	3	
CEPHALOSPORINS		
CEPHALOSPORIN COMBINATIONS		
AVYCAZ 2.5 (2-0.5) GM RECON SOLN *ceftazidime-avibactam sodium*	3	
ZERBAXA 1.5 (1-0.5) GM RECON SOLN *ceftolozane sulfate-tazobactam sodium*	3	
CEPHALOSPORINS - 1ST GENERATION		
cefadroxil 1 gm tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cefadroxil 250 mg/5ml recon susp	1	
cefadroxil 500 mg cap	1	
cefadroxil 500 mg/5ml recon susp	1	
CEFAZOLIN SODIUM 1 GM RECON SOLN *cefazolin sodium*	1	
cefazolin sodium 1 gm recon soln	1	
cefazolin sodium 10 gm recon soln	1	
CEFAZOLIN SODIUM 100 GM RECON SOLN *cefazolin sodium*	1	
CEFAZOLIN SODIUM 20 GM RECON SOLN *cefazolin sodium*	1	
CEFAZOLIN SODIUM 300 GM RECON SOLN *cefazolin sodium*	1	
cefazolin sodium 500 mg recon soln	1	
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN *cefazolin sodium-dextrose*	1	
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM/50ML-% SOLUTION *cefazolin sodium-dextrose*	1	
CEFAZOLIN SODIUM-DEXTROSE 2-3 GM-%(50ML) RECON SOLN *cefazolin sodium-dextrose*	1	
CEFAZOLIN SODIUM-DEXTROSE 2-4 GM/100ML-% SOLUTION *cefazolin sodium-dextrose*	1	
cephalexin 125 mg/5ml recon susp	1	
cephalexin 250 mg cap	1	
CEPHALEXIN 250 MG TAB *cephalexin*	3	
cephalexin 250 mg/5ml recon susp	1	
cephalexin 500 mg cap	1	
CEPHALEXIN 500 MG TAB *cephalexin*	3	
cephalexin 750 mg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 125 MG/5ML RECON SUSP *cefaclor*	3	
cefaclor 250 mg cap	1	
CEFACLOR 250 MG/5ML RECON SUSP *cefaclor*	3	
CEFACLOR 375 MG/5ML RECON SUSP *cefaclor*	3	
cefaclor 500 mg cap	1	
CEFACLOR ER 500 MG TAB ER 12H *cefaclor monohydrate*	3	QL 20 / 30 DAYS
CEFOTAN 1 GM RECON SOLN *cefotetan disodium*	3	
CEFOTAN 2 GM RECON SOLN *cefotetan disodium*	3	
cefotetan disodium 1 gm recon soln	1	
CEFOTETAN DISODIUM 10 GM RECON SOLN *cefotetan disodium*	1	
cefotetan disodium 2 gm recon soln	1	
CEFOTETAN DISODIUM-DEXTROSE 1-3.58 GM-%(50ML) RECON SOLN *cefotetan disodium and dextrose*	1	
CEFOTETAN DISODIUM-DEXTROSE 2-2.08 GM-%(50ML) RECON SOLN *cefotetan disodium and dextrose*	1	
cefoxitin sodium 1 gm recon soln	1	
cefoxitin sodium 10 gm recon soln	1	
cefoxitin sodium 2 gm recon soln	1	
CEFOXITIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN *cefoxitin sodium and dextrose*	1	
CEFOXITIN SODIUM-DEXTROSE 2-2.2 GM-%(50ML) RECON SOLN *cefoxitin sodium and dextrose*	1	
cefprozil 125 mg/5ml recon susp	1	
cefprozil 250 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cefprozil 250 mg/5ml recon susp	1	
cefprozil 500 mg tab	1	
cefuroxime axetil 250 mg tab	1	
cefuroxime axetil 500 mg tab	1	
cefuroxime sodium 1.5 gm recon soln	1	
cefuroxime sodium 7.5 gm recon soln	1	
cefuroxime sodium 750 mg recon soln	1	
CEPHALOSPORINS - 3RD GENERATION		
cefdinir 125 mg/5ml recon susp	1	
cefdinir 250 mg/5ml recon susp	1	
cefdinir 300 mg cap	1	
CEFDITOREN PIVOXIL 200 MG TAB *cefditoren pivoxil*	3	
CEFDITOREN PIVOXIL 400 MG TAB *cefditoren pivoxil*	3	
cefixime 100 mg/5ml recon susp	1	QL 1200 / 90 DAYS
cefixime 200 mg/5ml recon susp	1	QL 1200 / 90 DAYS
cefixime 400 mg cap	1	
cefotaxime sodium 1 gm recon soln	1	
CEFOTAXIME SODIUM 500 MG RECON SOLN *cefotaxime sodium*	1	
cefpodoxime proxetil 100 mg tab	1	
cefpodoxime proxetil 100 mg/5ml recon susp	1	
cefpodoxime proxetil 200 mg tab	1	
cefpodoxime proxetil 50 mg/5ml recon susp	1	
ceftazidime 1 gm recon soln	1	
ceftazidime 2 gm recon soln	1	
ceftazidime 6 gm recon soln	1	
CEFTAZIDIME AND DEXTROSE 1-5 GM-%(50ML) RECON SOLN *ceftazidime-dextrose*	1	
CEFTAZIDIME AND DEXTROSE 2-5 GM-%(50ML) RECON SOLN *ceftazidime-dextrose*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ceftriaxone sodium 1 gm recon soln	1	
ceftriaxone sodium 1 gm recon soln	1	
ceftriaxone sodium 10 gm recon soln	1	
CEFTRIAXONE SODIUM 100 GM RECON SOLN *ceftriaxone sodium*	1	
ceftriaxone sodium 2 gm recon soln	1	
ceftriaxone sodium 2 gm recon soln	1	
ceftriaxone sodium 250 mg recon soln	1	
ceftriaxone sodium 500 mg recon soln	1	
CEFTRIAXONE SODIUM IN DEXTROSE 20 MG/ML SOLUTION *ceftriaxone sodium in dextrose*	1	
CEFTRIAXONE SODIUM IN DEXTROSE 40 MG/ML SOLUTION *ceftriaxone sodium in dextrose*	1	
CEFTRIAXONE SODIUM-DEXTROSE 1-3.74 GM-%(50ML) RECON SOLN *ceftriaxone sodium and dextrose*	1	
CEFTRIAXONE SODIUM-DEXTROSE 2-2.22 GM-%(50ML) RECON SOLN *ceftriaxone sodium and dextrose*	1	
SUPRAX 100 MG CHEW TAB *cefixime*	2	
SUPRAX 200 MG CHEW TAB *cefixime*	2	
SUPRAX 500 MG/5ML RECON SUSP *cefixime*	2	
tazicef 1 gm recon soln	1	
TAZICEF 1 GM RECON SOLN *ceftazidime*	3	
tazicef 2 gm recon soln	1	
TAZICEF 2 GM RECON SOLN *ceftazidime*	3	
tazicef 6 gm recon soln	1	
CEPHALOSPORINS - 4TH GENERATION		
cefepime hcl 1 gm recon soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEFEPIME HCL 1 GM/50ML SOLUTION *cefepime hcl*	1	
cefepime hcl 2 gm recon soln	1	
CEFEPIME HCL 2 GM/100ML SOLUTION *cefepime hcl*	1	
CEFEPIME-DEXTROSE 1-5 GM-%(50ML) RECON SOLN *cefepime hcl-dextrose*	1	
CEFEPIME-DEXTROSE 2-5 GM-%(50ML) RECON SOLN *cefepime hcl-dextrose*	1	
MAXIPIME 1 GM RECON SOLN *cefepime hcl*	3	
MAXIPIME 2 GM RECON SOLN *cefepime hcl*	3	
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO 400 MG RECON SOLN *ceftaroline fosamil*	3	
TEFLARO 600 MG RECON SOLN *ceftaroline fosamil*	3	
CEPHALOSPORINS - SIDEROPHORES		
FETROJA 1 GM RECON SOLN *cefiderocol sulfate tosylate*	3	
CONTRACEPTIVES		
BIPHASIC CONTRACEPTIVES - ORAL		
azurette 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
bekyree 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
kariva 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB *norethindrone acetate-ethinyl estradiol-fe fum (biphasic)*	2	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pimtrea 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
simliya 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
viorele 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
volnea 0.15-0.02/0.01 mg (21/5) tab	1	GL Female ACA Affordable Care Act
COMBINATION CONTRACEPTIVES - ORAL		
afirmelle 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
altavera 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
alyacen 1/35 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
apri 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
aubra 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
aubra eq 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
aurovela 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
aurovela 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
aurovela 24 fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act
aurovela fe 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aurovela fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
aviane 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
ayuna 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
balziva 0.4-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
blisovi 24 fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act
blisovi fe 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
blisovi fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
briellyn 0.4-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
charlotte 24 fe 1-20 mg-mcg(24) chew tab	1	GL Female ACA Affordable Care Act
chateal 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
chateal eq 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
cryselle-28 0.3-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
cyclafem 1/35 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
cyred 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
cyred eq 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dasetta 1/35 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
delyla 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
desogestrel-ethinyl estradiol 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
drospiren-eth estrad-levomefol 3-0.02-0.451 mg tab	1	GL Female ACA Affordable Care Act
drospiren-eth estrad-levomefol 3-0.03-0.451 mg tab	1	GL Female ACA Affordable Care Act
drospirenone-ethinyl estradiol 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
drospirenone-ethinyl estradiol 3-0.03 mg tab	1	GL Female ACA Affordable Care Act
elinest 0.3-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
emoquette 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
enskyce 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
estarylla 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
ethynodiol diac-eth estradiol 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
ethynodiol diac-eth estradiol 1-50 mg-mcg tab	1	GL Female ACA Affordable Care Act
FALESSA 20-1-0.1 MCG-MG KIT *levonorgestrel-ethinyl estradiol & folic acid*	3	
falmina 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
femynor 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
gianvi 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
hailey 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
hailey 24 fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act
hailey fe 1.5/30 1.5-30 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
hailey fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
isibloom 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
jasmiel 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
juleber 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
junel 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
junel 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
junel fe 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
junel fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
junel fe 24 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
kaitlib fe 0.8-25 mg-mcg chew tab	1	GL Female ACA Affordable Care Act
kalliga 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
kelnor 1/35 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
kelnor 1/50 1-50 mg-mcg tab	1	GL Female ACA Affordable Care Act
kurvelo 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
larin 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
larin 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
larin 24 fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act
larin fe 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
larin fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
larissia 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
layolis fe 0.8-25 mg-mcg chew tab	1	GL Female ACA Affordable Care Act
lessina 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
levonorgestrel-ethinyl estrad 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
levonorgestrel-ethinyl estrad 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levora 0.15/30 (28) 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
lillow 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
lo-zumandimine 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
loryna 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
low-ogestrel 0.3-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
lutera 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
marlissa 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
melodetta 24 fe 1-20 mg-mcg(24) chew tab	1	GL Female ACA Affordable Care Act
mibelas 24 fe 1-20 mg-mcg(24) chew tab	1	GL Female ACA Affordable Care Act
microgestin 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
microgestin 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
microgestin fe 1.5/30 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
microgestin fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
mili 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
mono-linyah 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mononessa 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
necon 0.5/35 (28) 0.5-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
nikki 3-0.02 mg tab	1	GL Female ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg(24) chew tab	1	GL Female ACA Affordable Care Act
norethin ace-eth estrad-fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act
norethin ace-eth estrad-fe 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
norethin-eth estradiol-fe 0.4-35 mg-mcg chew tab	1	GL Female ACA Affordable Care Act
norethin-eth estradiol-fe 0.8-25 mg-mcg chew tab	1	GL Female ACA Affordable Care Act
norethindrone acet-ethinyl est 1-20 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
norethindrone acet-ethinyl est 1-20 mg-mcg(24) chew tab	1	GL Female ACA Affordable Care Act
norethindrone acet-ethinyl est 1.5-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
norgestimate-eth estradiol 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
nortrel 0.5/35 (28) 0.5-35 mg-mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nortrel 1/35 (21) 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
nortrel 1/35 (28) 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
ocella 3-0.03 mg tab	1	GL Female ACA Affordable Care Act
OGESTREL 0.5-50 MG-MCG TAB *norgestrel & ethinyl estradiol*	2	GL Female ACA Affordable Care Act
orsythia 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
philith 0.4-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
pirmella 1/35 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
portia-28 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
previfem 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
rajani 3-0.02-0.451 mg tab	1	GL Female ACA Affordable Care Act
reclipsen 0.15-30 mg-mcg tab	1	GL Female ACA Affordable Care Act
sprintec 28 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
sronyx 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
syeda 3-0.03 mg tab	1	GL Female ACA Affordable Care Act
tarina 24 fe 1-20 mg-mcg(24) tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tarina fe 1/20 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
tarina fe 1/20 eq 1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
TAYTULLA 1-20 MG-MCG(24) CAP *norethin acet & estrad-fe*	3	GL Female ACA Affordable Care Act
tydemy 3-0.03-0.451 mg tab	1	GL Female ACA Affordable Care Act
vienva 0.1-20 mg-mcg tab	1	GL Female ACA Affordable Care Act
vyfemla 0.4-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
vylibra 0.25-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
wera 0.5-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
wymzya fe 0.4-35 mg-mcg chew tab	1	GL Female ACA Affordable Care Act
zarah 3-0.03 mg tab	1	GL Female ACA Affordable Care Act
zovia 1/35e (28) 1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
zumandimine 3-0.03 mg tab	1	GL Female ACA Affordable Care Act
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
XULANE 150-35 MCG/24HR PATCH WK *norelgestromin-ethinyl estradiol*	2	QL 3.4 / 28 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMBINATION CONTRACEPTIVES - VAGINAL		
NUVARING 0.12-0.015 MG/24HR RING *etonogestrel-ethinyl estradiol*	1	GL Female ACA Affordable Care Act
CONTINUOUS CONTRACEPTIVES - ORAL		
amethyst 90-20 mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
levonorgestrel-ethinyl estrad 90-20 mcg tab	1	GL Female ACA Affordable Care Act
COPPER CONTRACEPTIVES - IUD		
PARAGARD INTRAUTERINE COPPER IUD *copper (iud)*	3	GL Female ACA Affordable Care Act
EMERGENCY CONTRACEPTIVES		
aftera 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
econtra ez 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
econtra one-step 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
ELLA 30 MG TAB *ulipristal acetate*	2	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
levonorgestrel 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
my choice 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
my way 1.5 mg tab	1	GL Female ACA Affordable Care Act
new day 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
opcicon one-step 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
option 2 1.5 mg tab	1	QL 2 / 30 DAYS GL Female ACA Affordable Care Act
preventeza 1.5 mg tab	1	GL Female ACA Affordable Care Act
react 1.5 mg tab	1	GL Female ACA Affordable Care Act
take action 1.5 mg tab	1	GL Female ACA Affordable Care Act
EXTENDED-CYCLE CONTRACEPTIVES - ORAL		
amethia 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
amethia lo 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
ashlyna 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
camrese 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
camrese lo 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
daysee 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
fayosim 42-21-21-7 days tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
introvale 0.15-0.03 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
jaimiess 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
jolessa 0.15-0.03 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
levonorgest-eth est & eth est 42-21-21-7 days tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
levonorgest-eth estrad 91-day 0.15-0.03 mg tab	1	GL Female ACA Affordable Care Act
lojaimiess 0.1-0.02 & 0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quasense 0.15-0.03 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
rivelsa 42-21-21-7 days tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
setlakin 0.15-0.03 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
simpesse 0.15-0.03 &0.01 mg tab	1	QL 91 / 91 DAYS GL Female ACA Affordable Care Act
FOUR PHASE CONTRACEPTIVES - ORAL		
NATAZIA 3/2-2/2-3/1 MG TAB *estradiol valerate-dienogest*	3	GL Female ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON 68 MG IMPLANT *etonogestrel*	3	GL Female ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR *medroxyprogesterone acetate (contraceptive)*	3	QL 90 / 90 DAYS GL Female ACA Affordable Care Act
medroxyprogesterone acetate 150 mg/ml susp prsyr	1	QL 90 / 90 DAYS GL Female ACA Affordable Care Act
medroxyprogesterone acetate 150 mg/ml suspension	1	QL 1.2 / 28 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA 19.5 MG IUD *levonorgestrel (iud)*	3	GL Female ACA Affordable Care Act
LILETTA (52 MG) 19.5 MCG/DAY IUD *levonorgestrel (iud)*	3	GL Female ACA Affordable Care Act
MIRENA (52 MG) 20 MCG/24HR IUD *levonorgestrel (iud)*	3	GL Female ACA Affordable Care Act
SKYLA 13.5 MG IUD *levonorgestrel (iud)*	3	GL Female ACA Affordable Care Act
PROGESTIN CONTRACEPTIVES - ORAL		
camila 0.35 mg tab	1	GL Female ACA Affordable Care Act
deblitane 0.35 mg tab	1	GL Female ACA Affordable Care Act
errin 0.35 mg tab	1	GL Female ACA Affordable Care Act
heather 0.35 mg tab	1	GL Female ACA Affordable Care Act
incassia 0.35 mg tab	1	GL Female ACA Affordable Care Act
jencycla 0.35 mg tab	1	GL Female ACA Affordable Care Act
jolivette 0.35 mg tab	1	GL Female ACA Affordable Care Act
lyza 0.35 mg tab	1	GL Female ACA Affordable Care Act
nora-be 0.35 mg tab	1	GL Female ACA Affordable Care Act
norethindrone 0.35 mg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norlyda 0.35 mg tab	1	GL Female ACA Affordable Care Act
norlyroc 0.35 mg tab	1	GL Female ACA Affordable Care Act
sharobel 0.35 mg tab	1	GL Female ACA Affordable Care Act
SLYND 4 MG TAB *drospirenone*	3	GL Female ACA Affordable Care Act
tulana 0.35 mg tab	1	GL Female ACA Affordable Care Act
TRIPHASIC CONTRACEPTIVES - ORAL		
alyacen 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
aranelle 0.5/1/0.5-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
caziant 0.1/0.125/0.15 -0.025 mg tab	1	GL Female ACA Affordable Care Act
cyclafem 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
dasetta 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
enpresse-28 50-30/75-40/ 125-30 mcg tab	1	GL Female ACA Affordable Care Act
leena 0.5/1/0.5-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
levonest 50-30/75-40/ 125-30 mcg tab	1	GL Female ACA Affordable Care Act
levonorg-eth estrad triphasic 50-30/75-40/ 125-30 mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
myzilra 50-30/75-40/ 125-30 mcg tab	1	GL Female ACA Affordable Care Act
norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
norgestim-eth estrad triphasic 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
nortrel 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
pirmella 7/7/7 0.5/0.75/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
tilia fe 1-20/1-30/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
tri femynor 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-estarylla 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-legest fe 1-20/1-30/1-35 mg-mcg tab	1	GL Female ACA Affordable Care Act
tri-linyah 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-lo-estarylla 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
tri-lo-marzia 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
tri-lo-mili 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
tri-lo-sprintec 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
tri-mili 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tri-previfem 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-sprintec 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-vylibra 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
tri-vylibra lo 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
trinessa (28) 0.18/0.215/0.25 mg-35 mcg tab	1	GL Female ACA Affordable Care Act
trinessa lo 0.18/0.215/0.25 mg-25 mcg tab	1	GL Female ACA Affordable Care Act
trivora (28) 50-30/75-40/ 125-30 mcg tab	1	GL Female ACA Affordable Care Act
velivet 0.1/0.125/0.15 -0.025 mg tab	1	GL Female ACA Affordable Care Act
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
budesonide 3 mg cp dr part	1	
CORTISONE ACETATE 25 MG TAB *cortisone acetate*	2	
decadron 0.5 mg tab	1	
decadron 0.5 mg/5ml elixir	1	
decadron 0.75 mg tab	1	
decadron 4 mg tab	1	
decadron 6 mg tab	1	
DEPO-MEDROL 20 MG/ML SUSPENSION *methylprednisolone acetate*	3	
DEPO-MEDROL 40 MG/ML SUSPENSION *methylprednisolone acetate*	3	
DEPO-MEDROL 80 MG/ML SUSPENSION *methylprednisolone acetate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXABLISS 1.5 MG (39) TAB THPK *dexamethasone*	3	
dexamethasone 0.5 mg tab	1	
dexamethasone 0.5 mg/5ml elixir	1	
DEXAMETHASONE 0.5 MG/5ML SOLUTION *dexamethasone*	3	
dexamethasone 0.75 mg tab	1	
DEXAMETHASONE 1 MG TAB *dexamethasone*	2	
dexamethasone 1.5 mg (21) tab thpk	1	
DEXAMETHASONE 1.5 MG (35) TAB THPK *dexamethasone*	1	
DEXAMETHASONE 1.5 MG (51) TAB THPK *dexamethasone*	1	
dexamethasone 1.5 mg tab	1	
DEXAMETHASONE 2 MG TAB *dexamethasone*	2	
dexamethasone 4 mg tab	1	
dexamethasone 6 mg tab	1	
DEXAMETHASONE INTENSOL 1 MG/ML CONC *dexamethasone*	3	
DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML SOLN PRSYR *dexamethasone sodium phosphate*	1	
DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML SOLUTION *dexamethasone sodium phosphate*	1	
dexamethasone sod phosphate pf 10 mg/ml solution	1	
DEXAMETHASONE SODIUM PHOSPHATE 10 MG/ML SOLUTION *dexamethasone sodium phosphate*	1	
dexamethasone sodium phosphate 100 mg/10ml solution	1	
dexamethasone sodium phosphate 120 mg/30ml solution	1	
dexamethasone sodium phosphate 20 mg/5ml solution	1	
dexamethasone sodium phosphate 4 mg/ml solution	1	
dexpak 10 day 1.5 mg (35) tab thpk	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dexpak 13 day 1.5 mg (51) tab thpk	1	
dexpak 6 day 1.5 mg (21) tab thpk	1	
DXEVO 11-DAY 1.5 MG TAB THPK *dexamethasone*	3	
EMFLAZA 18 MG TAB *deflazacort*	3	QL 30 / 30 DAYS PA AL1 At least 2 yrs old S Specialty Drug
EMFLAZA 22.75 MG/ML SUSPENSION *deflazacort*	3	PA AL1 At least 2 yrs old S Specialty Drug
EMFLAZA 30 MG TAB *deflazacort*	3	PA AL1 At least 2 yrs old S Specialty Drug
EMFLAZA 36 MG TAB *deflazacort*	3	PA AL1 At least 2 yrs old S Specialty Drug
EMFLAZA 6 MG TAB *deflazacort*	3	QL 60 / 30 DAYS PA AL1 At least 2 yrs old S Specialty Drug
hidex 6-day 1.5 mg (21) tab thpk	1	
hydrocortisone 10 mg tab	1	
hydrocortisone 20 mg tab	1	
hydrocortisone 5 mg tab	1	
KENALOG 10 MG/ML SUSPENSION *triamcinolone acetonide*	3	
KENALOG 40 MG/ML SUSPENSION *triamcinolone acetonide*	3	
KENALOG-80 80 MG/ML SUSPENSION *triamcinolone acetonide*	3	
MAS CARE-PAK 10 MG/ML KIT *dexamethasone sodium phosphate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDROL 2 MG TAB *methylprednisolone*	3	
methylprednisolone 16 mg tab	1	
methylprednisolone 32 mg tab	1	
methylprednisolone 4 mg tab	1	
methylprednisolone 4 mg tab thpk	1	
methylprednisolone 8 mg tab	1	
methylprednisolone acetate 40 mg/ml suspension	1	
methylprednisolone acetate 80 mg/ml suspension	1	
methylprednisolone sodium succ 1000 mg recon soln	1	
methylprednisolone sodium succ 125 mg recon soln	1	
methylprednisolone sodium succ 40 mg recon soln	1	
methylprednisolone sodium succ 500 mg recon soln	1	
MILLIPRED 5 MG TAB *prednisolone*	3	
MILLIPRED DP 12-DAY 5 MG (48) TAB THPK *prednisolone*	3	
MILLIPRED DP 5 MG (21) TAB THPK *prednisolone*	3	
MILLIPRED DP 5 MG (48) TAB THPK *prednisolone*	3	
P-CARE D40 40 MG/ML KIT *methylprednisolone acetate*	3	
P-CARE D80 40 MG/ML KIT *methylprednisolone acetate*	3	
P-CARE K40 40 MG/ML KIT *triamcinolone acetonide*	3	
P-CARE K80 2 X 40 MG/ML KIT *triamcinolone acetonide*	3	
PREDNISOLONE 15 MG/5ML SOLUTION *prednisolone*	3	
prednisolone sodium phosphate 10 mg tab disp	1	
prednisolone sodium phosphate 10 mg/5ml solution	1	
prednisolone sodium phosphate 15 mg tab disp	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
prednisolone sodium phosphate 15 mg/5ml solution	1	
prednisolone sodium phosphate 20 mg/5ml solution	1	
PREDNISOLONE SODIUM PHOSPHATE 25 MG/5ML SOLUTION *prednisolone sodium phosphate*	3	
prednisolone sodium phosphate 30 mg tab disp	1	
prednisolone sodium phosphate 6.7 (5 base) mg/5ml solution	1	
prednisone 1 mg tab	1	
prednisone 10 mg (21) tab thpk	1	
prednisone 10 mg (48) tab thpk	1	
prednisone 10 mg tab	1	
prednisone 2.5 mg tab	1	
prednisone 20 mg tab	1	
prednisone 5 mg (21) tab thpk	1	
prednisone 5 mg (48) tab thpk	1	
prednisone 5 mg tab	1	
PREDNISONE 5 MG/5ML SOLUTION *prednisone*	2	
prednisone 50 mg tab	1	
PREDNISONE INTENSOL 5 MG/ML CONC *prednisone*	3	
PRO-C-DURE 5 2 X 40 MG/ML KIT *triamcinolone acetonide*	3	
PRO-C-DURE 6 3 X 40 MG/ML KIT *triamcinolone acetonide*	3	
READYSHARP DEXAMETHASONE 10 MG/ML KIT *dexamethasone sodium phosphate*	3	
SOLU-CORTEF 100 MG RECON SOLN *hydrocortisone sod succinate*	3	
SOLU-CORTEF 1000 MG RECON SOLN *hydrocortisone sod succinate*	3	
SOLU-CORTEF 250 MG RECON SOLN *hydrocortisone sod succinate*	3	
SOLU-CORTEF 500 MG RECON SOLN *hydrocortisone sod succinate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOLU-MEDROL 1000 MG RECON SOLN *methylprednisolone sod succ*	3	
SOLU-MEDROL 125 MG RECON SOLN *methylprednisolone sod succ*	3	
SOLU-MEDROL 2 GM RECON SOLN *methylprednisolone sod succ*	3	
SOLU-MEDROL 40 MG RECON SOLN *methylprednisolone sod succ*	3	
SOLU-MEDROL 500 MG RECON SOLN *methylprednisolone sod succ*	3	
TAPERDEX 12-DAY 1.5 MG (49) TAB THPK *dexamethasone*	3	
taperdex 6-day 1.5 mg (21) tab thpk	1	
taperdex 6-day 1.5 mg tab thpk	1	
TAPERDEX 7-DAY 1.5 MG (27) TAB THPK *dexamethasone*	3	
TOPIDEX 10 MG/ML KIT *dexamethasone sodium phosphate*	3	
triamcinolone acetonide 40 mg/ml suspension	1	
ZCORT 7-DAY 1.5 MG (25) TAB THPK *dexamethasone*	3	
ZILRETTA 32 MG SRER *triamcinolone acetonide*	3	S Specialty Drug
MINERALOCORTICOIDS		
fludrocortisone acetate 0.1 mg tab	1	
STEROID COMBINATIONS		
BETA 1 KIT 30 MG/5ML KIT *betamethasone sod phosphate & acetate*	3	
betamethasone sod phos & acet 6 (3-3) mg/ml suspension	1	
BT INJECTION 40 & 0.5 MG/ML-% KIT *triamcinolone acetonide & bupivacaine hcl*	3	
CELESTONE SOLUSPAN 6 (3-3) MG/ML SUSPENSION *betamethasone sod phosphate & acetate*	3	
DERMACINRX CINLONE-I CPI 40 & 2.5-2.5 MG/ML-%-% KIT *triamcinolone acetonide-lidocaine-prilocaine*	3	
JTT PHYSICIANS 40-1 MG/ML-% KIT *triamcinolone acetonide & lidocaine hcl & ammonia*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LT INJECTION KIT 40-2 MG/ML-% KIT *triamcinolone acetonide & lidocaine hcl*	3	
MLP A-1 40 & 0.5 & 2 MG/ML-%-% KIT *triamcinolone acetonide & bupivacaine hcl & lidocaine hcl*	3	
P-CARE D40MX 40 & 0.5 & 1 MG/ML-%-% KIT *methylprednisolone & bupivacaine hcl & lidocaine hcl*	3	
P-CARE D80MX 40 & 0.5 & 1 MG/ML-%-% KIT *methylprednisolone & bupivacaine hcl & lidocaine hcl*	3	
P-CARE K40MX 40 & 0.5 & 1 MG/ML-%-% KIT *triamcinolone acetonide & bupivacaine hcl & lidocaine hcl*	3	
P-CARE K80MX 40 & 0.5 & 1 MG/ML-%-% KIT *triamcinolone acetonide & bupivacaine hcl & lidocaine hcl*	3	
POINT OF CARE KM 40 & 0.5 MG/ML-% KIT *triamcinolone acetonide & bupivacaine hcl*	3	
POINT OF CARE L.2 40 & 1 MG/ML-% KIT *methylprednisolone acetate w/ lidocaine*	3	
POINT OF CARE L.5 40 & 1 MG/ML-% KIT *methylprednisolone acetate w/ lidocaine*	3	
POINT OF CARE LM DEP 2 40 & 0.25 & 1 MG/ML-%-% KIT *methylprednisolone & bupivacaine hcl & lidocaine hcl*	3	
READYSHARP ANESTH + BETAMETH 6 & 0.5 & 1 MG/ML-%-% KIT *betamethasone sod phosphate & ace & bupivacaine & lidocaine*	3	
READYSHARP ANESTH + DEXAMETH 10 & 0.5 & 1 MG/ML-%-% KIT *dexamethasone sod phos & bupivacaine hcl & lidocaine hcl*	3	
READYSHARP ANESTH + METHYLPRED 80 & 0.5 & 1 MG/ML-%-% KIT *methylprednisolone & bupivacaine hcl & lidocaine hcl*	3	
READYSHARP BETAMETHASONE 30 MG/5ML KIT *betamethasone sod phosphate & acetate*	3	
READYSHARP-K 40 & 0.5 & 1 MG/ML-%-% KIT *triamcinolone acetonide & bupivacaine hcl & lidocaine hcl*	3	
COUGH/COLD/ALLERGY		
ANTITUSSIVE - NONNARCOTIC		
benzonatate 100 mg cap	1	AL1 At least 11 yrs old
benzonatate 150 mg cap	1	AL1 At least 10 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
benzonatate 200 mg cap	1	AL1 At least 10 yrs old
ANTITUSSIVE - OPIOID		
hydrocodone-homatropine 5-1.5 mg tab	1	QL 180 / 30 DAYS AL1 At least 6 yrs old
hydrocodone-homatropine 5-1.5 mg/5ml syrup	1	QL 900 / 30 DAYS AL1 At least 2 yrs old
hydromet 5-1.5 mg/5ml syrup	1	QL 900 / 30 DAYS AL1 At least 2 yrs old
ANTITUSSIVE-EXPECTORANT		
HYDROCODONE-GUAIFENESIN 2.5-200 MG/5ML SOLUTION *hydrocodone-guaifenesin*	3	QL 1800 / 30 DAYS AL1 At least 18 yrs old
DECONGESTANT & ANTIHISTAMINE		
CLARINEX-D 12 HOUR 2.5-120 MG TAB ER 12H *desloratadine-pseudoephedrine*	3	QL 60 / 30 DAYS
promethazine vc plain 6.25-5 mg/5ml solution	1	
PROMETHAZINE-PHENYLEPHRINE 6.25-5 MG/5ML SYRUP *promethazine & phenylephrine*	3	
SEMPREX-D 8-60 MG CAP *acrivastine & pseudoephedrine*	3	QL 120 / 30 DAYS
MISC. RESPIRATORY INHALANTS		
nebusal 3 % nebu soln	1	
pulmosal 7 % nebu soln	1	
sodium chloride 3 % nebu soln	1	
sodium chloride 7 % nebu soln	1	
MUCOLYTICS		
acetylcysteine 10 % solution	1	
acetylcysteine 20 % solution	1	
NON-NARC ANTITUSSIVE-ANTIHISTAMINE		
PROMETHAZINE-DM 6.25-15 MG/5ML SOLUTION *promethazine-dm*	3	AL1 At least 2 yrs old
promethazine-dm 6.25-15 mg/5ml syrup	1	AL1 At least 2 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
bromfed dm 30-2-10 mg/5ml syrup	1	AL1 At least 2 yrs old
PSEUDOEPH-BROMPHEN-DM 30-2-10 MG/5ML LIQUID *pseudoephed-bromphen-dm*	3	AL1 At least 2 yrs old
pseudoeph-bromphen-dm 30-2-10 mg/5ml syrup	1	AL1 At least 2 yrs old
OPIOID ANTITUSSIVE-ANTIHISTAMINE		
hydrocod polst-cpm polst er 10-8 mg/5ml susp	1	QL 300 / 30 DAYS AL1 At least 6 yrs old
promethazine-codeine 6.25-10 mg/5ml solution	1	
promethazine-codeine 6.25-10 mg/5ml syrup	1	
TUSSICAPS 10-8 MG CAP ER 12H *hydrocodone polistirex-chlorpheniramine polistirex*	3	QL 180 / 30 DAYS AL1 At least 6 yrs old
TUSSICAPS 5-4 MG CAP ER 12H *hydrocodone polistirex-chlorpheniramine polistirex*	3	QL 180 / 30 DAYS AL1 At least 6 yrs old
TUXARIN ER 54.3-8 MG TAB ER 12H *chlorpheniramine w/ codeine*	3	QL 60 / 30 DAYS AL1 At least 18 yrs old
TUZISTRA XR 14.7-2.8 MG/5ML SUSP *codeine polistirex-chlorpheniramine polistirex*	3	QL 600 / 30 DAYS AL1 At least 18 yrs old
OPIOID ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
promethazine vc/codeine 6.25-5-10 mg/5ml syrup	1	QL 900 / 30 DAYS AL1 At least 6 yrs old
PROMETHAZINE-PHENYLEPH-CODEINE 6.25-5-10 MG/5ML SYRUP *promethazine-phenylephrine-codeine*	3	QL 900 / 30 DAYS AL1 At least 6 yrs old
PSEUDOEPH-CHLORPHEN-HYDROCOD 60-4-5 MG/5ML SOLUTION *pseudoephed-cpm w/ hydrocod*	3	QL 600 / 30 DAYS AL1 At least 18 yrs old
DERMATOLOGICALS		
ACNE ANTIBIOTICS		
ACZONE 7.5 % GEL *dapsone (topical)*	3	QL 90 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMZEEQ 4 % FOAM *minocycline hcl micronized (acne)*	3	
clindacin etz 1 % swab	1	
clindacin-p 1 % swab	1	
clindamycin phosphate 1 % foam	1	QL 50 / 30 DAYS
clindamycin phosphate 1 % gel	1	QL 75 / 30 DAYS
clindamycin phosphate 1 % lotion	1	
clindamycin phosphate 1 % solution	1	
clindamycin phosphate 1 % swab	1	
dapsone 5 % gel	1	QL 90 / 30 DAYS
DAPSONE 7.5 % GEL *dapsone (topical)*	1	QL 90 / 30 DAYS
ERY 2 % PAD *erythromycin (acne aid)*	3	
erythromycin 2 % gel	1	QL 30 / 30 DAYS
erythromycin 2 % pad	1	
erythromycin 2 % solution	1	
sulfacetamide sodium (acne) 10 % lotion	1	QL 120 / 30 DAYS
ACNE COMBINATIONS		
adapalene-benzoyl peroxide 0.1-2.5 % gel	1	QL 45 / 30 DAYS
AKTIPAK 5-3 % PACKET *benzoyl peroxide-erythromycin*	3	
benzoyl peroxide-erythromycin 5-3 % gel	1	QL 48 / 30 DAYS
clindamycin phos-benzoyl perox 1-5 % gel	1	QL 50 / 30 DAYS
clindamycin phos-benzoyl perox 1.2-2.5 % gel	1	
clindamycin phos-benzoyl perox 1.2-5 % gel	1	QL 45 / 30 DAYS
clindamycin-tretinoin 1.2-0.025 % gel	1	QL 60 / 30 DAYS
EPIDUO FORTE 0.3-2.5 % GEL *adapalene-benzoyl peroxide*	2	QL 50 / 30 DAYS
neuac 1.2-5 % gel	1	QL 45 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ONEXTON 1.2-3.75 % GEL *clindamycin phosphate-benzoyl peroxide*	2	QL 60 / 30 DAYS
VELTIN 1.2-0.025 % GEL *clindamycin phosphate-tretinoin*	3	
ACNE PRODUCTS		
ABSORICA 10 MG CAP *isotretinoin*	2	
ABSORICA 20 MG CAP *isotretinoin*	2	
ABSORICA 25 MG CAP *isotretinoin*	2	
ABSORICA 30 MG CAP *isotretinoin*	2	
ABSORICA 35 MG CAP *isotretinoin*	2	
ABSORICA 40 MG CAP *isotretinoin*	2	
ABSORICA LD 16 MG CAP *isotretinoin micronized*	2	
ABSORICA LD 24 MG CAP *isotretinoin micronized*	2	
ABSORICA LD 32 MG CAP *isotretinoin micronized*	2	
ABSORICA LD 8 MG CAP *isotretinoin micronized*	2	
adapalene 0.1 % cream	1	QL 45 / 30 DAYS PA
adapalene 0.1 % gel	1	QL 45 / 30 DAYS PA
adapalene 0.3 % gel	1	QL 45 / 30 DAYS PA
AKLIEF 0.005 % CREAM *trifarotene*	3	QL 45 / 30 DAYS PA
ALTRENO 0.05 % LOTION *tretinoin*	3	QL 45 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
avita 0.025 % cream	1	PA
avita 0.025 % gel	1	PA
AZELEX 20 % CREAM *azelaic acid (acne)*	3	QL 50 / 30 DAYS
tretinoin 0.01 % gel	1	PA
tretinoin 0.025 % cream	1	PA
tretinoin 0.025 % gel	1	PA
tretinoin 0.05 % cream	1	PA
tretinoin 0.05 % gel	1	PA
tretinoin 0.1 % cream	1	PA
tretinoin microsphere 0.04 % gel	1	QL 50 / 30 DAYS PA
tretinoin microsphere 0.1 % gel	1	QL 50 / 30 DAYS PA
tretinoin microsphere pump 0.04 % gel	1	QL 50 / 30 DAYS PA
tretinoin microsphere pump 0.1 % gel	1	QL 50 / 30 DAYS PA
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN 15 % OINTMENT *sinecatechins*	3	
AGENTS FOR FACIAL LIPOATROPHY		
SCULPTRA 367.5 MG RECON SUSP *poly-l-lactic acid*	3	
AGENTS FOR FACIAL WRINKLES - RETINOIDS		
AVAGE 0.1 % CREAM *tazarotene (facial wrinkles)*	3	QL 45 / 30 DAYS
REFISSA 0.05 % CREAM *tretinoin (facial wrinkles)*	3	
RENOVA 0.02 % CREAM *tretinoin (facial wrinkles)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RENOVA PUMP 0.02 % CREAM *tretinoin (facial wrinkles)*	3	
TRETINOIN (EMOLLIENT) 0.05 % CREAM *tretinoin (facial wrinkles)*	1	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
diclofenac sodium 1 % gel	1	QL 1000 / 30 DAYS
diclofenac sodium 1.5 % solution	1	QL 300 / 30 DAYS
klofensaid ii 1.5 % solution	1	QL 300 / 30 DAYS
ANTIBIOTIC STEROID COMBINATIONS - TOPICAL		
CORTISPORIN 1 % OINTMENT *bacitracin-polymyxin-neomycin hc*	3	QL 15 / 30 DAYS
CORTISPORIN 3.5-10000-0.5 CREAM *neomycin-polymyxin-hc*	3	QL 7.5 / 30 DAYS
NEO-SYNALAR 0.5-0.025 % CREAM *neomycin sulfate-fluocinolone acetonide*	3	
ANTIBIOTICS - TOPICAL		
ALTABAX 1 % OINTMENT *retapamulin*	3	
CENTANY 2 % OINTMENT *mupirocin*	3	
gentamicin sulfate 0.1 % cream	1	
gentamicin sulfate 0.1 % ointment	1	
mupirocin 2 % ointment	1	
mupirocin calcium 2 % cream	1	
XEPI 1 % CREAM *ozenoxacin*	3	
ANTIFUNGALS - TOPICAL		
ciclodan 8 % solution	1	QL 6.6 / 30 DAYS
ciclopirox 0.77 % gel	1	
ciclopirox 1 % shampoo	1	
ciclopirox 8 % solution	1	QL 6.6 / 30 DAYS
ciclopirox olamine 0.77 % cream	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ciclopirox olamine 0.77 % suspension	1	
MENTAX 1 % CREAM *butenafine hcl*	3	
NAFTIFINE HCL 1 % CREAM *naftifine hcl*	3	
naftifine hcl 1 % cream	1	
naftifine hcl 2 % cream	1	
NAFTIN 2 % GEL *naftifine hcl*	3	
nyamyc 100000 unit/gm powder	1	
nystatin 100000 unit/gm cream	1	
nystatin 100000 unit/gm ointment	1	
nystatin 100000 unit/gm powder	1	
nystop 100000 unit/gm powder	1	
ANTIFUNGALS - TOPICAL COMBINATIONS		
clotrimazole-betamethasone 1-0.05 % cream	1	
clotrimazole-betamethasone 1-0.05 % lotion	1	
MICONAZOLE-ZINC OXIDE-PETROLAT 0.25-15-81.35 % OINTMENT *miconazole-zinc oxide-white petrolatum*	3	
nystatin-triamcinolone 100000-0.1 unit/gm-% cream	1	
nystatin-triamcinolone 100000-0.1 unit/gm-% ointment	1	
VUSION 0.25-15-81.35 % OINTMENT *miconazole-zinc oxide-white petrolatum*	3	
ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL		
VALCHLOR 0.016 % GEL *mechlorethamine hcl (topical)*	2	QL 90 / 30 DAYS S Specialty Drug
ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL		
CARAC 0.5 % CREAM *fluorouracil (topical)*	2	
FLUOROURACIL 2 % SOLUTION *fluorouracil (topical)*	3	
fluorouracil 5 % cream	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUOROURACIL 5 % SOLUTION *fluorouracil (topical)*	3	
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL MISC.		
PICATO 0.015 % GEL *ingenol mebutate*	2	
PICATO 0.05 % GEL *ingenol mebutate*	2	
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S		
diclofenac sodium 3 % gel	1	QL 100 / 30 DAYS
ANTIPRURITICS - TOPICAL		
DOXEPIN HCL 5 % CREAM *doxepin hcl (antipruritic)*	3	QL 45 / 30 DAYS PA
PRUDOXIN 5 % CREAM *doxepin hcl (antipruritic)*	3	QL 45 / 30 DAYS PA
ZONALON 5 % CREAM *doxepin hcl (antipruritic)*	3	QL 45 / 30 DAYS PA
ANTIPSORIATICS		
calcipotriene 0.005 % cream	1	QL 60 / 30 DAYS
CALCIPOTRIENE 0.005 % FOAM *calcipotriene*	3	
calcipotriene 0.005 % ointment	1	QL 60 / 30 DAYS
calcipotriene 0.005 % solution	1	QL 60 / 30 DAYS
calcitrene 0.005 % ointment	1	QL 60 / 30 DAYS
CALCITRIOL 3 MCG/GM OINTMENT *calcitriol (topical)*	3	QL 100 / 30 DAYS
SORILUX 0.005 % FOAM *calcipotriene*	3	QL 60 / 30 DAYS
tazarotene 0.1 % cream	1	QL 45 / 30 DAYS PA
TAZORAC 0.05 % CREAM *tazarotene*	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAZORAC 0.05 % GEL *tazarotene*	2	QL 30 / 30 DAYS
TAZORAC 0.1 % GEL *tazarotene*	2	QL 30 / 30 DAYS
VECTICAL 3 MCG/GM OINTMENT *calcitriol (topical)*	3	QL 100 / 30 DAYS
ANTIPSORIATICS - SYSTEMIC		
acitretin 10 mg cap	1	QL 120 / 30 DAYS
acitretin 17.5 mg cap	1	QL 60 / 30 DAYS
acitretin 25 mg cap	1	QL 60 / 30 DAYS
COSENTYX (300 MG DOSE) 150 MG/ML SOLN PRSYR *secukinumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
COSENTYX 150 MG/ML SOLN PRSYR *secukinumab*	2	QL 1 / 28 DAYS PA S Specialty Drug
COSENTYX SENSOREADY (300 MG) 150 MG/ML SOLN A-INJ *secukinumab*	2	QL 2 / 28 DAYS PA S Specialty Drug
COSENTYX SENSOREADY PEN 150 MG/ML SOLN A-INJ *secukinumab*	2	QL 1 / 28 DAYS PA S Specialty Drug
ILUMYA 100 MG/ML SOLN PRSYR *tildrakizumab-asmn*	3	S Specialty Drug
methoxsalen rapid 10 mg cap	1	
SKYRIZI (150 MG DOSE) 75 MG/0.83ML PREF SY KT *risankizumab-rzaa*	2	QL 1 / 84 DAYS PA S Specialty Drug
STELARA 45 MG/0.5ML SOLN PRSYR *ustekinumab*	2	QL 0.5 / 84 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STELARA 45 MG/0.5ML SOLUTION *ustekinumab*	2	QL 0.5 / 84 DAYS PA S Specialty Drug
STELARA 90 MG/ML SOLN PRSYR *ustekinumab*	2	QL 1 / 56 DAYS PA S Specialty Drug
TREMFYA 100 MG/ML SOLN PEN *guselkumab*	2	QL 1 / 56 DAYS PA AL1 At least 18 yrs old S Specialty Drug
TREMFYA 100 MG/ML SOLN PRSYR *guselkumab*	2	QL 1 / 56 DAYS PA AL1 At least 18 yrs old S Specialty Drug
ANTISEBORRHEIC PRODUCTS		
selenium sulfide 2.5 % lotion	1	
ANTIVIRAL TOPICAL COMBINATIONS		
XERESE 5-1 % CREAM *acyclovir-hydrocortisone*	3	QL 5 / 30 DAYS AL1 At least 6 yrs old
ANTIVIRALS - TOPICAL		
acyclovir 5 % cream	1	QL 5 / 30 DAYS AL1 At least 12 yrs old
acyclovir 5 % ointment	1	AL1 At least 12 yrs old
DENAVIR 1 % CREAM *penciclovir*	3	QL 5 / 30 DAYS AL1 At least 12 yrs old
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
DUPIXENT 200 MG/1.14ML SOLN PRSYR *dupilumab*	3	QL 2.28 / 28 DAYS PA AL1 At least 6 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 300 MG/2ML SOLN PEN *dupilumab*	3	QL 4 / 28 DAYS PA AL1 At least 6 yrs old S Specialty Drug
DUPIXENT 300 MG/2ML SOLN PRSYR *dupilumab*	3	QL 4 / 28 DAYS PA AL1 At least 6 yrs old S Specialty Drug
BURN PRODUCTS		
silver sulfadiazine 1 % cream	1	
ssd 1 % cream	1	
SULFAMYLON 85 MG/GM CREAM *mafenide acetate*	3	
CORTICOSTEROIDS - TOPICAL		
ALA SCALP 2 % LOTION *hydrocortisone (topical)*	3	QL 118 / 30 DAYS
ala-cort 1 % cream	1	QL 454 / 30 DAYS
ala-cort 2.5 % cream	1	QL 454 / 30 DAYS
alclometasone dipropionate 0.05 % cream	1	QL 120 / 30 DAYS
alclometasone dipropionate 0.05 % ointment	1	QL 120 / 30 DAYS
AMCINONIDE 0.1 % CREAM *amcinonide*	3	QL 120 / 30 DAYS
AMCINONIDE 0.1 % LOTION *amcinonide*	3	QL 120 / 30 DAYS
AMCINONIDE 0.1 % OINTMENT *amcinonide*	3	QL 120 / 30 DAYS
APEXICON E 0.05 % CREAM *diflorasone diacetate emollient base*	3	QL 120 / 30 DAYS
beser 0.05 % lotion	1	QL 120 / 30 DAYS
betamethasone dipropionate 0.05 % cream	1	QL 135 / 30 DAYS
betamethasone dipropionate 0.05 % lotion	1	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
betamethasone dipropionate 0.05 % ointment	1	QL 135 / 30 DAYS
betamethasone dipropionate aug 0.05 % cream	1	QL 200 / 28 DAYS
BETAMETHASONE DIPROPIONATE AUG 0.05 % GEL *betamethasone dipropionate augmented*	3	QL 200 / 28 DAYS
betamethasone dipropionate aug 0.05 % lotion	1	QL 210 / 30 DAYS
betamethasone dipropionate aug 0.05 % ointment	1	QL 200 / 28 DAYS
betamethasone valerate 0.1 % cream	1	QL 135 / 30 DAYS
betamethasone valerate 0.1 % lotion	1	QL 120 / 30 DAYS
betamethasone valerate 0.1 % ointment	1	QL 135 / 30 DAYS
betamethasone valerate 0.12 % foam	1	QL 150 / 30 DAYS
BRYHALI 0.01 % LOTION *halobetasol propionate*	3	QL 200 / 28 DAYS
CAPEX 0.01 % SHAMPOO *fluocinolone acetonide*	3	QL 840 / 28 DAYS
clobetasol prop emollient base 0.05 % cream	1	QL 210 / 28 DAYS
clobetasol propionate 0.05 % cream	1	QL 210 / 28 DAYS
clobetasol propionate 0.05 % foam	1	QL 200 / 28 DAYS
clobetasol propionate 0.05 % gel	1	QL 210 / 28 DAYS
clobetasol propionate 0.05 % liquid	1	QL 236 / 28 DAYS
clobetasol propionate 0.05 % lotion	1	QL 177 / 28 DAYS
clobetasol propionate 0.05 % ointment	1	QL 210 / 28 DAYS
clobetasol propionate 0.05 % shampoo	1	QL 236 / 30 DAYS
clobetasol propionate 0.05 % solution	1	QL 200 / 28 DAYS
clobetasol propionate e 0.05 % cream	1	QL 210 / 28 DAYS
clobetasol propionate emulsion 0.05 % foam	1	QL 200 / 28 DAYS
CLOCORTOLONE PIVALATE 0.1 % CREAM *clocortolone pivalate*	3	QL 135 / 30 DAYS
CLOCORTOLONE PIVALATE PUMP 0.1 % CREAM *clocortolone pivalate*	3	QL 135 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clodan 0.05 % shampoo	1	QL 236 / 30 DAYS
CLODERM 0.1 % CREAM *clocortolone pivalate*	3	QL 135 / 30 DAYS
CLODERM PUMP 0.1 % CREAM *clocortolone pivalate*	3	QL 135 / 30 DAYS
CORDRAN 0.025 % CREAM *flurandrenolide*	3	QL 120 / 30 DAYS
CORDRAN 4 MCG/SQCM TAPE *flurandrenolide*	3	QL 1 / 30 DAYS
DESONATE 0.05 % GEL *desonide*	3	QL 120 / 30 DAYS
desonide 0.05 % cream	1	QL 120 / 30 DAYS
desonide 0.05 % gel	1	QL 120 / 30 DAYS
desonide 0.05 % lotion	1	QL 118 / 30 DAYS
desonide 0.05 % ointment	1	QL 120 / 30 DAYS
desoximetasone 0.05 % cream	1	QL 120 / 30 DAYS
desoximetasone 0.05 % gel	1	QL 120 / 30 DAYS
desoximetasone 0.05 % ointment	1	QL 120 / 30 DAYS
desoximetasone 0.25 % cream	1	QL 120 / 30 DAYS
desoximetasone 0.25 % liquid	1	QL 100 / 30 DAYS
desoximetasone 0.25 % ointment	1	QL 120 / 30 DAYS
DIFLORASONE DIACETATE 0.05 % CREAM *diflorasone diacetate*	3	QL 120 / 30 DAYS
diflorasone diacetate 0.05 % ointment	1	QL 120 / 30 DAYS
fluocinolone acetonide 0.01 % cream	1	QL 120 / 30 DAYS
fluocinolone acetonide 0.01 % solution	1	QL 120 / 30 DAYS
fluocinolone acetonide 0.025 % cream	1	QL 120 / 30 DAYS
fluocinolone acetonide 0.025 % ointment	1	QL 120 / 30 DAYS
fluocinolone acetonide body 0.01 % oil	1	QL 118 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluocinolone acetonide scalp 0.01 % oil	1	QL 118 / 30 DAYS
fluocinonide 0.05 % cream	1	QL 120 / 30 DAYS
fluocinonide 0.05 % gel	1	QL 120 / 30 DAYS
fluocinonide 0.05 % ointment	1	QL 120 / 30 DAYS
fluocinonide 0.05 % solution	1	QL 120 / 30 DAYS
fluocinonide 0.1 % cream	1	QL 240 / 28 DAYS
fluocinonide emulsified base 0.05 % cream	1	QL 120 / 30 DAYS
flurandrenolide 0.05 % cream	1	QL 120 / 30 DAYS
flurandrenolide 0.05 % lotion	1	QL 120 / 30 DAYS
flurandrenolide 0.05 % ointment	1	QL 120 / 30 DAYS
fluticasone propionate 0.005 % ointment	1	QL 120 / 30 DAYS
fluticasone propionate 0.05 % cream	1	QL 120 / 30 DAYS
fluticasone propionate 0.05 % lotion	1	QL 120 / 30 DAYS
halcinonide 0.1 % cream	1	QL 240 / 30 DAYS
halobetasol propionate 0.05 % cream	1	QL 200 / 28 DAYS
HALOBETASOL PROPIONATE 0.05 % FOAM *halobetasol propionate*	3	QL 200 / 28 DAYS
halobetasol propionate 0.05 % ointment	1	QL 200 / 28 DAYS
HALOG 0.1 % OINTMENT *halcinonide*	3	QL 240 / 30 DAYS
HALOG 0.1 % SOLUTION *halcinonide*	3	QL 240 / 30 DAYS
hydrocortisone 1 % cream	1	QL 454 / 30 DAYS
hydrocortisone 1 % ointment	1	QL 454 / 30 DAYS
hydrocortisone 2.5 % cream	1	QL 454 / 30 DAYS
hydrocortisone 2.5 % lotion	1	QL 118 / 30 DAYS
hydrocortisone 2.5 % ointment	1	QL 454 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydrocortisone butyr lipo base 0.1 % cream	1	QL 120 / 30 DAYS
hydrocortisone butyrate 0.1 % cream	1	QL 135 / 30 DAYS
hydrocortisone butyrate 0.1 % cream	1	QL 120 / 30 DAYS
hydrocortisone butyrate 0.1 % lotion	1	QL 118 / 30 DAYS
hydrocortisone butyrate 0.1 % ointment	1	QL 135 / 30 DAYS
HYDROCORTISONE BUTYRATE 0.1 % SOLUTION *hydrocortisone butyrate*	1	QL 120 / 30 DAYS
hydrocortisone butyrate 0.1 % solution	1	QL 120 / 30 DAYS
hydrocortisone in absorbase 1 % ointment	1	QL 454 / 30 DAYS
hydrocortisone valerate 0.2 % cream	1	QL 120 / 30 DAYS
hydrocortisone valerate 0.2 % ointment	1	QL 120 / 30 DAYS
LEXETTE 0.05 % FOAM *halobetasol propionate*	3	QL 200 / 28 DAYS
MICORT-HC 2.5 % CREAM *hydrocortisone acetate (topical)*	3	QL 120 / 30 DAYS
mometasone furoate 0.1 % cream	1	QL 135 / 30 DAYS
mometasone furoate 0.1 % ointment	1	QL 135 / 30 DAYS
mometasone furoate 0.1 % solution	1	QL 120 / 30 DAYS
nolix 0.05 % cream	1	QL 120 / 30 DAYS
nolix 0.05 % lotion	1	QL 120 / 30 DAYS
PANDEL 0.1 % CREAM *hydrocortisone probutate*	3	QL 160 / 30 DAYS
PREDNICARBATE 0.1 % CREAM *prednicarbate*	3	QL 120 / 30 DAYS
PREDNICARBATE 0.1 % OINTMENT *prednicarbate*	3	QL 120 / 30 DAYS
PSORCON 0.05 % CREAM *diflorasone diacetate*	3	QL 120 / 30 DAYS
SERNIVO 0.05 % EMULSION *betamethasone dipropionate (topical)*	3	QL 120 / 30 DAYS
TEXACORT 2.5 % SOLUTION *hydrocortisone (topical)*	3	QL 120 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tovet 0.05 % foam	1	QL 200 / 28 DAYS
triamcinolone acetonide 0.025 % cream	1	QL 454 / 30 DAYS
triamcinolone acetonide 0.025 % lotion	1	QL 120 / 30 DAYS
triamcinolone acetonide 0.025 % ointment	1	QL 454 / 30 DAYS
triamcinolone acetonide 0.05 % ointment	1	QL 430 / 30 DAYS
triamcinolone acetonide 0.1 % cream	1	QL 454 / 30 DAYS
triamcinolone acetonide 0.1 % lotion	1	QL 120 / 30 DAYS
triamcinolone acetonide 0.1 % ointment	1	QL 454 / 30 DAYS
triamcinolone acetonide 0.147 mg/gm aero soln	1	QL 126 / 30 DAYS
triamcinolone acetonide 0.5 % cream	1	QL 454 / 30 DAYS
triamcinolone acetonide 0.5 % ointment	1	QL 120 / 30 DAYS
trianex 0.05 % ointment	1	QL 430 / 30 DAYS
triderm 0.1 % cream	1	QL 454 / 30 DAYS
triderm 0.5 % cream	1	QL 454 / 30 DAYS
ULTRAVATE 0.05 % LOTION *halobetasol propionate*	3	QL 240 / 30 DAYS
VERDESO 0.05 % FOAM *desonide*	3	QL 100 / 30 DAYS
DEPIGMENTING COMBINATIONS		
TRI-LUMA 0.01-4-0.05 % CREAM *fluocinolone-hydroquinone-tretinoin*	3	
EMOLLIENTS		
ammonium lactate 12 % cream	1	
ammonium lactate 12 % lotion	1	
HPR PLUS-MB HYDROGEL KIT *emollient foam & wound dressing gel*	3	
ENZYMES - TOPICAL		
SANTYL 250 UNIT/GM OINTMENT *collagenase*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EYELID CLEANSERS & LUBRICANTS		
HYPOCYN SOLUTION *eyelid cleansers*	3	
GLABELLAR LINES (FROWN LINES) AGENTS		
BOTOX COSMETIC 100 UNIT RECON SOLN *onabotulinumtoxina (cosmetic)*	3	S Specialty Drug
BOTOX COSMETIC 50 UNIT RECON SOLN *onabotulinumtoxina (cosmetic)*	3	S Specialty Drug
IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL		
clotrimazole 1 % cream	1	
clotrimazole 1 % solution	1	
econazole nitrate 1 % cream	1	
ECOZA 1 % FOAM *econazole nitrate*	3	
ERTACZO 2 % CREAM *sertaconazole nitrate*	3	
EXELDERM 1 % CREAM *sulconazole nitrate*	3	
EXELDERM 1 % SOLUTION *sulconazole nitrate*	3	
ketoconazole 2 % cream	1	
ketoconazole 2 % foam	1	
ketoconazole 2 % shampoo	1	
ketodan 2 % foam	1	
LULICONAZOLE 1 % CREAM *luliconazole*	3	QL 60 / 30 DAYS
LUZU 1 % CREAM *luliconazole*	3	QL 60 / 30 DAYS
OXISTAT 1 % LOTION *oxiconazole nitrate*	3	
SULCONAZOLE NITRATE 1 % CREAM *sulconazole nitrate*	3	
XOLEGEL 2 % GEL *ketoconazole (topical)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL		
imiquimod 5 % cream	1	QL 48 / 60 DAYS AL1 At least 12 yrs old
IMIQUIMOD PUMP 3.75 % CREAM *imiquimod*	3	AL1 At least 12 yrs old
ZYCLARA 3.75 % CREAM *imiquimod*	2	QL 56 / 60 DAYS AL1 At least 12 yrs old
ZYCLARA PUMP 2.5 % CREAM *imiquimod*	2	QL 56 / 30 DAYS AL1 At least 12 yrs old
ZYCLARA PUMP 3.75 % CREAM *imiquimod*	2	QL 56 / 60 DAYS AL1 At least 12 yrs old
KERATOLYTIC/ANTIMITOTIC AGENTS		
CONDYLOX 0.5 % GEL *podofilox*	3	
podofilox 0.5 % solution	1	
LOCAL ANESTHETICS - TOPICAL		
7t lido 2 % gel	1	QL 900 / 30 DAYS PA
ASTERO 4 % GEL *lidocaine hcl*	3	
glydo 2 % prsyr	1	QL 900 / 30 DAYS PA
LDO PLUS 4 % GEL *lidocaine hcl*	3	
lidocaine 5 % ointment	1	QL 600 / 30 DAYS PA
lidocaine 5 % patch	1	QL 90 / 30 DAYS PA
lidocaine hcl 4 % solution	1	QL 400 / 30 DAYS PA
lidocaine hcl urethral/mucosal 2 % gel	1	QL 900 / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIDOCAINE HCL URETHRAL/MUCOSAL 2 % GEL *lidocaine hcl*	3	QL 900 / 30 DAYS PA
lidocaine hcl urethral/mucosal 2 % prsyr	1	QL 900 / 30 DAYS PA
lidocaine pak 5 % ointment	1	QL 600 / 30 DAYS PA
TETRAVEX 2 % GEL *tetracaine (topical)*	3	
ZTLIDO 1.8 % PATCH *lidocaine*	3	QL 90 / 30 DAYS PA
MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL		
pimecrolimus 1 % cream	1	QL 75 / 30 DAYS AL1 At least 2 yrs old
tacrolimus 0.03 % ointment	1	QL 100 / 30 DAYS AL1 At least 2 yrs old
tacrolimus 0.1 % ointment	1	QL 100 / 30 DAYS AL1 At least 16 yrs old
MISC. DERMATOLOGICAL PRODUCTS		
7TOPIC EMULSION *dermatological products, misc.*	3	
ATOPADERM CREAM *dermatological products, misc.*	3	
EMULSION SB EMULSION *dermatological products, misc.*	3	
ENTTY SPRAY EMULSION *dermatological products, misc.*	3	
HPR FOAM *dermatological products, misc.*	3	
HPR PLUS CREAM *dermatological products, misc.*	3	
HPR PLUS FOAM *dermatological products, misc.*	3	
HPR PLUS HYDROGEL KIT *dermatological products, misc.*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KAMDOY EMULSION *dermatological products, misc.*	3	
KIVIK EMULSION *dermatological products, misc.*	3	
NIVATOPIC PLUS CREAM *dermatological products, misc.*	3	
NUVAIL SOLUTION *dermatological products, misc.*	3	
PENLEN EMULSION *dermatological products, misc.*	3	
PHLAG SPRAY EMULSION *dermatological products, misc.*	3	
PR CREAM KIT *dermatological products, misc.*	3	
PRUCLAIR CREAM *dermatological products, misc.*	3	
PRUMYX CREAM *dermatological products, misc.*	3	
SUVICORT EMULSION *dermatological products, misc.*	3	
SYNERDERM EMULSION *dermatological products, misc.*	3	
MISC. TOPICAL		
QBREXZA 2.4 % PAD *glycopyrronium tosylate*	3	QL 30 / 30 DAYS PA
ORNITHINE DECARBOXYLASE (ODC) INHIBITORS - TOPICAL		
VANIQA 13.9 % CREAM *eflornithine hcl*	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA 2 % OINTMENT *crisaborole*	2	QL 65 / 30 DAYS
PHOTODYNAMIC THERAPY AGENTS - TOPICAL		
AMELUZ 10 % GEL *aminolevulinic acid hcl*	3	S Specialty Drug
LEVULAN KERASTICK 20 % RECON SOLN *aminolevulinic acid hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROSTAGLANDINS - TOPICAL		
bimatoprost 0.03 % solution	1	
LATISSE 0.03 % SOLUTION *bimatoprost (topical)*	3	
ROSACEA AGENTS		
azelaic acid 15 % gel	1	QL 50 / 30 DAYS
metronidazole 0.75 % cream	1	
metronidazole 0.75 % gel	1	
metronidazole 0.75 % lotion	1	
metronidazole 1 % gel	1	
MIRVASO 0.33 % GEL *brimonidine tartrate (topical)*	3	QL 30 / 30 DAYS
ORACEA 40 MG CAP DR *doxycycline (rosacea)*	2	QL 30 / 30 DAYS
rosadan 0.75 % cream	1	
rosadan 0.75 % gel	1	
SOOLANTRA 1 % CREAM *ivermectin (rosacea)*	2	QL 45 / 30 DAYS
ZILXI 1.5 % FOAM *minocycline hcl micronized (rosacea)*	2	
SCABICIDES & PEDICULICIDES		
CROTAN 10 % LOTION *crotamiton*	3	
EURAX 10 % CREAM *crotamiton*	3	
LINDANE 1 % SHAMPOO *lindane*	3	
malathion 0.5 % lotion	1	
NATROBA 0.9 % SUSPENSION *spinosad*	3	
permethrin 5 % cream	1	
SKLICE 0.5 % LOTION *ivermectin (pediculicide)*	3	
SPINOSAD 0.9 % SUSPENSION *spinosad*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULESFIA 5 % LOTION *benzyl alcohol (pediculicide)*	3	
SCAR TREATMENT PRODUCTS		
KELARX GEL *scar treatment products*	3	
SCAR TREATMENT PRODUCTS - COMBINATIONS		
SILIPAC KIT *dimethicone-silicone*	3	
SEBORRHEIC KERATOSIS PRODUCTS		
ESKATA 40 % SOLUTION *hydrogen peroxide (seborrheic keratosis)*	3	
SKIN CLEANSERS		
HYCLODEX 0.012 % SOLUTION *hypochlorous acid (skin cleanser)*	3	
TISSUE REPLACEMENTS		
AMPHENOL-40 40 MG RECON SUSP *amniotic membrane allograft (human)*	3	
TOPICAL ANESTHETIC COMBINATIONS		
lidocaine-prilocaine 2.5-2.5 % cream	1	QL 30 / 30 DAYS PA
LIDOCAINE-TETRACAINE 7-7 % CREAM *lidocaine-tetracaine*	3	QL 120 / 30 DAYS PA
PLIAGLIS 7-7 % CREAM *lidocaine-tetracaine*	3	QL 120 / 30 DAYS PA
SYNERA 70-70 MG PATCH *lidocaine-tetracaine*	3	QL 4 / 30 DAYS PA
TOPICAL STEROID COMBINATIONS		
calcipotriene-betameth diprop 0.005-0.064 % ointment	1	QL 90 / 30 DAYS
calcipotriene-betameth diprop 0.005-0.064 % suspension	1	
DUOBRII 0.01-0.045 % LOTION *halobetasol propionate-tazarotene*	3	
ENSTILAR 0.005-0.064 % FOAM *calcipotriene-betamethasone dipropionate*	2	QL 60 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TACLONEX 0.005-0.064 % SUSPENSION *calcipotriene-betamethasone dipropionate*	2	QL 90 / 30 DAYS
TYPE II 5-ALPHA REDUCTASE INHIBITORS		
finasteride 1 mg tab	1	
PROPECIA 1 MG TAB *finasteride (alopecia)*	3	
WOUND CARE - GROWTH FACTOR AGENTS		
REGRANEX 0.01 % GEL *becaplermin*	3	QL 30 / 30 DAYS
WOUND CARE COMBINATIONS		
LIDOTREX 2 % GEL *lidocaine hcl-collagen-aloe vera*	3	
WOUND CLEANSERS/DECUBITUS ULCER THERAPY		
DELUO SOLUTION *wound cleansers*	3	
WOUND DRESSINGS		
ACESO AG 4"X4" PAD *silver*	3	
ARIDA GEL *silver*	3	
AVO CREAM EMULSION *wound dressings*	3	
AZADROX GEL *silver*	3	
BIAFINE EMULSION *wound dressings*	3	
BIONECT 0.2 % CREAM *hyaluronate sodium*	3	
BIONECT 0.2 % FOAM *hyaluronate sodium*	3	
BIONECT 0.2 % GEL *hyaluronate sodium*	3	
COLLATYL GEL *silver*	3	
FORAXA EMULSION *wound dressings*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYGEL 2.5 % GEL *hyaluronate sodium*	3	
LURADROX 0.1 % GEL *hyaluronate sodium*	3	
NOXIFINE WOUND DRESSING EMULSION *wound dressings*	3	
OASIS ULTRA MATRIX FENESTRATED 3X3.5CM SHEET *collagen matrix fenestrated (porcine)*	3	
OASIS ULTRA MATRIX FENESTRATED 3X7CM SHEET *collagen matrix fenestrated (porcine)*	3	
OASIS ULTRA TRI-LAYER MATRIX 5X7CM SHEET *collagen matrix meshed (porcine)*	3	
OASIS ULTRA TRI-LAYER MATRIX 7X10CM SHEET *collagen matrix meshed (porcine)*	3	
OASIS ULTRA TRI-LAYER MATRIX 7X20CM SHEET *collagen matrix meshed (porcine)*	3	
OASIS WOUND MATRIX FENESTRATED 3X3.5CM SHEET *collagen matrix fenestrated (porcine)*	3	
OASIS WOUND MATRIX FENESTRATED 3X7CM SHEET *collagen matrix fenestrated (porcine)*	3	
PROTYL AG 1 % GEL *silver*	3	
PRUTECT EMULSION *wound dressings*	3	
SIL-K PAD LARGE MISC *wound dressings*	3	
SILVERSEAL HYDROGEL DRESSING 2"X3" PAD *silver*	3	
SILVERSEAL HYDROGEL DRESSING 4"X5" PAD *silver*	3	
SOLOX GEL *silver*	3	
SONAFINE EMULSION *wound dressings*	3	
TEGADERM AG MESH 2"X2" PAD *silver*	3	
TEGADERM AG MESH 4"X5" PAD *silver*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TEGADERM AG MESH 4"X8" PAD *silver*	3	
TEGADERM AG MESH 8"X8" PAD *silver*	3	
THERAPEVO 2.5 % GEL *hyaluronate sodium*	3	
VACUSTIM SILVER KIT *wound dressings*	3	
VASCUDERM HYDROGEL GEL *wound dressings*	3	
VEXASYN GEL *wound dressings*	3	
WOUND DEBRIDEMENT 4 % KIT *wound dressings*	3	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC BIOLOGICALS		
ALMOND (DIAGNOSTIC) 1:10 SOLUTION *almond (diagnostic)*	1	
APLISOL 5 UNIT/0.1ML SOLUTION *tuberculin ppd*	3	
APPLE (DIAGNOSTIC) 1:10 SOLUTION *apple (diagnostic)*	1	
ASPERGILLUS FUMIGATUS 1:20 SOLUTION *aspergillus fumigatus (diagnostic)*	1	
AUREOBASIDIUM PULLULANS 1:20 SOLUTION *aureobasidium pullulans (diagnostic)*	1	
AVOCADO (DIAGNOSTIC) 1:10 SOLUTION *avocado (diagnostic)*	1	
BANANA (DIAGNOSTIC) 1:10 SOLUTION *banana (diagnostic)*	1	
BEEF (DIAGNOSTIC) 1:10 SOLUTION *beef (diagnostic)*	1	
BOTRYTIS CINEREA 1:20 SOLUTION *botrytis cinerea (diagnostic)*	1	
candida albicans skn tst antgn solution	1	
CANDIN SOLUTION *candida albicans skin test antigen*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CANTALOUPE (DIAGNOSTIC) 1:10 SOLUTION *cantaloupe (diagnostic)*	1	
CASEIN (DIAGNOSTIC) 1:100 SOLUTION *casein (diagnostic)*	1	
CHICKEN MEAT (DIAGNOSTIC) 1:10 SOLUTION *chicken meat (diagnostic)*	1	
COCOA BEAN (DIAGNOSTIC) 1:10 SOLUTION *cocoa bean (diagnostic)*	1	
CRAB (DIAGNOSTIC) 1:10 SOLUTION *crab (diagnostic)*	1	
EGG WHITE (DIAGNOSTIC) 1:100 SOLUTION *egg white (diagnostic)*	1	
MOSQUITO (DIAGNOSTIC) 1:100 SOLUTION *mosquito (diagnostic)*	1	
OAT GRAIN (DIAGNOSTIC) 1:10 SOLUTION *oat grain (diagnostic)*	1	
ORANGE (DIAGNOSTIC) 1:10 SOLUTION *orange (diagnostic)*	1	
PEANUT (DIAGNOSTIC) 1:10 SOLUTION *peanut (diagnostic)*	1	
PECAN NUT (DIAGNOSTIC) 1:10 SOLUTION *pecan nut (diagnostic)*	1	
PENICILLIUM NOTATUM 1:20 SOLUTION *penicillium notatum (diagnostic)*	1	
PISTACHIO NUT (DIAGNOSTIC) 1:10 SOLUTION *pistachio nut (diagnostic)*	1	
PORK (DIAGNOSTIC) 1:10 SOLUTION *pork (diagnostic)*	1	
RICE (DIAGNOSTIC) 1:10 SOLUTION *rice (diagnostic)*	1	
SACCHAROMYCES CEREVISIAE 1:20 SOLUTION *saccharomyces cerevisiae (diagnostic)*	1	
SESAME SEED (DIAGNOSTIC) 1:10 SOLUTION *sesame seed (diagnostic)*	1	
SHRIMP (DIAGNOSTIC) 1:10 SOLUTION *shrimp (diagnostic)*	1	
SOYBEAN (DIAGNOSTIC) 1:10 SOLUTION *soybean (diagnostic)*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPHERUSOL 127 MCG/0.1ML SOLUTION *coccidioides immitis*	3	
STRAWBERRY (DIAGNOSTIC) 1:10 SOLUTION *strawberry (diagnostic)*	1	
SWEET CORN (DIAGNOSTIC) 1:10 SOLUTION *sweet corn (diagnostic)*	1	
TOMATO (DIAGNOSTIC) 1:10 SOLUTION *tomato (diagnostic)*	1	
TUBERSOL 5 UNIT/0.1ML SOLUTION *tuberculin ppd*	3	
WHOLE EGG (DIAGNOSTIC) 1:100 SOLUTION *whole egg (diagnostic)*	1	
DIAGNOSTIC DRUGS		
ACTHREL 100 MCG RECON SOLN *corticorelin ovine triflutate*	3	S Specialty Drug
ADENOSCAN 3 MG/ML SOLUTION *adenosine (diagnostic)*	3	
adenosine (diagnostic) 3 mg/ml solution	1	
adenosine 3 mg/ml solution	1	
ARIDOL 0 & 5 & 10 & 20 & 40 MG KIT *mannitol (diagnostic)*	3	
CHIRHOSTIM 16 MCG RECON SOLN *secretin acetate (human)*	3	
CORTROSYN 0.25 MG RECON SOLN *cosyntropin*	3	
cosyntropin 0.25 mg recon soln	1	
CUSHING SYNDROME DIAGNOSTIC 0.5 MG KIT *dexamethasone diagnostic test*	3	
CYSVIEW 100 MG RECON SOLN *hexaminolevulinate hcl*	3	
DIPYRIDAMOLE 5 MG/ML SOLUTION *dipyridamole (diagnostic)*	1	
GLEOLAN 1.5 GM RECON SOLN *aminolevulinic acid hydrochloride*	3	
GLUCAGEN DIAGNOSTIC 1 MG RECON SOLN *glucagon hcl rdna (diagnostic)*	3	
GLUCAGON HCL (DIAGNOSTIC) 1 MG RECON SOLN *glucagon hcl (diagnostic)*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HISTATROL 0.275 MG/ML SOLUTION *histamine phosphate*	3	
HISTATROL 2.75 MG/ML SOLUTION *histamine phosphate*	3	
IC GREEN 25 MG RECON SOLN *indocyanine green*	3	
indocyanine green 25 mg recon soln	1	
isosulfan blue 1 % solution	1	
KINEVAC 5 MCG RECON SOLN *sincalide*	3	
LEXISCAN 0.4 MG/5ML SOLUTION *regadenoson*	3	
MACRILEN 60 MG PACKET *macimorelin acetate*	3	
METOPIRONE 250 MG CAP *metyrapone*	3	
PRE-PEN 0.25 ML SOLUTION *benzylpenicilloyl polylysine*	3	
PROVOCHOLINE 100 MG RECON SOLN *methacholine chloride*	3	
R-GENE 10 10 % SOLUTION *arginine hcl (diagnostic)*	3	
THYROGEN 1.1 MG RECON SOLN *thyrotropin alfa*	3	S Specialty Drug
DIAGNOSTIC RADIOPHARMACEUTICALS - BRAIN		
AMYVID 500-1900 MBQ/ML SOLUTION *florbetapir f 18*	3	
DATSCAN 185 MBQ/2.5ML SOLUTION *ioflupane i 123*	3	
VIZAMYL 4.05 MCI/ML SOLUTION *flutemetamol f 18*	3	
DIAGNOSTIC RADIOPHARMACEUTICALS - CARDIAC		
AMMONIA N 13 3.75-37.5 MCI/ML SOLUTION *ammonia n 13*	1	
MYOVIEW 30ML KIT *technetium tc 99m tetrofosmin*	3	
TECHNETIUM TC 99M SESTAMIBI KIT *technetium tc 99m sestamibi*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THALLOUS CHLORIDE TL 201 1 MCI/ML SOLUTION *thallous chloride tl 201*	1	
THALLOUS CHLORIDE TL 201 2 MCI/ML SOLUTION *thallous chloride tl 201*	1	
DIAGNOSTIC RADIOPHARMACEUTICALS - ENDOCRINE		
ADREVIEW 10 MCI/5ML SOLUTION *iobenguane sulfate i 123*	3	
DOTATOC GA 68 0.5-4 MCI/ML SOLUTION *gallium ga 68 dotatoc*	3	
INDICLOR SOLUTION *indium in-111 chloride*	3	
INDIUM IN 111 DTPA SOLUTION *pentetate indium disodium in 111*	1	
NETSPOT KIT *gallium ga 68 dotatate*	3	
DIAGNOSTIC RADIOPHARMACEUTICALS - GASES		
XENON XE 133 10 MCI GAS *xenon xe 133*	1	
XENON XE 133 20 MCI GAS *xenon xe 133*	1	
DIAGNOSTIC RADIOPHARMACEUTICALS - HEPATOBILIARY		
CHOLETEC KIT *technetium tc 99m mebrofenin*	3	
HEPATOLITE KIT *technetium tc 99m disofenin*	3	
TECHNETIUM TC 99M MEBROFENIN KIT *technetium tc 99m mebrofenin*	1	
DIAGNOSTIC RADIOPHARMACEUTICALS - MISCELLANEOUS		
CERIANNA 4-100 MCI/ML SOLUTION *fluoroestradiol f 18*	3	
FLUDEOXYGLUCOSE F 18 20-300 MCI/ML SOLUTION *fludeoxyglucose f 18*	1	
GALLIUM CITRATE GA 67 2 MCI/ML SOLUTION *gallium citrate ga 67*	1	
LEU TECHNELITE KIT *technetium tc 99m sodium pertechnetate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECHNELITE KIT *technetium tc 99m sodium pertechnetate*	3	
TECHNET TC 99M SULFUR COLLOID KIT *technetium tc 99m sulfur colloid*	1	
TECHNETIUM TC 99M PYROPHOS KIT *technetium tc 99m pyrophosphate*	1	
VOLUMEX 25 MCCI/ML SOLN PRSYR *iodinated i 131 albumin*	3	
DIAGNOSTIC RADIOPHARMACEUTICALS - SKELETAL		
TECHNETIUM TC 99M MEDRONATE KIT *technetium tc 99m medronate*	1	
DIAGNOSTIC RADIOPHARMACEUTICALS-IMMUNE CELL RADIOLABELING		
CERETEC KIT *technetium tc 99m exametazime*	3	
INDIUM IN 111 OXYQUINOLINE 1 MCI/ML SOLUTION *indium in 111 oxyquinoline*	1	
DIAGNOSTIC TESTS		
12-PANEL POC TOXICOLOGY SYSTEM KIT *drug assay (urine)*	3	
ACTIVE-MEDICATED SPEC COLLECT KIT *urine specimen collection*	3	
ADVANCED DNA COLLECTION KIT *dna collection product*	3	
ADVANCED DNA COLLECTION II KIT *dna collection product*	3	
ADVANCED DNA COLLECTION III KIT *dna collection product*	3	
CONTOUR NEXT TEST STRIP *glucose blood*	2	QL 204 / 30 DAYS
CONTOUR TEST STRIP *glucose blood*	2	QL 204 / 30 DAYS
DX1 ORAGENOMIC DNA SCREEN KIT *dna collection product*	3	
DX2 ORAGENOMIC DNA SCREEN KIT *dna collection product*	3	
HOME PAP KIT 2.5 % KIT *pap test collection*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDICATED DNA COLLECTION KIT *dna collection product*	3	
MEDICATED DNA COLLECTION 2 KIT *dna collection product*	3	
PRO DNA COLLECTION 2 % KIT *dna collection product*	3	
PROFESSIONAL DNA COLLECTION KIT *dna collection product*	3	
RX-SPECIMEN COLLECTION KIT *urine specimen collection*	3	
TOXICOLOGY MED COLLECTION SYS KIT *drug assay (urine)*	3	
TOXICOLOGY SALIVA COLLECTION KIT *toxicology saliva collection*	1	
MISCELLANEOUS CONTRAST MEDIA		
clariscan 10 mmol/20ml solution	1	
clariscan 5 mmol/10ml solution	1	
clariscan 7.5 mmol/15ml solution	1	
DEFINITY 6.52 MG/ML SUSPENSION *perflutren lipid microsphere*	3	
DOTAREM 10 MMOL/20ML SOLN PRSYR *gadoterate meglumine*	3	
DOTAREM 10 MMOL/20ML SOLUTION *gadoterate meglumine*	3	
DOTAREM 2.5 MMOL/5ML SOLUTION *gadoterate meglumine*	3	
DOTAREM 5 MMOL/10ML SOLN PRSYR *gadoterate meglumine*	3	
DOTAREM 5 MMOL/10ML SOLUTION *gadoterate meglumine*	3	
DOTAREM 50 MMOL/100ML SOLUTION *gadoterate meglumine*	3	
DOTAREM 7.5 MMOL/15ML SOLN PRSYR *gadoterate meglumine*	3	
DOTAREM 7.5 MMOL/15ML SOLUTION *gadoterate meglumine*	3	
EOVIST 0.25 MOL/L SOLUTION *gadoxetate disodium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GADAVIST 1 MMOL/ML SOLUTION *gadobutrol*	3	
LUMASON 60.7-25 MG RECON SUSP *sulfur hexafluoride lipid-type a microspheres*	3	
MAGNEVIST 469.01 MG/ML SOLUTION *gadopentetate dimeglumine*	3	
MULTIHANCE 529 MG/ML SOLUTION *gadobenate dimeglumine*	3	
OMNISCAN 287 MG/ML INJECTABLE *gadodiamide*	3	
OMNISCAN 287 MG/ML SOLUTION *gadodiamide*	3	
OMNISCAN/SODIUM CHLORIDE 287-0.9 MG/ML-% SOLUTION *gadodiamide-sodium chloride*	3	
OPTIMARK 330.9 MG/ML SOLUTION *gadoversetamide*	3	
OPTISON SUSPENSION *perflutren protein-type a microspheres*	3	
PROHANCE 279.3 MG/ML SOLUTION *gadoteridol*	3	
RADIOGRAPHIC CONTRAST MEDIA - BARIUM		
E-Z-HD 98 % RECON SUSP *barium sulfate*	3	
E-Z-PAQUE 96 % RECON SUSP *barium sulfate*	3	
LIQUID E-Z-PAQUE 60 % SUSPENSION *barium sulfate*	3	
READI-CAT 2 2 % SUSPENSION *barium sulfate*	3	
TAGITOL V 40 % SUSPENSION *barium sulfate*	3	
VARIBAR HONEY 40 % SUSPENSION *barium sulfate*	3	
VARIBAR NECTAR 40 % SUSPENSION *barium sulfate*	3	
VARIBAR PUDDING 40 % PASTE *barium sulfate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VARIBAR THIN HONEY 40 % SUSPENSION *barium sulfate*	3	
VARIBAR THIN LIQUID 40 % RECON SUSP *barium sulfate*	3	
RADIOGRAPHIC CONTRAST MEDIA - IODINATED		
CONRAY 30 30 % SOLUTION *iothalamate meglumine*	3	
CONRAY 43 43 % SOLUTION *iothalamate meglumine*	3	
CONRAY 60 % SOLUTION *iothalamate meglumine*	3	
CYSTO-CONRAY II 17.2 % SOLUTION *iothalamate meglumine*	3	
CYSTOGRAFIN 30 % SOLUTION *diatrizoate meglumine*	3	
CYSTOGRAFIN-DILUTE 18 % SOLUTION *diatrizoate meglumine*	3	
GASTROGRAFIN 66-10 % SOLUTION *diatrizoate meglumine & sodium*	3	
ISOVUE-200 41 % SOLUTION *iopamidol*	3	
ISOVUE-250 51 % SOLUTION *iopamidol*	3	
ISOVUE-300 61 % SOLUTION *iopamidol*	3	
ISOVUE-370 76 % SOLUTION *iopamidol*	3	
ISOVUE-M 200 41 % SOLUTION *iopamidol*	3	
ISOVUE-M 300 61 % SOLUTION *iopamidol*	3	
LIPIODOL OIL *ethiodized oil*	3	
md-gastroview 66-10 % solution	1	
OMNIPAQUE 12 MG/ML SOLUTION *iohexol*	3	
OMNIPAQUE 140 MG/ML SOLUTION *iohexol*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNIPAQUE 180 MG/ML SOLUTION *iohexol*	3	
OMNIPAQUE 240 MG/ML SOLUTION *iohexol*	3	
OMNIPAQUE 300 MG/ML SOLUTION *iohexol*	3	
OMNIPAQUE 350 MG/ML SOLUTION *iohexol*	3	
OMNIPAQUE 9 MG/ML SOLUTION *iohexol*	3	
OPTIRAY 240 51 % SOLUTION *ioversol*	3	
OPTIRAY 300 64 % SOLUTION *ioversol*	3	
OPTIRAY 320 68 % SOLUTION *ioversol*	3	
OPTIRAY 350 74 % SOLUTION *ioversol*	3	
ULTRAVIST 50 % SOLUTION *iopromide*	3	
ULTRAVIST 62 % SOLUTION *iopromide*	3	
ULTRAVIST 77 % SOLUTION *iopromide*	3	
VISIPAQUE 270 MG/ML SOLUTION *iodixanol*	3	
VISIPAQUE 320 MG/ML SOLUTION *iodixanol*	3	
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 12000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
CREON 24000-76000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
CREON 3000-9500 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
CREON 36000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CREON 6000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
SUCRAID 8500 UNIT/ML SOLUTION *sacrosidase*	3	S Specialty Drug
ZENPEP 10000-32000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 15000-47000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 20000-63000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 25000-79000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 3000-14000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 40000-126000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
ZENPEP 5000-24000 UNIT CP DR PART *pancrelipase (lipase-protease-amylase)*	2	
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
acetazolamide 125 mg tab	1	
acetazolamide 250 mg tab	1	
acetazolamide er 500 mg cap er 12h	1	
acetazolamide sodium 500 mg recon soln	1	
KEVEYIS 50 MG TAB *dichlorphenamide*	3	QL 120 / 30 DAYS PA S Specialty Drug
methazolamide 25 mg tab	1	
methazolamide 50 mg tab	1	
DIURETIC COMBINATIONS		
ALDACTAZIDE 50-50 MG TAB *spironolactone & hydrochlorothiazide*	3	
amiloride-hydrochlorothiazide 5-50 mg tab	1	
spironolactone-hctz 25-25 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
triamterene-hctz 37.5-25 mg cap	1	
triamterene-hctz 37.5-25 mg tab	1	
triamterene-hctz 75-50 mg tab	1	
LOOP DIURETICS		
bumetanide 0.25 mg/ml solution	1	
bumetanide 0.5 mg tab	1	
bumetanide 1 mg tab	1	
bumetanide 2 mg tab	1	
ethacrynate sodium 50 mg recon soln	1	
ethacrynic acid 25 mg tab	1	
furosemide 10 mg/ml solution	1	
furosemide 10 mg/ml solution	1	
furosemide 20 mg tab	1	
furosemide 40 mg tab	1	
FUROSEMIDE 8 MG/ML SOLUTION *furosemide*	3	
furosemide 80 mg tab	1	
SODIUM EDECRIN 50 MG RECON SOLN *ethacrynate sodium*	3	
torsemide 10 mg tab	1	
torsemide 100 mg tab	1	
torsemide 20 mg tab	1	
torsemide 5 mg tab	1	
OSMOTIC DIURETICS		
mannitol 20 % solution	1	
mannitol 25 % solution	1	
OSMITROL 10 % SOLUTION *mannitol*	3	
OSMITROL 15 % SOLUTION *mannitol*	3	
osmitrol 20 % solution	1	
OSMITROL 5 % SOLUTION *mannitol*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POTASSIUM SPARING DIURETICS		
amiloride hcl 5 mg tab	1	
CAROSPIR 25 MG/5ML SUSPENSION *spironolactone*	3	
spironolactone 100 mg tab	1	
spironolactone 25 mg tab	1	
spironolactone 50 mg tab	1	
triamterene 100 mg cap	1	
triamterene 50 mg cap	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
CHLOROTHIAZIDE 250 MG TAB *chlorothiazide*	3	
CHLOROTHIAZIDE 500 MG TAB *chlorothiazide*	3	
chlorothiazide 500 mg tab	1	
chlorothiazide sodium 500 mg recon soln	1	
chlorthalidone 25 mg tab	1	
chlorthalidone 50 mg tab	1	
DIURIL 250 MG/5ML SUSPENSION *chlorothiazide*	3	
hydrochlorothiazide 12.5 mg cap	1	
hydrochlorothiazide 12.5 mg tab	1	
hydrochlorothiazide 25 mg tab	1	
hydrochlorothiazide 50 mg tab	1	
indapamide 1.25 mg tab	1	
indapamide 2.5 mg tab	1	
METHYCLOTHIAZIDE 5 MG TAB *methyclothiazide*	3	
metolazone 10 mg tab	1	
metolazone 2.5 mg tab	1	
metolazone 5 mg tab	1	
SODIUM DIURIL 500 MG RECON SOLN *chlorothiazide sodium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ABORTIFACIENT - PROGESTERONE RECEPTOR ANTAGONISTS		
MIFEPREX 200 MG TAB *mifepristone*	3	
mifepristone 200 mg tab	1	
ADENOSINE DEAMINASE SCID TREATMENT - AGENTS		
REVCOVI 2.4 MG/1.5ML SOLUTION *elapegademase-lvlr*	2	S Specialty Drug
BISPHOSPHONATES		
alendronate sodium 10 mg tab	1	QL 30 / 30 DAYS
alendronate sodium 35 mg tab	1	QL 5 / 30 DAYS
ALENDRONATE SODIUM 40 MG TAB *alendronate sodium*	3	QL 5 / 30 DAYS
ALENDRONATE SODIUM 5 MG TAB *alendronate sodium*	3	
alendronate sodium 5 mg tab	1	QL 30 / 30 DAYS
alendronate sodium 70 mg tab	1	QL 5 / 30 DAYS
ALENDRONATE SODIUM 70 MG/75ML SOLUTION *alendronate sodium*	3	QL 5 / 30 DAYS
BINOSTO 70 MG EFFER TAB *alendronate sodium*	3	QL 5 / 30 DAYS
BONIVA 3 MG/3ML SOLUTION *ibandronate sodium*	3	S Specialty Drug
ETIDRONATE DISODIUM 200 MG TAB *etidronate disodium*	3	
ETIDRONATE DISODIUM 400 MG TAB *etidronate disodium*	3	
FOSAMAX PLUS D 70-2800 MG-UNIT TAB *alendronate sodium-cholecalciferol*	3	QL 5 / 30 DAYS
FOSAMAX PLUS D 70-5600 MG-UNIT TAB *alendronate sodium-cholecalciferol*	3	QL 5 / 30 DAYS
ibandronate sodium 150 mg tab	1	QL 1.2 / 30 DAYS
ibandronate sodium 3 mg/3ml solution	1	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAMIDRONATE DISODIUM 30 MG RECON SOLN *pamidronate disodium*	1	
pamidronate disodium 30 mg/10ml solution	1	
PAMIDRONATE DISODIUM 6 MG/ML SOLUTION *pamidronate disodium*	1	
PAMIDRONATE DISODIUM 90 MG RECON SOLN *pamidronate disodium*	1	
pamidronate disodium 90 mg/10ml solution	1	
RECLAST 5 MG/100ML SOLUTION *zoledronic acid*	3	S Specialty Drug
risedronate sodium 150 mg tab	1	QL 1.2 / 30 DAYS
risedronate sodium 30 mg tab	1	
risedronate sodium 35 mg tab	1	QL 5 / 30 DAYS
risedronate sodium 35 mg tab dr	1	
risedronate sodium 5 mg tab	1	QL 30 / 30 DAYS
ZOLEDRONIC ACID 4 MG/100ML SOLUTION *zoledronic acid*	1	S Specialty Drug
zoledronic acid 4 mg/5ml conc	1	S Specialty Drug
zoledronic acid 5 mg/100ml solution	1	S Specialty Drug
ZOMETA 4 MG/100ML SOLUTION *zoledronic acid*	3	S Specialty Drug
ZOMETA 4 MG/5ML CONC *zoledronic acid*	3	S Specialty Drug
CALCIMIMETIC AGENTS		
cinacalcet hcl 30 mg tab	1	QL 60 / 30 DAYS S Specialty Drug
cinacalcet hcl 60 mg tab	1	QL 60 / 30 DAYS S Specialty Drug
cinacalcet hcl 90 mg tab	1	QL 60 / 30 DAYS S Specialty Drug
PARSABIV 10 MG/2ML SOLUTION *etelcalcetide hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARSABIV 2.5 MG/0.5ML SOLUTION *etelcalcetide hcl*	3	
PARSABIV 5 MG/ML SOLUTION *etelcalcetide hcl*	3	
CALCITONINS		
calcitonin (salmon) 200 unit/act solution	1	QL 4 / 30 DAYS
MIACALCIN 200 UNIT/ML SOLUTION *calcitonin (salmon)*	3	
CARNITINE REPLENISHER - AGENTS		
CARNITOR 200 MG/ML SOLUTION *levocarnitine (metabolic modifiers)*	3	
levocarnitine 1 gm/10ml solution	1	
levocarnitine 330 mg tab	1	
levocarnitine sf 1 gm/10ml solution	1	
CORTICOTROPIN		
ACTHAR 80 UNIT/ML GEL *corticotropin*	3	PA S Specialty Drug
CORTISOL SYNTHESIS INHIBITORS		
ISTURISA 1 MG TAB *osilodrostat phosphate*	3	PA S Specialty Drug
ISTURISA 10 MG TAB *osilodrostat phosphate*	3	PA S Specialty Drug
ISTURISA 5 MG TAB *osilodrostat phosphate*	3	PA S Specialty Drug
DOPAMINE RECEPTOR AGONISTS		
cabergoline 0.5 mg tab	1	
FABRY DISEASE - AGENTS		
FABRAZYME 35 MG RECON SOLN *agalsidase beta*	3	S Specialty Drug
FABRAZYME 5 MG RECON SOLN *agalsidase beta*	3	S Specialty Drug
GALAFOLD 123 MG CAP *migalastat hcl*	3	QL 14 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAA DEFICIENCY TREATMENT - AGENTS		
LUMIZYME 50 MG RECON SOLN *alglucosidase alfa*	3	S Specialty Drug
GNRH/LHRH ANTAGONISTS		
ganirelix acetate 250 mcg/0.5ml soln prsyr	1	QL 2.5 / 30 DAYS PA GL Female S Specialty Drug
ORILISSA 150 MG TAB *elagolix sodium*	2	QL 30 / 30 DAYS PA AL1 At least 18 yrs old
ORILISSA 200 MG TAB *elagolix sodium*	2	QL 60 / 30 DAYS PA AL1 At least 18 yrs old
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10 MG RECON SOLN *pegvisomant*	3	S Specialty Drug
SOMAVERT 15 MG RECON SOLN *pegvisomant*	3	S Specialty Drug
SOMAVERT 20 MG RECON SOLN *pegvisomant*	3	S Specialty Drug
SOMAVERT 25 MG RECON SOLN *pegvisomant*	3	S Specialty Drug
SOMAVERT 30 MG RECON SOLN *pegvisomant*	3	S Specialty Drug
GROWTH HORMONES		
NORDITROPIN FLEXPRO 10 MG/1.5ML SOLN PEN *somatropin*	2	PA S Specialty Drug
NORDITROPIN FLEXPRO 15 MG/1.5ML SOLN PEN *somatropin*	2	PA S Specialty Drug
NORDITROPIN FLEXPRO 30 MG/3ML SOLN PEN *somatropin*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORDITROPIN FLEXPRO 5 MG/1.5ML SOLN PEN *somatropin*	2	PA S Specialty Drug
HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS		
XURIDEN 2 GM PACKET *uridine triacetate*	3	S Specialty Drug
HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS		
nitisinone 10 mg cap	1	S Specialty Drug
nitisinone 2 mg cap	1	S Specialty Drug
nitisinone 5 mg cap	1	S Specialty Drug
NITYR 10 MG TAB *nitisinone*	2	S Specialty Drug
NITYR 2 MG TAB *nitisinone*	2	S Specialty Drug
NITYR 5 MG TAB *nitisinone*	2	S Specialty Drug
ORFADIN 20 MG CAP *nitisinone*	2	S Specialty Drug
ORFADIN 4 MG/ML SUSPENSION *nitisinone*	2	S Specialty Drug
HOMOCYSTINURIA TREATMENT - AGENTS		
CYSTADANE POWDER *betaine*	2	S Specialty Drug
HYPERAMMONEMIA TREATMENT - AGENTS		
CARBAGLU 200 MG TAB *carglumic acid*	3	PA S Specialty Drug
HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS		
calcitriol 0.25 mcg cap	1	
calcitriol 0.5 mcg cap	1	
CALCITRIOL 1 MCG/ML SOLUTION *calcitriol*	1	
calcitriol 1 mcg/ml solution	1	
doxercalciferol 0.5 mcg cap	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
doxercalciferol 1 mcg cap	1	
doxercalciferol 2.5 mcg cap	1	
doxercalciferol 4 mcg/2ml solution	1	
HECTOROL 2 MCG/ML SOLUTION *doxercalciferol*	3	
HECTOROL 4 MCG/2ML SOLUTION *doxercalciferol*	3	
paricalcitol 1 mcg cap	1	
paricalcitol 2 mcg cap	1	
paricalcitol 2 mcg/ml solution	1	
paricalcitol 4 mcg cap	1	
paricalcitol 5 mcg/ml solution	1	
RAYALDEE 30 MCG CAP ER *calcifediol*	3	
ZEMPLAR 2 MCG/ML SOLUTION *paricalcitol*	3	
ZEMPLAR 5 MCG/ML SOLUTION *paricalcitol*	3	
HYPOPHOSPHATASIA (HPP) AGENTS		
STRENSIQ 18 MG/0.45ML SOLUTION *asfotase alfa*	2	PA S Specialty Drug
STRENSIQ 28 MG/0.7ML SOLUTION *asfotase alfa*	2	PA S Specialty Drug
STRENSIQ 40 MG/ML SOLUTION *asfotase alfa*	2	PA S Specialty Drug
STRENSIQ 80 MG/0.8ML SOLUTION *asfotase alfa*	2	PA S Specialty Drug
INSULIN-LIKE GROWTH FACTOR-1 RECEPTOR INHIBITORS(IGF-1R)		
TEPEZZA 500 MG RECON SOLN *teprotumumab-trbw*	3	S Specialty Drug
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40 MG/4ML SOLUTION *mecasermin*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEPTIN ANALOGUES		
MYALEPT 11.3 MG RECON SOLN *metreleptin*	3	PA S Specialty Drug
LHRH/GNRH AGONIST ANALOG COMBINATIONS		
LUPANETA PACK 11.25 & 5 MG KIT *leuprolide acetate & norethindrone acetate*	3	S Specialty Drug
LUPANETA PACK 3.75 & 5 MG KIT *leuprolide acetate & norethindrone acetate*	3	S Specialty Drug
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON DEPOT-PED (1-MONTH) 11.25 MG KIT *leuprolide acetate (cpp)*	2	S Specialty Drug
LUPRON DEPOT-PED (1-MONTH) 15 MG KIT *leuprolide acetate (cpp)*	2	S Specialty Drug
LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT *leuprolide acetate (cpp)*	2	S Specialty Drug
LUPRON DEPOT-PED (3-MONTH) 11.25 MG (PED) KIT *leuprolide acetate (cpp) (3 month)*	2	S Specialty Drug
LUPRON DEPOT-PED (3-MONTH) 30 MG (PED) KIT *leuprolide acetate (cpp) (3 month)*	2	S Specialty Drug
SUPPRELIN LA 50 MG KIT *histrelin acetate (cpp)*	3	S Specialty Drug
SYNAREL 2 MG/ML SOLUTION *nafarelin acetate*	3	S Specialty Drug
TRIPTODUR 22.5 MG SRER *triptorelin pamoate (cpp)*	3	S Specialty Drug
LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS		
KANUMA 20 MG/10ML SOLUTION *sebelipase alfa*	3	S Specialty Drug
MUCOPOLYSACCHARIDOSIS I (MPS I) - AGENTS		
ALDURAZYME 2.9 MG/5ML SOLUTION *laronidase*	3	S Specialty Drug
MUCOPOLYSACCHARIDOSIS II (MPS II) - AGENTS		
ELAPRASE 6 MG/3ML SOLUTION *idursulfase*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS		
VIMIZIM 5 MG/5ML SOLUTION *elosulfase alfa*	3	S Specialty Drug
MUCOPOLYSACCHARIDOSIS VI (MPS VI) - AGENTS		
NAGLAZYME 1 MG/ML SOLUTION *galsulfase*	3	S Specialty Drug
MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS		
MEPSEVII 10 MG/5ML SOLUTION *vestronidase alfa-vjbk*	3	S Specialty Drug
OVULATION STIMULANTS-GONADOTROPINS		
CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN *chorionic gonadotropin*	2	QL 2 / 30 DAYS PA S Specialty Drug
FOLLISTIM AQ 300 UNT/0.36ML SOLUTION *follitropin beta*	2	QL 5.4 / 30 DAYS PA S Specialty Drug
FOLLISTIM AQ 600 UNT/0.72ML SOLUTION *follitropin beta*	2	QL 5.76 / 30 DAYS PA S Specialty Drug
FOLLISTIM AQ 900 UNT/1.08ML SOLUTION *follitropin beta*	2	QL 5.4 / 30 DAYS PA S Specialty Drug
MENOPUR 75 UNIT RECON SOLN *menotropins*	2	QL 60 / 30 DAYS PA GL Female S Specialty Drug
NOVAREL 10000 UNIT RECON SOLN *chorionic gonadotropin*	2	QL 2 / 30 DAYS PA S Specialty Drug
NOVAREL 5000 UNIT RECON SOLN *chorionic gonadotropin*	2	QL 4 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREGNYL 10000 UNIT RECON SOLN *chorionic gonadotropin*	2	QL 2 / 30 DAYS PA S Specialty Drug
OVULATION STIMULANTS-SYNTHETIC		
CLOMIPHENE CITRATE 50 MG TAB *clomiphene citrate*	2	GL Female
PARATHYROID HORMONE AND DERIVATIVES		
NATPARA 100 MCG CARTRIDGE *parathyroid hormone (recombinant)*	3	QL 2 / 28 DAYS PA S Specialty Drug
NATPARA 25 MCG CARTRIDGE *parathyroid hormone (recombinant)*	3	QL 2 / 28 DAYS PA S Specialty Drug
NATPARA 50 MCG CARTRIDGE *parathyroid hormone (recombinant)*	3	QL 2 / 28 DAYS PA S Specialty Drug
NATPARA 75 MCG CARTRIDGE *parathyroid hormone (recombinant)*	3	QL 2 / 28 DAYS PA S Specialty Drug
TYMLOS 3120 MCG/1.56ML SOLN PEN *abaloparatide*	2	QL 2 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
PHENYLKETONURIA TREATMENT - AGENTS		
KUVAN 100 MG PACKET *sapropterin dihydrochloride*	3	PA S Specialty Drug
KUVAN 100 MG TAB SOL *sapropterin dihydrochloride*	3	PA S Specialty Drug
KUVAN 500 MG PACKET *sapropterin dihydrochloride*	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALYNZIQ 10 MG/0.5ML SOLN PRSYR *pegvaliase-pqpz*	3	QL 60 / 30 DAYS PA S Specialty Drug
PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR *pegvaliase-pqpz*	3	QL 240 / 30 DAYS PA S Specialty Drug
PALYNZIQ 20 MG/ML SOLN PRSYR *pegvaliase-pqpz*	3	QL 60 / 30 DAYS PA S Specialty Drug
sapropterin dihydrochloride 100 mg packet	1	PA S Specialty Drug
sapropterin dihydrochloride 100 mg tab sol	1	PA S Specialty Drug
sapropterin dihydrochloride 500 mg packet	1	PA S Specialty Drug
RANK LIGAND (RANKL) INHIBITORS		
PROLIA 60 MG/ML SOLN PRSYR *denosumab*	3	QL 1 / 180 DAYS S Specialty Drug
XGEVA 120 MG/1.7ML SOLUTION *denosumab*	3	QL 2.1 / 30 DAYS S Specialty Drug
SCLEROSTIN INHIBITORS		
EVENITY 105 MG/1.17ML SOLN PRSYR *romosozumab-aqqg*	3	S Specialty Drug
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
OSPHENA 60 MG TAB *ospemifene*	3	
raloxifene hcl 60 mg tab	1	ACA Affordable Care Act
SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS		
JYNARQUE 15 MG TAB *tolvaptan*	3	QL 60 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JYNARQUE 15 MG TAB THPK *tolvaptan*	3	QL 56 / 28 DAYS PA S Specialty Drug
JYNARQUE 30 & 15 MG TAB THPK *tolvaptan*	3	QL 56 / 28 DAYS PA S Specialty Drug
JYNARQUE 30 MG TAB *tolvaptan*	3	QL 30 / 30 DAYS PA S Specialty Drug
JYNARQUE 45 & 15 MG TAB THPK *tolvaptan*	3	QL 56 / 28 DAYS PA S Specialty Drug
JYNARQUE 60 & 30 MG TAB THPK *tolvaptan*	3	QL 56 / 28 DAYS PA S Specialty Drug
JYNARQUE 90 & 30 MG TAB THPK *tolvaptan*	3	QL 56 / 28 DAYS PA S Specialty Drug
SAMSCA 15 MG TAB *tolvaptan*	3	QL 30 / 365 DAYS S Specialty Drug
tolvaptan 30 mg tab	1	QL 60 / 365 DAYS S Specialty Drug
SOMATOSTATIC AGENTS		
octreotide acetate 100 mcg/ml solution	1	S Specialty Drug
octreotide acetate 1000 mcg/ml solution	1	S Specialty Drug
octreotide acetate 200 mcg/ml solution	1	S Specialty Drug
octreotide acetate 50 mcg/ml solution	1	S Specialty Drug
octreotide acetate 500 mcg/ml solution	1	S Specialty Drug
SANDOSTATIN LAR DEPOT 10 MG KIT *octreotide acetate*	3	QL 1.2 / 28 DAYS S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SANDOSTATIN LAR DEPOT 20 MG KIT *octreotide acetate*	3	QL 1 / 28 DAYS S Specialty Drug
SANDOSTATIN LAR DEPOT 30 MG KIT *octreotide acetate*	3	QL 1.2 / 28 DAYS S Specialty Drug
SIGNIFOR 0.3 MG/ML SOLUTION *pasireotide diaspartate*	3	S Specialty Drug
SIGNIFOR 0.6 MG/ML SOLUTION *pasireotide diaspartate*	3	S Specialty Drug
SIGNIFOR 0.9 MG/ML SOLUTION *pasireotide diaspartate*	3	S Specialty Drug
SIGNIFOR LAR 10 MG SRER *pasireotide pamoate*	3	QL 3 / 30 DAYS S Specialty Drug
SIGNIFOR LAR 20 MG SRER *pasireotide pamoate*	3	QL 3 / 30 DAYS S Specialty Drug
SIGNIFOR LAR 30 MG SRER *pasireotide pamoate*	3	QL 3 / 30 DAYS S Specialty Drug
SIGNIFOR LAR 40 MG SRER *pasireotide pamoate*	3	QL 2 / 30 DAYS S Specialty Drug
SIGNIFOR LAR 60 MG SRER *pasireotide pamoate*	3	QL 1.2 / 28 DAYS S Specialty Drug
SOMATULINE DEPOT 120 MG/0.5ML SOLUTION *lanreotide acetate*	3	QL 0.6 / 28 DAYS S Specialty Drug
SOMATULINE DEPOT 60 MG/0.2ML SOLUTION *lanreotide acetate*	3	QL 0.6 / 28 DAYS S Specialty Drug
SOMATULINE DEPOT 90 MG/0.3ML SOLUTION *lanreotide acetate*	3	QL 0.6 / 28 DAYS S Specialty Drug
TRIPEPTIDYL PEPTIDASE 1 DEFICIENCY TREATMENT - AGENTS		
BRINEURA 2 X 150 MG/5ML KIT *cerliponase alfa*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UREA CYCLE DISORDER - AGENTS		
AMMONUL 10-10 % SOLUTION *sod benzoate & sod phenylacetate*	3	
RAVICTI 1.1 GM/ML LIQUID *glycerol phenylbutyrate*	3	QL 600 / 30 DAYS PA S Specialty Drug
sod benz-sod phenylacet 10-10 % solution	1	
sodium phenylbutyrate 3 gm/tsp powder	1	PA S Specialty Drug
sodium phenylbutyrate 500 mg tab	1	PA S Specialty Drug
V1A/V2-ARGININE VASOPRESSIN (AVP) RECEPTOR ANTAGONISTS		
VAPRISOL 20-5 MG/100ML-% SOLUTION *conivaptan hcl in dextrose*	3	
VASOPRESSIN		
DDAVP RHINAL TUBE 0.01 % SOLUTION *desmopressin acetate refrigerated*	3	
desmopressin ace spray refrig 0.01 % solution	1	
desmopressin acetate 0.1 mg tab	1	
desmopressin acetate 0.2 mg tab	1	
desmopressin acetate 4 mcg/ml solution	1	
desmopressin acetate spray 0.01 % solution	1	
NOCTIVA 0.83 MCG/0.1ML EMULSION *desmopressin acetate*	3	QL 3 / 30 DAYS PA
NOCTIVA 1.66 MCG/0.1ML EMULSION *desmopressin acetate*	3	QL 3 / 30 DAYS PA
STIMATE 1.5 MG/ML SOLUTION *desmopressin acetate*	2	
VASOSTRICT 20 UNIT/ML SOLUTION *vasopressin*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
X-LINKED HYPOPHOSPHATEMIA (XLH) TREATMENT - AGENTS		
CRYSVITA 10 MG/ML SOLUTION *burosumab-twza*	3	S Specialty Drug
CRYSVITA 20 MG/ML SOLUTION *burosumab-twza*	3	S Specialty Drug
CRYSVITA 30 MG/ML SOLUTION *burosumab-twza*	3	S Specialty Drug
ESTROGENS		
ESTROGEN & PROGESTIN		
amabelz 0.5-0.1 mg tab	1	QL 30 / 30 DAYS GL Female
amabelz 1-0.5 mg tab	1	QL 30 / 30 DAYS GL Female
ANGELIQ 0.25-0.5 MG TAB *drospirenone-estradiol*	3	QL 30 / 30 DAYS GL Female
ANGELIQ 0.5-1 MG TAB *drospirenone-estradiol*	3	QL 30 / 30 DAYS GL Female
BIJUVA 1-100 MG CAP *estradiol-progesterone*	3	QL 30 / 30 DAYS GL Female
CLIMARA PRO 0.045-0.015 MG/DAY PATCH WK *estradiol-levonorgestrel*	2	QL 4 / 28 DAYS GL Female
COMBIPATCH 0.05-0.14 MG/DAY PATCH TW *estradiol & norethindrone acetate*	3	QL 8 / 28 DAYS GL Female
COMBIPATCH 0.05-0.25 MG/DAY PATCH TW *estradiol & norethindrone acetate*	3	QL 8 / 28 DAYS GL Female
estradiol-norethindrone acet 0.5-0.1 mg tab	1	QL 30 / 30 DAYS GL Female
estradiol-norethindrone acet 1-0.5 mg tab	1	QL 30 / 30 DAYS GL Female
fyavolv 0.5-2.5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fyavolv 1-5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
jevantique lo 0.5-2.5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
jinteli 1-5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
lopreeza 0.5-0.1 mg tab	1	QL 30 / 30 DAYS GL Female
lopreeza 1-0.5 mg tab	1	QL 30 / 30 DAYS GL Female
mimvey 1-0.5 mg tab	1	QL 30 / 30 DAYS GL Female
mimvey lo 0.5-0.1 mg tab	1	GL Female
norethindrone-eth estradiol 0.5-2.5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
norethindrone-eth estradiol 1-5 mg-mcg tab	1	QL 30 / 30 DAYS GL Female ACA Affordable Care Act
PREFEST 1/1-0.09 MG (15/15) TAB *estradiol-norgestimate*	3	QL 30 / 30 DAYS GL Female
PREMPHASE 0.625-5 MG TAB *conjugated estrogens-medroxyprogesterone acetate*	2	QL 30 / 30 DAYS GL Female
PREMPRO 0.3-1.5 MG TAB *conjugated estrogens-medroxyprogesterone acetate*	2	QL 30 / 30 DAYS GL Female
PREMPRO 0.45-1.5 MG TAB *conjugated estrogens-medroxyprogesterone acetate*	2	QL 30 / 30 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREMPRO 0.625-2.5 MG TAB *conjugated estrogens-medroxyprogesterone acetate*	2	QL 30 / 30 DAYS GL Female
PREMPRO 0.625-5 MG TAB *conjugated estrogens-medroxyprogesterone acetate*	2	QL 30 / 30 DAYS GL Female
ESTROGEN-PROGESTIN-GNRH ANTAGONIST		
ORIAHNN 300-1-0.5 & 300 MG CAP THPK *elagolix sodium-estradiol-norethindrone acetate*	2	
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB		
DUAVEE 0.45-20 MG TAB *conjugated estrogens-bazedoxifene*	2	
ALORA 0.025 MG/24HR PATCH TW *estradiol*	3	QL 8 / 28 DAYS GL Female
ALORA 0.05 MG/24HR PATCH TW *estradiol*	3	QL 8 / 28 DAYS GL Female
ALORA 0.075 MG/24HR PATCH TW *estradiol*	3	QL 8 / 28 DAYS GL Female
ALORA 0.1 MG/24HR PATCH TW *estradiol*	3	QL 8 / 28 DAYS GL Female
DELESTROGEN 10 MG/ML OIL *estradiol valerate*	3	GL Female
DEPO-ESTRADIOL 5 MG/ML OIL *estradiol cypionate*	3	GL Female
DIVIGEL 0.25 MG/0.25GM GEL *estradiol*	2	QL 30 / 30 DAYS GL Female
DIVIGEL 0.5 MG/0.5GM GEL *estradiol*	2	QL 30 / 30 DAYS GL Female
DIVIGEL 0.75 MG/0.75GM GEL *estradiol*	2	QL 30 / 30 DAYS GL Female
DIVIGEL 1 MG/GM GEL *estradiol*	2	QL 30 / 30 DAYS GL Female
DIVIGEL 1.25 MG/1.25GM GEL *estradiol*	2	QL 37.5 / 30 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dotti 0.025 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
dotti 0.0375 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
dotti 0.05 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
dotti 0.075 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
dotti 0.1 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
ELESTRIN 0.52 MG/0.87 GM (0.06%) GEL *estradiol*	3	QL 1 / 30 DAYS GL Female
estradiol 0.025 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
estradiol 0.025 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female
estradiol 0.0375 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
estradiol 0.0375 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female
estradiol 0.05 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
estradiol 0.05 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female
estradiol 0.06 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female
estradiol 0.075 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
estradiol 0.075 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol 0.1 mg/24hr patch tw	1	QL 8 / 28 DAYS GL Female
estradiol 0.1 mg/24hr patch wk	1	QL 4 / 28 DAYS GL Female
estradiol 0.5 mg tab	1	QL 30 / 30 DAYS GL Female
estradiol 1 mg tab	1	QL 30 / 30 DAYS GL Female
estradiol 2 mg tab	1	QL 30 / 30 DAYS GL Female
estradiol valerate 20 mg/ml oil	1	GL Female
estradiol valerate 40 mg/ml oil	1	GL Female
ESTROGEL 0.75 MG/1.25 GM (0.06%) GEL *estradiol*	2	QL 1 / 30 DAYS GL Female
EVAMIST 1.53 MG/SPRAY SOLUTION *estradiol*	3	QL 5 / 93 DAYS GL Female
MENEST 0.3 MG TAB *esterified estrogens*	3	QL 30 / 30 DAYS GL Female
MENEST 0.625 MG TAB *esterified estrogens*	3	QL 30 / 30 DAYS GL Female
MENEST 1.25 MG TAB *esterified estrogens*	3	QL 30 / 30 DAYS GL Female
MENOSTAR 14 MCG/24HR PATCH WK *estradiol*	3	QL 4 / 28 DAYS GL Female
PREMARIN 0.3 MG TAB *estrogens, conjugated*	2	QL 30 / 30 DAYS GL Female
PREMARIN 0.45 MG TAB *estrogens, conjugated*	2	QL 30 / 30 DAYS GL Female
PREMARIN 0.625 MG TAB *estrogens, conjugated*	2	QL 30 / 30 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREMARIN 0.9 MG TAB *estrogens, conjugated*	2	QL 30 / 30 DAYS GL Female
PREMARIN 1.25 MG TAB *estrogens, conjugated*	2	QL 30 / 30 DAYS GL Female
PREMARIN 25 MG RECON SOLN *estrogens, conjugated*	3	
FLUOROQUINOLONES		
AVELOX 400 MG/250ML SOLUTION *moxifloxacin hcl in sodium chloride*	3	
BAXDELA 300 MG RECON SOLN *delafloxacin meglumine*	3	QL 14 / Rx
BAXDELA 450 MG TAB *delafloxacin meglumine*	3	QL 14 / Rx
CIPRO 250 MG/5ML (5%) RECON SUSP *ciprofloxacin*	3	QL 210 / 30 DAYS
CIPRO 500 MG/5ML (10%) RECON SUSP *ciprofloxacin*	3	QL 300 / 30 DAYS
CIPRO IN D5W 400 MG/200ML SOLUTION *ciprofloxacin in d5w*	3	
ciprofloxacin 500 mg/5ml (10%) recon susp	1	QL 300 / 30 DAYS
CIPROFLOXACIN HCL 100 MG TAB *ciprofloxacin hcl*	3	QL 60 / 30 DAYS
ciprofloxacin hcl 250 mg tab	1	QL 60 / 30 DAYS
ciprofloxacin hcl 500 mg tab	1	QL 60 / 30 DAYS
ciprofloxacin hcl 750 mg tab	1	QL 60 / 30 DAYS
ciprofloxacin in d5w 200 mg/100ml solution	1	
ciprofloxacin in d5w 400 mg/200ml solution	1	
CIPROFLOXACIN-CIPROFLOX HCL ER 1000 MG TAB ER 24H *ciprofloxacin-ciprofloxacin hcl*	3	QL 14 / Rx
CIPROFLOXACIN-CIPROFLOX HCL ER 500 MG TAB ER 24H *ciprofloxacin-ciprofloxacin hcl*	3	QL 28 / Rx
levofloxacin 25 mg/ml solution	1	
levofloxacin 25 mg/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levofloxacin 250 mg tab	1	QL 30 / Rx
levofloxacin 500 mg tab	1	QL 30 / Rx
levofloxacin 750 mg tab	1	QL 30 / Rx
levofloxacin in d5w 250 mg/50ml solution	1	
levofloxacin in d5w 500 mg/100ml solution	1	
levofloxacin in d5w 750 mg/150ml solution	1	
moxifloxacin hcl 400 mg tab	1	QL 21 / Rx
MOXIFLOXACIN HCL 400 MG/250ML SOLUTION *moxifloxacin hcl*	1	
MOXIFLOXACIN HCL IN NACL 400 MG/250ML SOLUTION *moxifloxacin hcl in sodium chloride*	1	
OFLOXACIN 300 MG TAB *ofloxacin*	2	QL 56 / Rx
ofloxacin 400 mg tab	1	QL 56 / Rx
GASTROINTESTINAL AGENTS - MISC.		
BILE ACID SYNTHESIS DISORDER AGENTS		
CHOLBAM 250 MG CAP *cholic acid*	3	QL 210 / 30 DAYS S Specialty Drug
CHOLBAM 50 MG CAP *cholic acid*	3	QL 120 / 30 DAYS S Specialty Drug
CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
TRULANCE 3 MG TAB *plecanatide*	2	
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10 MG TAB *obeticholic acid*	3	QL 30 / 30 DAYS PA S Specialty Drug
OCALIVA 5 MG TAB *obeticholic acid*	3	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GALLSTONE SOLUBILIZING AGENTS		
CHENODAL 250 MG TAB *chenodiol*	2	S Specialty Drug
ursodiol 250 mg tab	1	
ursodiol 300 mg cap	1	
ursodiol 500 mg tab	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
cromolyn sodium 100 mg/5ml conc	1	
GASTROINTESTINAL STIMULANTS		
metoclopramide hcl 10 mg tab	1	
METOCLOPRAMIDE HCL 10 MG TAB DISP *metoclopramide hcl*	3	
metoclopramide hcl 10 mg/10ml solution	1	
metoclopramide hcl 5 mg tab	1	
METOCLOPRAMIDE HCL 5 MG TAB DISP *metoclopramide hcl*	3	
metoclopramide hcl 5 mg/5ml solution	1	
metoclopramide hcl 5 mg/ml solution	1	
GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOGS		
GATTEX 5 MG KIT *teduglutide (rdna)*	3	PA S Specialty Drug
IBS AGENT - MU-OPIOID RECEPTOR AGONISTS		
VIBERZI 100 MG TAB *eluxadoline*	2	QL 60 / 30 DAYS
VIBERZI 75 MG TAB *eluxadoline*	2	QL 60 / 30 DAYS
IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS		
alosetron hcl 0.5 mg tab	1	GL Female AL1 At least 18 yrs old
alosetron hcl 1 mg tab	1	GL Female AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INFLAMMATORY BOWEL AGENTS		
balsalazide disodium 750 mg cap	1	
mesalamine 1.2 gm tab dr	1	
mesalamine 1000 mg suppos	1	
mesalamine 4 gm enema	1	
mesalamine 400 mg cap dr	1	
mesalamine 800 mg tab dr	1	
mesalamine er 0.375 gm cap er 24h	1	
SFROWASA 4 GM/60ML ENEMA *mesalamine*	3	
sulfasalazine 500 mg tab	1	
sulfasalazine 500 mg tab dr	1	
INTEGRIN RECEPTOR ANTAGONISTS		
ENTYVIO 300 MG RECON SOLN *vedolizumab*	3	QL 1 / 56 DAYS S Specialty Drug
INTERLEUKIN ANTAGONISTS		
STELARA 130 MG/26ML SOLUTION *ustekinumab (iv)*	3	QL 4 / 180 DAYS S Specialty Drug
INTESTINAL ACIDIFIERS		
enulose 10 gm/15ml solution	1	
generlac 10 gm/15ml solution	1	
lactulose encephalopathy 10 gm/15ml solution	1	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
SYMPROIC 0.2 MG TAB *naldemedine tosylate*	2	QL 30 / 30 DAYS AL1 At least 18 yrs old
PHOSPHATE BINDER AGENTS		
AURYXIA 1 GM 210 MG(FE) TAB *ferric citrate*	3	
calcium acetate (phos binder) 667 mg cap	1	
calcium acetate (phos binder) 667 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
calcium acetate 667 mg tab	1	
FOSRENOL 1000 MG PACKET *lanthanum carbonate*	3	
FOSRENOL 750 MG PACKET *lanthanum carbonate*	3	
lanthanum carbonate 1000 mg chew tab	1	
lanthanum carbonate 500 mg chew tab	1	
lanthanum carbonate 750 mg chew tab	1	
PHOSLYRA 667 MG/5ML SOLUTION *calcium acetate (phosphate binder)*	3	
sevelamer carbonate 0.8 gm packet	1	
sevelamer carbonate 2.4 gm packet	1	
sevelamer carbonate 800 mg tab	1	
SEVELAMER HCL 400 MG TAB *sevelamer hcl*	3	
sevelamer hcl 800 mg tab	1	
VELPHORO 500 MG CHEW TAB *sucroferric oxyhydroxide*	2	
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250 MG TAB *telotristat etiprate*	3	QL 90 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
TUMOR NECROSIS FACTOR ALPHA BLOCKERS		
AVSOLA 100 MG RECON SOLN *infliximab-axxq*	3	S Specialty Drug
CIMZIA 2 X 200 MG KIT *certolizumab pegol*	3	QL 1 / 28 DAYS S Specialty Drug
CIMZIA PREFILLED 2 X 200 MG/ML KIT *certolizumab pegol*	3	QL 2 / 28 DAYS PA S Specialty Drug
CIMZIA STARTER KIT 6 X 200 MG/ML KIT *certolizumab pegol*	3	QL 3 / 180 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INFLECTRA 100 MG RECON SOLN *infliximab-dyyb*	3	QL 15 / 30 DAYS S Specialty Drug
REMICADE 100 MG RECON SOLN *infliximab*	3	QL 10 / 30 DAYS S Specialty Drug
RENFLEXIS 100 MG RECON SOLN *infliximab-abda*	3	QL 10 / 30 DAYS S Specialty Drug
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
AMIDATE 2 MG/ML SOLUTION *etomidate*	3	
ANESTHESIA S/I-40 200 MG/20ML KIT *propofol*	3	
ANESTHESIA S/I-40A 200 MG/20ML KIT *propofol*	3	
ANESTHESIA S/I-40H 200 MG/20ML KIT *propofol*	3	
ANESTHESIA S/I-40S 200 MG/20ML KIT *propofol*	3	
ANESTHESIA S/I-60 200 MG/20ML KIT *propofol*	3	
DIPRIVAN 100 MG/10ML EMULSION *propofol*	3	
DIPRIVAN 1000 MG/100ML EMULSION *propofol*	3	
DIPRIVAN 200 MG/20ML EMULSION *propofol*	3	
DIPRIVAN 500 MG/50ML EMULSION *propofol*	3	
etomidate 2 mg/ml solution	1	
KETALAR 10 MG/ML SOLUTION *ketamine hcl*	3	
KETALAR 100 MG/ML SOLUTION *ketamine hcl*	3	
KETALAR 50 MG/ML SOLUTION *ketamine hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ketamine hcl 10 mg/ml solution	1	
ketamine hcl 100 mg/ml solution	1	
ketamine hcl 50 mg/ml solution	1	
propofol 1000 mg/100ml emulsion	1	
propofol 200 mg/20ml emulsion	1	
propofol 500 mg/50ml emulsion	1	
BARBITURATE ANESTHETICS		
BREVITAL SODIUM 2.5 GM RECON SOLN *methohexital sodium*	3	
BREVITAL SODIUM 500 MG RECON SOLN *methohexital sodium*	3	
VOLATILE ANESTHETICS		
desflurane solution	1	
FORANE SOLUTION *isoflurane*	3	
isoflurane solution	1	
sevoflurane solution	1	
SUPRANE SOLUTION *desflurane*	3	
terrell solution	1	
ULTANE SOLUTION *sevoflurane*	3	
GENITOURINARY AGENTS - MISCELLANEOUS		
5-ALPHA REDUCTASE INHIBITORS		
dutasteride 0.5 mg cap	1	GL Male
finasteride 5 mg tab	1	GL Male
ALPHA 1-ADRENOCEPTOR ANTAGONISTS		
alfuzosin hcl er 10 mg tab er 24h	1	GL Male
CARDURA XL 4 MG TAB ER 24H *doxazosin mesylate (bph)*	3	QL 30 / 30 DAYS
CARDURA XL 8 MG TAB ER 24H *doxazosin mesylate (bph)*	3	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
silodosin 4 mg cap	1	GL Male
silodosin 8 mg cap	1	GL Male
tamsulosin hcl 0.4 mg cap	1	
ANTI-INFECTIVE GENITOURINARY IRRIGANTS		
NEOMYCIN-POLYMYXIN B GU 40-200000 SOLUTION *neomycin/polymyxin b gu*	1	
neomycin-polymyxin b gu 40-200000 solution	1	
CITRATES		
cytra-2 500-334 mg/5ml solution	1	
potassium citrate er 10 meq (1080 mg) tab er	1	
potassium citrate er 15 meq (1620 mg) tab er	1	
potassium citrate er 5 meq (540 mg) tab er	1	
sod citrate-citric acid 500-334 mg/5ml solution	1	
CYSTINOSIS AGENTS		
CYSTAGON 150 MG CAP *cysteamine bitartrate*	2	QL 390 / 30 DAYS S Specialty Drug
CYSTAGON 50 MG CAP *cysteamine bitartrate*	2	QL 1200 / 30 DAYS S Specialty Drug
PROCYSBI 25 MG CAP DR *cysteamine bitartrate*	3	QL 90 / 30 DAYS PA S Specialty Drug
PROCYSBI 300 MG PACKET *cysteamine bitartrate*	3	PA S Specialty Drug
PROCYSBI 75 MG CAP DR *cysteamine bitartrate*	3	QL 30 / 30 DAYS PA S Specialty Drug
PROCYSBI 75 MG PACKET *cysteamine bitartrate*	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENITOURINARY IRRIGANTS		
acetic acid 0.25 % solution	1	
aminoacetic acid 1.5 % solution	1	
glycine 1.5 % solution	1	
glycine urologic 1.5 % solution	1	
RENACIDIN SOLUTION *citric acid-gluconolactone-magnesium carbonate*	3	
RESECTISOL 5 % SOLUTION *mannitol (gu irrigant)*	3	
sodium chloride 0.9 % solution	1	
SORBITOL 3 % SOLUTION *sorbitol irrigation*	1	
SORBITOL 3.3 % SOLUTION *sorbitol irrigation*	1	
SORBITOL-MANNITOL 2.7-0.54 GM/100ML SOLUTION *sorbitol-mannitol*	1	
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100 MG CAP *pentosan polysulfate sodium*	3	QL 90 / 30 DAYS PA
RIMSO-50 50 % SOLUTION *dimethyl sulfoxide*	3	
PHOSPHATES		
K-PHOS NO 2 305-700 MG TAB *potassium & sodium acid phosphates*	2	
PROSTATIC HYPERTROPHY AGENT COMBINATIONS		
dutasteride-tamsulosin hcl 0.5-0.4 mg cap	1	GL Male
URINARY STONE AGENTS		
LITHOSTAT 250 MG TAB *acetohydroxamic acid*	3	
THIOLA 100 MG TAB *tiopronin*	3	S Specialty Drug
THIOLA EC 100 MG TAB DR *tiopronin*	3	S Specialty Drug
THIOLA EC 300 MG TAB DR *tiopronin*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
colchicine-probenecid 0.5-500 mg tab	1	QL 60 / 30 DAYS
DUZALLO 200-200 MG TAB *lesinurad-allopurinol*	3	QL 30 / 30 DAYS
DUZALLO 200-300 MG TAB *lesinurad-allopurinol*	3	QL 30 / 30 DAYS
allopurinol 100 mg tab	1	
allopurinol 300 mg tab	1	
allopurinol sodium 500 mg recon soln	1	
ALOPRIM 500 MG RECON SOLN *allopurinol sodium*	3	
KRYSTEXXA 8 MG/ML SOLUTION *pegloticase*	3	S Specialty Drug
MITIGARE 0.6 MG CAP *colchicine*	2	
ZURAMPIC 200 MG TAB *lesinurad*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old
URICOSURICS		
probenecid 500 mg tab	1	QL 120 / 30 DAYS
HEMATOLOGICAL AGENTS - MISC.		
AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA		
GIVLAARI 189 MG/ML SOLUTION *givosiran sodium*	3	S Specialty Drug
ANTI-VON WILLEBRAND FACTOR AGENTS		
CABLIVI 11 MG KIT *caplacizumab-yhdp*	3	QL 58 / 365 DAYS S Specialty Drug
ANTIHEMOPHILIC PRODUCTS		
ADVATE 1000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADVATE 1500 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVATE 2000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADVATE 250 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADVATE 3000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADVATE 4000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADVATE 500 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
ADYNOVATE 1000 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 1500 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 2000 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 250 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 3000 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 500 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
ADYNOVATE 750 UNIT RECON SOLN *antihemophilic factor (recombinant) pegylated*	2	PA S Specialty Drug
AFSTYLA 1000 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
AFSTYLA 1500 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
AFSTYLA 2000 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFSTYLA 250 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
AFSTYLA 2500 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
AFSTYLA 3000 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
AFSTYLA 500 UNIT KIT *antihemophilic factor (recombinant) single chain*	2	PA S Specialty Drug
ALPHANATE/VWF COMPLEX/HUMAN 1000 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
ALPHANATE/VWF COMPLEX/HUMAN 1500 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
ALPHANATE/VWF COMPLEX/HUMAN 2000 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
ALPHANATE/VWF COMPLEX/HUMAN 250 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
ALPHANATE/VWF COMPLEX/HUMAN 500 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
ALPHANINE SD 1000 UNIT RECON SOLN *coagulation factor ix*	2	PA S Specialty Drug
ALPHANINE SD 1500 UNIT RECON SOLN *coagulation factor ix*	2	PA S Specialty Drug
ALPHANINE SD 500 UNIT RECON SOLN *coagulation factor ix*	2	PA S Specialty Drug
ALPROLIX 1000 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug
ALPROLIX 2000 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug
ALPROLIX 250 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPROLIX 3000 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug
ALPROLIX 4000 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug
ALPROLIX 500 UNIT RECON SOLN *coagulation factor ix (recomb) fc fusion protein (rfixfc)*	2	PA S Specialty Drug
BEBULIN 200-1200 UNIT RECON SOLN *factor ix complex*	2	PA S Specialty Drug
BENEFIX 1000 UNIT KIT *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
BENEFIX 2000 UNIT KIT *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
BENEFIX 250 UNIT KIT *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
BENEFIX 3000 UNIT KIT *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
BENEFIX 500 UNIT KIT *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
COAGADEX 250 UNIT RECON SOLN *coagulation factor x (human)*	2	PA S Specialty Drug
COAGADEX 500 UNIT RECON SOLN *coagulation factor x (human)*	2	PA S Specialty Drug
CORIFACT 1000-1600 UNIT KIT *factor xiii concentrate (human)*	2	S Specialty Drug
ELOCTATE 1000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 1500 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 2000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELOCTATE 250 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 3000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 4000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 500 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 5000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 6000 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ELOCTATE 750 UNIT RECON SOLN *antihemophilic factor (rcmb) fc fusion protein(bdd-rfviiifc)*	2	PA S Specialty Drug
ESPEROCT 1000 UNIT RECON SOLN *antihemophilic factor (recombinant) glycopegylated-exei*	2	PA S Specialty Drug
ESPEROCT 1500 UNIT RECON SOLN *antihemophilic factor (recombinant) glycopegylated-exei*	2	PA S Specialty Drug
ESPEROCT 2000 UNIT RECON SOLN *antihemophilic factor (recombinant) glycopegylated-exei*	2	PA S Specialty Drug
ESPEROCT 3000 UNIT RECON SOLN *antihemophilic factor (recombinant) glycopegylated-exei*	2	PA S Specialty Drug
ESPEROCT 500 UNIT RECON SOLN *antihemophilic factor (recombinant) glycopegylated-exei*	2	PA S Specialty Drug
FEIBA 1000 UNIT RECON SOLN *antiinhibitor coagulant complex*	2	S Specialty Drug
FEIBA 2500 UNIT RECON SOLN *antiinhibitor coagulant complex*	2	S Specialty Drug
FEIBA 500 UNIT RECON SOLN *antiinhibitor coagulant complex*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIBRYGA RECON SOLN *fibrinogen concentrate (human)*	2	PA S Specialty Drug
HELIXATE FS 1000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
HELIXATE FS 2000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
HELIXATE FS 250 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
HELIXATE FS 3000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
HELIXATE FS 500 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
HEMOFIL M 1000 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
HEMOFIL M 1700 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
HEMOFIL M 250 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
HEMOFIL M 500 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
HUMATE-P 1000-2400 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
HUMATE-P 250-600 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
HUMATE-P 500-1200 UNIT RECON SOLN *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
IDELVION 1000 UNIT RECON SOLN *coagulation factor ix recomb albumin fusion protein (rix-fp)*	2	PA S Specialty Drug
IDELVION 2000 UNIT RECON SOLN *coagulation factor ix recomb albumin fusion protein (rix-fp)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IDELVION 250 UNIT RECON SOLN *coagulation factor ix recomb albumin fusion protein (rix-fp)*	2	PA S Specialty Drug
IDELVION 3500 UNIT RECON SOLN *coagulation factor ix recomb albumin fusion protein (rix-fp)*	2	PA S Specialty Drug
IDELVION 500 UNIT RECON SOLN *coagulation factor ix recomb albumin fusion protein (rix-fp)*	2	PA S Specialty Drug
IXINITY 1000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
IXINITY 1500 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
IXINITY 2000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
IXINITY 250 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
IXINITY 3000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
IXINITY 500 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
JIVI 1000 UNIT RECON SOLN *antihemophil fact(rcmb) pegylated-aucl (bdd-rfviii peg-aucl)*	2	PA S Specialty Drug
JIVI 2000 UNIT RECON SOLN *antihemophil fact(rcmb) pegylated-aucl (bdd-rfviii peg-aucl)*	2	PA S Specialty Drug
JIVI 3000 UNIT RECON SOLN *antihemophil fact(rcmb) pegylated-aucl (bdd-rfviii peg-aucl)*	2	PA S Specialty Drug
JIVI 500 UNIT RECON SOLN *antihemophil fact(rcmb) pegylated-aucl (bdd-rfviii peg-aucl)*	2	PA S Specialty Drug
KCENTRA 1000 UNIT KIT *prothrombin complex concentrate human*	3	S Specialty Drug
KCENTRA 500 UNIT KIT *prothrombin complex concentrate human*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOATE 1000 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOATE 250 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOATE 500 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOATE-DVI 1000 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOATE-DVI 250 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOATE-DVI 500 UNIT RECON SOLN *antihemophilic factor (human)*	2	PA S Specialty Drug
KOGENATE FS 1000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS 2000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS 250 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS 3000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS 500 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS BIO-SET 1000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS BIO-SET 2000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOGENATE FS BIO-SET 3000 UNIT KIT *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
KOVALTRY 1000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOVALTRY 2000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
KOVALTRY 250 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
KOVALTRY 3000 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
KOVALTRY 500 UNIT RECON SOLN *antihemophilic factor (rcmb) plasma/albumin free (rahf-pfm)*	2	PA S Specialty Drug
MONOCLATE-P 1000 UNIT KIT *antihemophilic factor (human)*	2	PA S Specialty Drug
MONOCLATE-P 1500 UNIT KIT *antihemophilic factor (human)*	2	PA S Specialty Drug
MONONINE 1000 UNIT RECON SOLN *coagulation factor ix*	2	PA S Specialty Drug
NOVOEIGHT 1000 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOEIGHT 1500 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOEIGHT 2000 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOEIGHT 250 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOEIGHT 3000 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOEIGHT 500 UNIT RECON SOLN *antihemophilic factor (rcmb) bd truncated (bd trunc-rfviii)*	2	PA S Specialty Drug
NOVOSEVEN RT 1 MG RECON SOLN *coagulation factor viia (recombinant)*	2	S Specialty Drug
NOVOSEVEN RT 2 MG RECON SOLN *coagulation factor viia (recombinant)*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOSEVEN RT 5 MG RECON SOLN *coagulation factor viia (recombinant)*	2	S Specialty Drug
NOVOSEVEN RT 8 MG RECON SOLN *coagulation factor viia (recombinant)*	2	S Specialty Drug
NUWIQ 1000 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 1000 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 2000 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 2000 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 250 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 250 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 2500 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 2500 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 3000 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 3000 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 4000 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 4000 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
NUWIQ 500 UNIT KIT *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUWIQ 500 UNIT RECON SOLN *antihemophilic factor (rcmb) simoctocog alfa(bdd-rfviii,sim)*	2	PA S Specialty Drug
OBIZUR 500 UNIT RECON SOLN *antihemophilic factor (recombinant porcine) (rpfviii)*	2	S Specialty Drug
PROFILNINE 1000 UNIT RECON SOLN *factor ix complex*	2	PA S Specialty Drug
PROFILNINE 1500 UNIT RECON SOLN *factor ix complex*	2	PA S Specialty Drug
PROFILNINE 500 UNIT RECON SOLN *factor ix complex*	2	PA S Specialty Drug
PROFILNINE SD 500 UNIT RECON SOLN *factor ix complex*	2	PA S Specialty Drug
REBINYN 1000 UNIT RECON SOLN *coagulation factor ix (recombinant) glycopegylated*	2	PA S Specialty Drug
REBINYN 2000 UNIT RECON SOLN *coagulation factor ix (recombinant) glycopegylated*	2	PA S Specialty Drug
REBINYN 500 UNIT RECON SOLN *coagulation factor ix (recombinant) glycopegylated*	2	PA S Specialty Drug
RECOMBINATE 1241-1800 UNIT RECON SOLN *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
RECOMBINATE 1801-2400 UNIT RECON SOLN *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
RECOMBINATE 220-400 UNIT RECON SOLN *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
RECOMBINATE 401-800 UNIT RECON SOLN *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
RECOMBINATE 801-1240 UNIT RECON SOLN *antihemophilic factor (recombinant)*	2	PA S Specialty Drug
RIASTAP RECON SOLN *fibrinogen concentrate (human)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIXUBIS 1000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
RIXUBIS 2000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
RIXUBIS 250 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
RIXUBIS 3000 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
RIXUBIS 500 UNIT RECON SOLN *coagulation factor ix (recombinant)*	2	PA S Specialty Drug
TRETTEN 2000-3125 UNIT RECON SOLN *coagulation factor xiii a-subunit (recombinant)*	2	S Specialty Drug
VONVENDI 1300 UNIT RECON SOLN *von willebrand factor (recombinant)*	2	S Specialty Drug
VONVENDI 650 UNIT RECON SOLN *von willebrand factor (recombinant)*	2	S Specialty Drug
WILATE 1000-1000 UNIT KIT *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
WILATE 500-500 UNIT KIT *antihemophilic factor/von willebrand factor complex (human)*	2	S Specialty Drug
XYNTHA 1000 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA 2000 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA 250 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA 500 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA SOLOFUSE 1000 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA SOLOFUSE 2000 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYNTHA SOLOFUSE 250 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA SOLOFUSE 3000 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
XYNTHA SOLOFUSE 500 UNIT KIT *antihemophilic factor (rcmb) moroctocog alfa(bdd-rfviii,mor)*	2	PA S Specialty Drug
ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES		
HEMLIBRA 105 MG/0.7ML SOLUTION *emicizumab-kxwh*	2	QL 4 / 28 DAYS PA S Specialty Drug
HEMLIBRA 150 MG/ML SOLUTION *emicizumab-kxwh*	2	QL 4 / 28 DAYS PA S Specialty Drug
HEMLIBRA 30 MG/ML SOLUTION *emicizumab-kxwh*	2	QL 4 / 28 DAYS PA S Specialty Drug
HEMLIBRA 60 MG/0.4ML SOLUTION *emicizumab-kxwh*	2	QL 4 / 28 DAYS PA S Specialty Drug
BRADYKININ B2 RECEPTOR ANTAGONISTS		
icatibant acetate 30 mg/3ml solution	1	QL 18 / 30 DAYS PA S Specialty Drug
C1 INHIBITORS		
BERINERT 500 UNIT KIT c1 esterase inhibitor (human)	3	QL 10 / 30 DAYS PA S Specialty Drug
CINRYZE 500 UNIT RECON SOLN c1 esterase inhibitor (human)	3	QL 20 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAEGARDA 2000 UNIT RECON SOLN c1 esterase inhibitor (human)	2	QL 24 / 30 DAYS PA S Specialty Drug
HAEGARDA 3000 UNIT RECON SOLN c1 esterase inhibitor (human)	2	QL 16 / 30 DAYS PA S Specialty Drug
RUCONEST 2100 UNIT RECON SOLN c1 esterase inhibitor (recombinant)	3	QL 8 / 30 DAYS PA S Specialty Drug
COMPLEMENT INHIBITORS		
SOLIRIS 300 MG/30ML SOLUTION *eculizumab*	3	S Specialty Drug
ULTOMIRIS 300 MG/30ML SOLUTION *ravulizumab-cwvz*	3	S Specialty Drug
DIRECT-ACTING P2Y12 INHIBITORS		
BRILINTA 60 MG TAB *ticagrelor*	2	
BRILINTA 90 MG TAB *ticagrelor*	2	
KENGREAL 50 MG RECON SOLN *cangrelor tetrasodium*	3	
GLYCOPROTEIN IIB/IIIA RECEPTOR INHIBITORS		
AGGRASTAT 12.5-0.9 MG/250ML-% SOLUTION *tirofiban hcl in sodium chloride*	3	
AGGRASTAT 3.75 MG/15ML CONC *tirofiban hcl*	3	
AGGRASTAT 5-0.9 MG/100ML-% SOLUTION *tirofiban hcl in sodium chloride*	3	
eptifibatide 20 mg/10ml solution	1	
eptifibatide 200 mg/100ml solution	1	
eptifibatide 75 mg/100ml solution	1	
INTEGRILIN 20 MG/10ML SOLUTION *eptifibatide*	3	
INTEGRILIN 200 MG/100ML SOLUTION *eptifibatide*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTEGRILIN 75 MG/100ML SOLUTION *eptifibatide*	3	
REOPRO 2 MG/ML SOLUTION *abciximab*	3	
HEMATORHEOLOGIC AGENTS		
pentoxifylline er 400 mg tab er	1	
HEMIN		
PANHEMATIN 350 MG RECON SOLN *hemin*	3	
HUMAN PROTEIN C		
CEPROTIN 1000 UNIT RECON SOLN *protein c concentrate (human)*	3	S Specialty Drug
CEPROTIN 500 UNIT RECON SOLN *protein c concentrate (human)*	3	S Specialty Drug
PHOSPHODIESTERASE III INHIBITORS		
cilostazol 100 mg tab	1	
cilostazol 50 mg tab	1	
PLASMA EXPANDERS		
HESPAN 6-0.9 % SOLUTION *hetastarch in sodium chloride*	3	
hetastarch-nacl 6-0.9 % solution	1	
HEXTEND 6 % SOLUTION *hetastarch in lactated electrolyte*	3	QL 90 / 30 DAYS
LMD IN D5W 10-5 % SOLUTION *dextran 40 in d5w*	3	
LMD IN NACL 10-0.9 % SOLUTION *dextran 40 in saline*	3	
VOLUVEN 6-0.9 % SOLUTION *hydroxyethyl starch in sodium chloride*	3	
PLASMA KALLIKREIN INHIBITORS		
KALBITOR 10 MG/ML SOLUTION *ecallantide*	3	QL 4 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLASMA PROTEINS		
albuked 25 25 % solution	1	
albuked 5 5 % solution	1	
albumin human 25 % solution	1	
albumin human 5 % solution	1	
albumin-zlb 5 % solution	1	
albuminar-25 25 % solution	1	
albuminar-5 5 % solution	1	
ALBUMINEX 25 % SOLUTION *albumin, human-kjda*	3	
ALBUMINEX 5 % SOLUTION *albumin, human-kjda*	3	
alburx 5 % solution	1	
albutein 25 % solution	1	
albutein 5 % solution	1	
buminate 25 % solution	1	
buminate 5 % solution	1	
flexbumin 25 % solution	1	
flexbumin 5 % solution	1	
human albumin grifols 25 % solution	1	
kedbumin 25 % solution	1	
OCTAPLAS BLOOD GROUP A SOLUTION *plasma, human*	3	
OCTAPLAS BLOOD GROUP AB SOLUTION *plasma, human*	3	
OCTAPLAS BLOOD GROUP B SOLUTION *plasma, human*	3	
OCTAPLAS BLOOD GROUP O SOLUTION *plasma, human*	3	
plasbumin-25 25 % solution	1	
plasbumin-5 5 % solution	1	
PLASMANATE 5 % SOLUTION *plasma protein fraction*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THROMBATE III 1000 UNIT RECON SOLN *antithrombin iii (human)*	3	S Specialty Drug
THROMBATE III 500 UNIT RECON SOLN *antithrombin iii (human)*	3	S Specialty Drug
PLATELET AGGREGATION INHIBITOR COMBINATIONS		
aspirin-dipyridamole er 25-200 mg cap er 12h	1	
ASPIRIN-OMEPRAZOLE 325-40 MG TAB DR *aspirin-omeprazole*	3	
ASPIRIN-OMEPRAZOLE 81-40 MG TAB DR *aspirin-omeprazole*	3	
YOSPRALA 325-40 MG TAB DR *aspirin-omeprazole*	3	
YOSPRALA 81-40 MG TAB DR *aspirin-omeprazole*	3	
PLATELET AGGREGATION INHIBITORS		
dipyridamole 25 mg tab	1	
dipyridamole 50 mg tab	1	
dipyridamole 75 mg tab	1	
DURLAZA 162.5 MG CAP ER 24H *aspirin (platelet aggregation inhibitor)*	3	
PROTAMINE		
PROTAMINE SULFATE 10 MG/ML SOLUTION *protamine sulfate*	1	
PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS		
ZONTIVITY 2.08 MG TAB *vorapaxar sulfate*	3	
QUINAZOLINE AGENTS		
anagrelide hcl 0.5 mg cap	1	QL 120 / 30 DAYS
anagrelide hcl 1 mg cap	1	QL 120 / 30 DAYS
SPLEEN TYROSINE KINASE (SYK) INHIBITORS		
TAVALISSE 100 MG TAB *fostamatinib disodium*	3	QL 60 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAVALISSE 150 MG TAB *fostamatinib disodium*	3	QL 60 / 30 DAYS PA S Specialty Drug
THIENOPYRIDINE DERIVATIVES		
clopidogrel bisulfate 300 mg tab	1	
clopidogrel bisulfate 75 mg tab	1	
prasugrel hcl 10 mg tab	1	
prasugrel hcl 5 mg tab	1	
THROMBOLYTIC AGENT - MISC		
DEFITELIO 200 MG/2.5ML SOLUTION *defibrotide sodium*	3	
TISSUE PLASMINOGEN ACTIVATORS		
ACTIVASE 100 MG RECON SOLN *alteplase*	3	S Specialty Drug
ACTIVASE 50 MG RECON SOLN *alteplase*	3	S Specialty Drug
CATHFLO ACTIVASE 2 MG RECON SOLN *alteplase*	3	S Specialty Drug
RETAVASE 2 X 10 UNIT KIT *reteplase*	3	S Specialty Drug
RETAVASE HALF-KIT 1 X 10 UNIT KIT *reteplase*	3	S Specialty Drug
TNKASE 50 MG KIT *tenecteplase*	3	S Specialty Drug
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84 MG CAP *eliglustat tartrate*	2	QL 60 / 30 DAYS PA S Specialty Drug
CEREZYME 400 UNIT RECON SOLN *imiglucerase*	3	S Specialty Drug
ELELYSO 200 UNIT RECON SOLN *taliglucerase alfa*	3	S Specialty Drug
miglustat 100 mg cap	1	QL 90 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VPRIV 400 UNIT RECON SOLN *velaglucerase alfa*	3	S Specialty Drug
AMINO ACIDS		
ENDARI 5 GM PACKET *glutamine (sickle cell)*	3	QL 180 / 30 DAYS PA S Specialty Drug
COBALAMINS		
B-12 COMPLIANCE INJECTION 1000 MCG/ML KIT *cyanocobalamin*	3	
cyanocobalamin 1000 mcg/ml solution	1	
HYDROXOCOBALAMIN ACETATE 1000 MCG/ML SOLUTION *hydroxocobalamin acetate*	3	
NASCOBAL 500 MCG/0.1ML SOLUTION *cyanocobalamin*	3	
VITAMIN DEFICIENCY SYSTEM-B12 1000 MCG/ML KIT *cyanocobalamin*	3	
CXCR4 RECEPTOR ANTAGONIST		
MOZOBIL 24 MG/1.2ML SOLUTION *plerixafor*	3	S Specialty Drug
CYTOTOXIC AGENTS		
DROXIA 200 MG CAP *hydroxyurea (sickle cell anemia)*	3	S Specialty Drug
DROXIA 300 MG CAP *hydroxyurea (sickle cell anemia)*	3	S Specialty Drug
DROXIA 400 MG CAP *hydroxyurea (sickle cell anemia)*	3	S Specialty Drug
SIKLOS 100 MG TAB *hydroxyurea (sickle cell anemia)*	3	S Specialty Drug
SIKLOS 1000 MG TAB *hydroxyurea (sickle cell anemia)*	3	S Specialty Drug
ERYTHROID MATURATION AGENTS		
REBLOZYL 25 MG RECON SOLN *luspatercept-aamt*	3	S Specialty Drug
REBLOZYL 75 MG RECON SOLN *luspatercept-aamt*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)		
ARANESP (ALBUMIN FREE) 10 MCG/0.4ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 100 MCG/0.5ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 100 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 150 MCG/0.3ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 200 MCG/0.4ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 200 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 25 MCG/0.42ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 25 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 300 MCG/0.6ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 300 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 40 MCG/0.4ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 40 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 500 MCG/ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug
ARANESP (ALBUMIN FREE) 60 MCG/0.3ML SOLN PRSYR *darbepoetin alfa*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARANESP (ALBUMIN FREE) 60 MCG/ML SOLUTION *darbepoetin alfa*	2	PA S Specialty Drug
EPOGEN 10000 UNIT/ML SOLUTION *epoetin alfa*	3	PA S Specialty Drug
EPOGEN 2000 UNIT/ML SOLUTION *epoetin alfa*	3	PA S Specialty Drug
EPOGEN 20000 UNIT/ML SOLUTION *epoetin alfa*	3	PA S Specialty Drug
EPOGEN 3000 UNIT/ML SOLUTION *epoetin alfa*	3	PA S Specialty Drug
EPOGEN 4000 UNIT/ML SOLUTION *epoetin alfa*	3	PA S Specialty Drug
MIRCERA 100 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
MIRCERA 150 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
MIRCERA 200 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
MIRCERA 30 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
MIRCERA 50 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
MIRCERA 75 MCG/0.3ML SOLN PRSYR *methoxy polyethylene glycol-epoetin beta*	3	PA
PROCRIT 10000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug
PROCRIT 2000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug
PROCRIT 20000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug
PROCRIT 3000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROCRIT 4000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug
PROCRIT 40000 UNIT/ML SOLUTION *epoetin alfa*	2	PA S Specialty Drug
RETACRIT 10000 UNIT/ML SOLUTION *epoetin alfa-epbx*	2	PA S Specialty Drug
RETACRIT 2000 UNIT/ML SOLUTION *epoetin alfa-epbx*	2	PA S Specialty Drug
RETACRIT 3000 UNIT/ML SOLUTION *epoetin alfa-epbx*	2	PA S Specialty Drug
RETACRIT 4000 UNIT/ML SOLUTION *epoetin alfa-epbx*	2	PA S Specialty Drug
RETACRIT 40000 UNIT/ML SOLUTION *epoetin alfa-epbx*	2	PA S Specialty Drug
FOLIC ACID/FOLATES		
cvs folic acid 800 mcg tab	1	ACA Affordable Care Act
fa-8 0.8 mg cap	1	ACA Affordable Care Act
fa-8 800 mcg tab	1	ACA Affordable Care Act
folate 400 mcg tab	1	ACA Affordable Care Act
folic acid 0.8 mg cap	1	ACA Affordable Care Act
folic acid 1 mg tab	1	
folic acid 400 mcg tab	1	ACA Affordable Care Act
folic acid 5 mg/ml solution	1	
folic acid 800 mcg tab	1	ACA Affordable Care Act
gnp folic acid 400 mcg tab	1	ACA Affordable Care Act
hm folic acid 400 mcg tab	1	ACA Affordable Care Act
kp folic acid 800 mcg tab	1	ACA Affordable Care Act
px folic acid 400 mcg tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
qc folic acid 800 mcg tab	1	ACA Affordable Care Act
ra folic acid 400 mcg tab	1	ACA Affordable Care Act
ra folic acid 800 mcg tab	1	ACA Affordable Care Act
sm folic acid 400 mcg tab	1	ACA Affordable Care Act
yl folic acid 400 mcg tab	1	ACA Affordable Care Act
GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)		
FULPHILA 6 MG/0.6ML SOLN PRSYR *pegfilgrastim-jmdb*	2	S Specialty Drug
GRANIX 300 MCG/0.5ML SOLN PRSYR *tbo-filgrastim*	2	S Specialty Drug
GRANIX 300 MCG/ML SOLUTION *tbo-filgrastim*	2	S Specialty Drug
GRANIX 480 MCG/0.8ML SOLN PRSYR *tbo-filgrastim*	2	S Specialty Drug
GRANIX 480 MCG/1.6ML SOLUTION *tbo-filgrastim*	2	S Specialty Drug
NEULASTA 6 MG/0.6ML SOLN PRSYR *pegfilgrastim*	2	S Specialty Drug
NEULASTA ONPRO 6 MG/0.6ML PREF SY KT *pegfilgrastim*	2	S Specialty Drug
NEUPOGEN 300 MCG/0.5ML SOLN PRSYR *filgrastim*	2	S Specialty Drug
NEUPOGEN 300 MCG/ML SOLUTION *filgrastim*	2	S Specialty Drug
NEUPOGEN 480 MCG/0.8ML SOLN PRSYR *filgrastim*	2	S Specialty Drug
NEUPOGEN 480 MCG/1.6ML SOLUTION *filgrastim*	2	S Specialty Drug
NIVESTYM 300 MCG/0.5ML SOLN PRSYR *filgrastim-aafi*	2	S Specialty Drug
NIVESTYM 300 MCG/ML SOLUTION *filgrastim-aafi*	2	S Specialty Drug
NIVESTYM 480 MCG/0.8ML SOLN PRSYR *filgrastim-aafi*	2	S Specialty Drug
NIVESTYM 480 MCG/1.6ML SOLUTION *filgrastim-aafi*	2	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UDENYCA 6 MG/0.6ML SOLN PRSYR *pegfilgrastim-cbqv*	2	S Specialty Drug
ZARXIO 300 MCG/0.5ML SOLN PRSYR *filgrastim-sndz*	2	S Specialty Drug
ZARXIO 480 MCG/0.8ML SOLN PRSYR *filgrastim-sndz*	2	S Specialty Drug
ZIEXTENZO 6 MG/0.6ML SOLN PRSYR *pegfilgrastim-bmez*	2	S Specialty Drug
GRANULOCYTE/MACROPHAGE COLONY-STIMULATING FACTOR(GM-CSF)		
LEUKINE 250 MCG RECON SOLN *sargramostim*	3	S Specialty Drug
HEMOGLOBIN S (HBS) POLYMERIZATION INHIBITORS		
OXBRYTA 500 MG TAB *voxelotor*	3	QL 90 / 30 DAYS PA S Specialty Drug
IRON		
bprotected pedia iron 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act
FERAHEME 510 MG/17ML SOLUTION *ferumoxytol*	3	
ferosul 220 (44 fe) mg/5ml elixir	1	ACA Affordable Care Act
FERRLECIT 12.5 MG/ML SOLUTION *sodium ferric gluconate complex in sucrose*	3	
ferrous sulfate 220 (44 fe) mg/5ml elixir	1	ACA Affordable Care Act
FERROUS SULFATE 220 (44 FE) MG/5ML LIQUID *ferrous sulfate*	2	ACA Affordable Care Act
ferrous sulfate 300 (60 fe) mg/5ml syrup	1	ACA Affordable Care Act
ferrous sulfate 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act
INFED 50 MG/ML SOLUTION *iron dextran*	3	
INJECTAFER 750 MG/15ML SOLUTION *ferric carboxymaltose*	3	
iron supplement 220 (44 fe) mg/5ml elixir	1	ACA Affordable Care Act
iron supplement childrens 75 (15 fe) mg/ml solution	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IRON UP 15 MG/0.5ML LIQUID *polysaccharide iron complex*	2	ACA Affordable Care Act
na ferric gluc cplx in sucrose 12.5 mg/ml solution	1	
NOVAFERRUM PEDIATRIC DROPS 15 MG/ML LIQUID *polysaccharide iron complex*	2	ACA Affordable Care Act
TRIFERIC 27.2 MG/5ML SOLUTION *ferric pyrophosphate citrate*	3	
TRIFERIC 272 MG PACKET *ferric pyrophosphate citrate*	3	
VENOFER 20 MG/ML SOLUTION *iron sucrose*	3	
wee care 15 mg/1.25ml suspension	1	ACA Affordable Care Act
SELECTIN BLOCKERS		
ADAKVEO 100 MG/10ML SOLUTION *crizanlizumab-tmca*	3	S Specialty Drug
THROMBOPOIETIN (TPO) RECEPTOR AGONISTS		
DOPTELET 20 MG TAB *avatrombopag maleate*	2	QL 60 / 30 DAYS PA S Specialty Drug
MULPLETA 3 MG TAB *lusutrombopag*	2	QL 7 / 7 DAYS PA S Specialty Drug
NPLATE 125 MCG RECON SOLN *romiplostim*	3	PA S Specialty Drug
NPLATE 250 MCG RECON SOLN *romiplostim*	3	PA S Specialty Drug
NPLATE 500 MCG RECON SOLN *romiplostim*	3	PA S Specialty Drug
PROMACTA 12.5 MG PACKET *eltrombopag olamine*	3	QL 30 / 30 DAYS PA S Specialty Drug
PROMACTA 12.5 MG TAB *eltrombopag olamine*	3	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROMACTA 25 MG PACKET *eltrombopag olamine*	3	QL 30 / 30 DAYS PA S Specialty Drug
PROMACTA 25 MG TAB *eltrombopag olamine*	3	QL 30 / 30 DAYS PA S Specialty Drug
PROMACTA 50 MG TAB *eltrombopag olamine*	3	QL 60 / 30 DAYS PA S Specialty Drug
PROMACTA 75 MG TAB *eltrombopag olamine*	3	QL 60 / 30 DAYS PA S Specialty Drug
HEMOSTATICS		
HEMOSTATIC COMBINATIONS - TOPICAL		
ARTISS SOLUTION *fibrin sealant component*	3	
THROMBI-GEL 10 PAD *thrombin-sodium carboxymethylcellulose (cmc)-cacl-gelatin*	3	
THROMBI-GEL 100 PAD *thrombin-sodium carboxymethylcellulose (cmc)-cacl-gelatin*	3	
THROMBI-GEL 40 PAD *thrombin-sodium carboxymethylcellulose (cmc)-cacl-gelatin*	3	
THROMBI-PAD 3"X3" PAD *thrombin-sodium carboxymethylcellulose (cmc)-cacl*	3	
TISSEEL SOLUTION *fibrin sealant component*	3	
TISSEEL 10 ML KIT *fibrin sealant component*	3	
TISSEEL 2 ML KIT *fibrin sealant component*	3	
TISSEEL 4 ML KIT *fibrin sealant component*	3	
TISSEEL VH 10 ML KIT *fibrin sealant component*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TISSEEL VH 2 ML KIT *fibrin sealant component*	3	
TISSEEL VH 4 ML KIT *fibrin sealant component*	3	
TISSEEL VHSD SOLUTION *fibrin sealant component*	3	
HEMOSTATICS - SYSTEMIC		
aminocaproic acid 0.25 gm/ml solution	1	
aminocaproic acid 1000 mg tab	1	
aminocaproic acid 250 mg/ml solution	1	
aminocaproic acid 500 mg tab	1	
CYKLOKAPRON 1000 MG/10ML SOLUTION *tranexamic acid*	3	S Specialty Drug
tranexamic acid 1000 mg/10ml solution	1	S Specialty Drug
tranexamic acid 650 mg tab	1	QL 180 / 30 DAYS GL Female
TRANEXAMIC ACID-NACL 1000-0.7 MG/100ML-% SOLUTION *tranexamic acid-sodium chloride*	1	S Specialty Drug
HEMOSTATICS - TOPICAL		
ACTIFOAM COLLAGEN SPONGE MISC *absorbable collagen hemostat*	3	
AVITENE PAD *microfibrillar collagen hemostat*	3	
AVITENE FLOUR POWDER *microfibrillar collagen hemostat*	3	
AVITENE FLOUR POWDER *microfibrillar collagen hemostat*	3	
ENDO AVITENE MISC *absorbable collagen hemostat*	3	
GEL-FLOW NT PRSYR *gelatin absorbable*	3	
GELFILM FILM *gelatin absorbable*	3	
GELFOAM POWDER *gelatin absorbable*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GELFOAM COMPRESSED SIZE 100 MISC *gelatin absorbable*	3	
GELFOAM DENTAL PACK SIZE 4 MISC *gelatin absorbable*	3	
GELFOAM SPONGE 12-7 MM MISC *gelatin absorbable*	3	
GELFOAM SPONGE SIZE 100 MISC *gelatin absorbable*	3	
GELFOAM SPONGE SIZE 200 MISC *gelatin absorbable*	3	
GELFOAM SPONGE SIZE 50 MISC *gelatin absorbable*	3	
INTERCEED PAD *oxidized cellulose*	3	
RECOTHROM 20000 UNIT RECON SOLN *thrombin (recombinant)*	3	S Specialty Drug
RECOTHROM 5000 UNIT RECON SOLN *thrombin (recombinant)*	3	S Specialty Drug
RECOTHROM SPRAY KIT 20000 UNIT RECON SOLN *thrombin (recombinant)*	3	S Specialty Drug
SYRINGE AVITENE MISC *absorbable collagen hemostat*	3	
TACHOSIL 4.8 X 4.8 CM PATCH *absorbable fibrin sealant*	3	
TACHOSIL 9.5 X 4.8 CM PATCH *absorbable fibrin sealant*	3	
THROMBIN-JMI 20000 UNIT KIT *thrombin*	3	
THROMBIN-JMI 20000 UNIT RECON SOLN *thrombin*	3	
THROMBIN-JMI 5000 UNIT KIT *thrombin*	3	
THROMBIN-JMI 5000 UNIT RECON SOLN *thrombin*	3	
THROMBIN-JMI EPISTAXIS 5000 UNIT KIT *thrombin*	3	
ULTRAFOAM SPONGE 2X6.25X7CM MISC *microfibrillar collagen hemostat*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRAFOAM SPONGE 8X12.5X1CM MISC *microfibrillar collagen hemostat*	3	
ULTRAFOAM SPONGE 8X12.5X3CM MISC *microfibrillar collagen hemostat*	3	
ULTRAFOAM SPONGE 8X25X1CM MISC *microfibrillar collagen hemostat*	3	
ULTRAFOAM SPONGE 8X6.25X1CM MISC *microfibrillar collagen hemostat*	3	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
pentobarbital sodium 50 mg/ml solution	1	
phenobarbital 100 mg tab	1	
phenobarbital 15 mg tab	1	
phenobarbital 16.2 mg tab	1	
phenobarbital 20 mg/5ml elixir	1	
phenobarbital 20 mg/5ml solution	1	
phenobarbital 30 mg tab	1	
phenobarbital 32.4 mg tab	1	
phenobarbital 60 mg tab	1	
phenobarbital 64.8 mg tab	1	
phenobarbital 97.2 mg tab	1	
phenobarbital sodium 130 mg/ml solution	1	
phenobarbital sodium 65 mg/ml solution	1	
BENZODIAZEPINE HYPNOTICS		
DORAL 15 MG TAB *quazepam*	3	QL 30 / 30 DAYS
estazolam 1 mg tab	1	QL 30 / 30 DAYS
estazolam 2 mg tab	1	QL 30 / 30 DAYS
FLURAZEPAM HCL 15 MG CAP *flurazepam hcl*	3	QL 30 / 30 DAYS
FLURAZEPAM HCL 30 MG CAP *flurazepam hcl*	3	QL 30 / 30 DAYS
midazolam hcl (pf) 10 mg/2ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
midazolam hcl (pf) 2 mg/2ml solution	1	
MIDAZOLAM HCL (PF) 5 MG/5ML SOLUTION *midazolam hcl*	1	
midazolam hcl (pf) 5 mg/ml solution	1	
midazolam hcl 10 mg/10ml solution	1	
midazolam hcl 10 mg/2ml solution	1	
midazolam hcl 2 mg/2ml solution	1	
midazolam hcl 2 mg/ml syrup	1	
midazolam hcl 25 mg/5ml solution	1	
midazolam hcl 5 mg/5ml solution	1	
midazolam hcl 5 mg/ml solution	1	
midazolam hcl 50 mg/10ml solution	1	
QUAZEPAM 15 MG TAB *quazepam*	3	QL 30 / 30 DAYS
temazepam 15 mg cap	1	QL 30 / 30 DAYS
temazepam 22.5 mg cap	1	QL 30 / 30 DAYS
temazepam 30 mg cap	1	QL 30 / 30 DAYS
temazepam 7.5 mg cap	1	QL 30 / 30 DAYS
HYPNOTICS - TRICYCLIC AGENTS		
doxepin hcl 3 mg tab	1	
doxepin hcl 6 mg tab	1	
NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS		
EDLUAR 10 MG SL TAB *zolpidem tartrate*	3	ST
EDLUAR 5 MG SL TAB *zolpidem tartrate*	3	ST
eszopiclone 1 mg tab	1	QL 30 / 30 DAYS
eszopiclone 2 mg tab	1	QL 30 / 30 DAYS
eszopiclone 3 mg tab	1	QL 30 / 30 DAYS AL1 Up to 65 yrs old
zaleplon 10 mg cap	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zaleplon 5 mg cap	1	
zolpidem tartrate 1.75 mg sl tab	1	
zolpidem tartrate 10 mg tab	1	QL 30 / 30 DAYS
zolpidem tartrate 3.5 mg sl tab	1	
zolpidem tartrate 5 mg tab	1	QL 30 / 30 DAYS
zolpidem tartrate er 12.5 mg tab er	1	
zolpidem tartrate er 6.25 mg tab er	1	
ZOLPIMIST 5 MG/ACT SOLUTION *zolpidem tartrate*	3	ST
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA 10 MG TAB *suvorexant*	2	ST
BELSOMRA 15 MG TAB *suvorexant*	2	ST
BELSOMRA 20 MG TAB *suvorexant*	2	ST
BELSOMRA 5 MG TAB *suvorexant*	2	ST
SELECTIVE ALPHA2-ADRENORECEPTOR AGONIST SEDATIVES		
DEXMEDETOMIDINE HCL 1000 MCG/10ML SOLUTION *dexmedetomidine hcl*	1	
dexmedetomidine hcl 200 mcg/2ml solution	1	
DEXMEDETOMIDINE HCL 400 MCG/4ML SOLUTION *dexmedetomidine hcl*	1	
dexmedetomidine hcl in nacl 200 mcg/50ml solution	1	
dexmedetomidine hcl in nacl 400 mcg/100ml solution	1	
dexmedetomidine hcl in nacl 80 mcg/20ml solution	1	
DEXMEDETOMIDINE HCL-DEXTROSE 200MCG/50ML -5% SOLUTION *dexmedetomidine hcl in dextrose*	1	
DEXMEDETOMIDINE HCL-DEXTROSE 400MCG/100ML -5% SOLUTION *dexmedetomidine hcl in dextrose*	1	
PRECEDEX 200 MCG/2ML SOLUTION *dexmedetomidine hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRECEDEX 200 MCG/50ML SOLUTION *dexmedetomidine hcl in sodium chloride*	3	
PRECEDEX 400 MCG/100ML SOLUTION *dexmedetomidine hcl in sodium chloride*	3	
PRECEDEX 80 MCG/20ML SOLUTION *dexmedetomidine hcl in sodium chloride*	3	
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ 20 MG CAP *tasimelteon*	3	QL 30 / 30 DAYS PA S Specialty Drug
LAXATIVES		
BOWEL EVACUANT COMBINATIONS		
GAVILYTE-C 240 GM RECON SOLN *peg 3350-kcl-sod bicarb-sod chloride-sod sulfate*	3	ACA Affordable Care Act
gavilyte-g 236 gm recon soln	1	ACA Affordable Care Act
gavilyte-h 5-210 mg-gm kit	1	
gavilyte-n with flavor pack 420 gm recon soln	1	ACA Affordable Care Act
peg 3350-kcl-na bicarb-nacl 420 gm recon soln	1	ACA Affordable Care Act
peg 3350/electrolytes 240 gm recon soln	1	ACA Affordable Care Act
peg-3350/electrolytes 236 gm recon soln	1	ACA Affordable Care Act
peg-prep 5-210 mg-gm kit	1	
SUPREP BOWEL PREP KIT 17.5-3.13-1.6 GM/177ML SOLUTION *sodium sulfate-potassium sulfate-magnesium sulfate*	3	QL 354 / Rx
trilyte 420 gm recon soln	1	ACA Affordable Care Act
LAXATIVES - MISCELLANEOUS		
constulose 10 gm/15ml solution	1	
lactulose 10 gm/15ml solution	1	
lactulose 20 gm/30ml solution	1	
pegylax 17 gm/scoop powder	1	ACA Affordable Care Act
polyethylene glycol 3350 17 gm packet	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
polyethylene glycol 3350 17 gm/scoop powder	1	ACA Affordable Care Act
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETIC & SYMPATHOMIMETIC		
articadent dental 4 %-1:100000 soln cart	1	
articadent dental 4 %-1:200000 soln cart	1	
bupivacaine-epinephrine (pf) 0.25% -1:200000 solution	1	
bupivacaine-epinephrine (pf) 0.5% -1:200000 solution	1	
bupivacaine-epinephrine 0.25% -1:200000 solution	1	
bupivacaine-epinephrine 0.5% -1:200000 solution	1	
CITANEST FORTE DENTAL 4% -1:200000 SOLUTION *prilocaine w/ epinephrine*	3	
D-CARE 100X 1 %-1:200000 KIT *lidocaine w/ epinephrine*	3	
lidocaine-epinephrine 0.5 %-1:200000 solution	1	
lidocaine-epinephrine 1 %-1:100000 solution	1	
lidocaine-epinephrine 1.5 %-1:200000 solution	1	
lidocaine-epinephrine 2 %-1:100000 solution	1	
lidocaine-epinephrine 2 %-1:200000 solution	1	
lidocaine-epinephrine 2 %-1:50000 solution	1	
MARCAINE/EPINEPHRINE 0.25% -1:200000 SOLUTION *bupivacaine w/ epinephrine*	3	
MARCAINE/EPINEPHRINE 0.5% -1:200000 SOLUTION *bupivacaine w/ epinephrine*	3	
MARCAINE/EPINEPHRINE PF 0.25% -1:200000 SOLUTION *bupivacaine w/ epinephrine*	3	
MARCAINE/EPINEPHRINE PF 0.5% -1:200000 SOLUTION *bupivacaine w/ epinephrine*	3	
ORABLOC 4 %-1:100000 SOLN CART *articaine-epinephrine*	3	
ORABLOC 4 %-1:200000 SOLN CART *articaine-epinephrine*	3	
sensorcaine-mpf/epinephrine 0.25% -1:200000 solution	1	
sensorcaine-mpf/epinephrine 0.5% -1:200000 solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SENSORCAINE-MPF/EPINEPHRINE 0.75-1:200000 % SOLUTION *bupivacaine w/ epinephrine*	3	
sensorcaine/epinephrine 0.25% -1:200000 solution	1	
sensorcaine/epinephrine 0.5% -1:200000 solution	1	
xylocaine dental 2 %-1:100000 solution	1	
xylocaine dental 2 %-1:50000 solution	1	
XYLOCAINE-MPF/EPINEPHRINE 1 %-1:200000 SOLUTION *lidocaine w/ epinephrine*	3	
XYLOCAINE-MPF/EPINEPHRINE 1.5 %-1:200000 SOLUTION *lidocaine w/ epinephrine*	3	
XYLOCAINE-MPF/EPINEPHRINE 2 %-1:200000 SOLUTION *lidocaine w/ epinephrine*	3	
XYLOCAINE/EPINEPHRINE 0.5 %-1:200000 SOLUTION *lidocaine w/ epinephrine*	3	
XYLOCAINE/EPINEPHRINE 1 %-1:100000 SOLUTION *lidocaine w/ epinephrine*	3	
XYLOCAINE/EPINEPHRINE 2 %-1:100000 SOLUTION *lidocaine w/ epinephrine*	3	
LOCAL ANESTHETIC COMBINATIONS		
P-CARE 100MX 1 & 0.5 % KIT *lidocaine hcl-bupivacaine hcl*	3	
POINT OF CARE LM-2.2 1 & 0.25 % KIT *lidocaine hcl-bupivacaine hcl*	3	
POINT OF CARE LM-2.5 1 & 0.25 % KIT *lidocaine hcl-bupivacaine hcl*	3	
READYSHARP-A 1 & 0.5 % KIT *lidocaine hcl-bupivacaine hcl*	3	
LOCAL ANESTHETICS - AMIDES		
bupivacaine hcl (pf) 0.25 % solution	1	
bupivacaine hcl (pf) 0.5 % solution	1	
bupivacaine hcl (pf) 0.75 % solution	1	
bupivacaine hcl 0.25 % solution	1	
bupivacaine hcl 0.5 % solution	1	
bupivacaine in dextrose 0.75-8.25 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bupivacaine spinal 0.75-8.25 % solution	1	
CARBOCAINE 1 % SOLUTION *mepivacaine hcl*	3	
CARBOCAINE 2 % SOLUTION *mepivacaine hcl*	3	
CARBOCAINE PRESERVATIVE-FREE 1 % SOLUTION *mepivacaine hcl*	3	
CARBOCAINE PRESERVATIVE-FREE 1.5 % SOLUTION *mepivacaine hcl*	3	
CARBOCAINE PRESERVATIVE-FREE 2 % SOLUTION *mepivacaine hcl*	3	
CITANEST PLAIN DENTAL 4 % SOLUTION *prilocaine hcl*	3	
EXPAREL 1.3 % SUSPENSION *bupivacaine liposome*	3	
lidocaine hcl (pf) 0.5 % solution	1	
lidocaine hcl (pf) 1 % solution	1	
lidocaine hcl (pf) 1.5 % solution	1	
lidocaine hcl (pf) 2 % solution	1	
LIDOCAINE HCL (PF) 4 % SOLUTION *lidocaine hcl (local anesth.)*	1	
lidocaine hcl 0.5 % solution	1	
LIDOCAINE HCL 0.5 MG J-INJ *lidocaine hcl (local anesth.)*	1	
lidocaine hcl 1 % solution	1	
lidocaine hcl 2 % solution	1	
LIDOCAINE IN DEXTROSE 5-7.5 % SOLUTION *lidocaine in dextrose*	1	
MARCAINE 0.25 % SOLUTION *bupivacaine hcl*	3	
MARCAINE 0.5 % SOLUTION *bupivacaine hcl*	3	
MARCAINE 0.75 % SOLUTION *bupivacaine hcl*	3	
MARCAINE PRESERVATIVE FREE 0.25 % SOLUTION *bupivacaine hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MARCAINE PRESERVATIVE FREE 0.5 % SOLUTION *bupivacaine hcl*	3	
MARCAINE SPINAL 0.75-8.25 % SOLUTION *bupivacaine in dextrose*	3	
NAROPIN 10 MG/ML SOLUTION *ropivacaine hcl*	3	
NAROPIN 2 MG/ML SOLUTION *ropivacaine hcl*	3	
NAROPIN 5 MG/ML SOLUTION *ropivacaine hcl*	3	
NAROPIN 7.5 MG/ML SOLUTION *ropivacaine hcl*	3	
P-CARE M 0.5 % KIT *bupivacaine hcl*	3	
P-CARE X 1 % KIT *lidocaine hcl (local anesth.)*	3	
polocaine 1 % solution	1	
polocaine 2 % solution	1	
polocaine-mpf 1 % solution	1	
polocaine-mpf 1.5 % solution	1	
polocaine-mpf 2 % solution	1	
READYSHARP LIDOCAINE 1 % KIT *lidocaine hcl (local anesth.)*	3	
ropivacaine hcl 10 mg/ml solution	1	
ropivacaine hcl 2 mg/ml solution	1	
ropivacaine hcl 5 mg/ml solution	1	
ropivacaine hcl 7.5 mg/ml solution	1	
sensorcaine 0.25 % solution	1	
sensorcaine 0.5 % solution	1	
sensorcaine-mpf 0.25 % solution	1	
sensorcaine-mpf 0.5 % solution	1	
sensorcaine-mpf 0.75 % solution	1	
XYLOCAINE 0.5 % SOLUTION *lidocaine hcl (local anesth.)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYLOCAINE 1 % SOLUTION *lidocaine hcl (local anesth.)*	3	
XYLOCAINE 2 % SOLUTION *lidocaine hcl (local anesth.)*	3	
XYLOCAINE-MPF 0.5 % SOLUTION *lidocaine hcl (local anesth.)*	3	
XYLOCAINE-MPF 1 % SOLUTION *lidocaine hcl (local anesth.)*	3	
XYLOCAINE-MPF 1.5 % SOLUTION *lidocaine hcl (local anesth.)*	3	
XYLOCAINE-MPF 2 % SOLUTION *lidocaine hcl (local anesth.)*	3	
ZINGO 0.5 MG J-INJ *lidocaine hcl (local anesth.)*	3	
LOCAL ANESTHETICS - ESTERS		
chloroprocaine hcl (pf) 2 % solution	1	
chloroprocaine hcl (pf) 3 % solution	1	
CLOROTEKAL 50 MG/5ML SOLUTION *chloroprocaine hcl*	3	
NESACAINE 1 % SOLUTION *chloroprocaine hcl*	3	
NESACAINE 2 % SOLUTION *chloroprocaine hcl*	3	
NESACAINE-MPF 2 % SOLUTION *chloroprocaine hcl*	3	
NESACAINE-MPF 3 % SOLUTION *chloroprocaine hcl*	3	
MACROLIDES		
AZITHROMYCIN		
AZITHROMYCIN 1 GM PACKET *azithromycin*	2	
azithromycin 100 mg/5ml recon susp	1	
azithromycin 200 mg/5ml recon susp	1	
azithromycin 250 mg tab	1	QL 6 / 5 DAYS
azithromycin 500 mg recon soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
azithromycin 500 mg tab	1	
azithromycin 600 mg tab	1	
ZITHROMAX 1 GM PACKET *azithromycin*	3	
ZITHROMAX 500 MG RECON SOLN *azithromycin*	3	
CLARITHROMYCIN		
CLARITHROMYCIN 125 MG/5ML RECON SUSP *clarithromycin*	3	
clarithromycin 250 mg tab	1	
CLARITHROMYCIN 250 MG/5ML RECON SUSP *clarithromycin*	3	
clarithromycin 500 mg tab	1	
clarithromycin er 500 mg tab er 24h	1	
ERYTHROMYCINS		
E.E.S. 400 400 MG TAB *erythromycin ethylsuccinate*	3	
ery-tab 250 mg tab dr	1	
ery-tab 333 mg tab dr	1	
ery-tab 500 mg tab dr	1	
ERYTHROCIN LACTOBIONATE 500 MG RECON SOLN *erythromycin lactobionate*	3	
ERYTHROCIN STEARATE 250 MG TAB *erythromycin stearate*	2	
erythromycin 250 mg tab dr	1	
erythromycin 333 mg tab dr	1	
erythromycin 500 mg tab dr	1	
ERYTHROMYCIN BASE 250 MG CP DR PART *erythromycin base*	3	
erythromycin base 250 mg cp dr part	1	
erythromycin base 250 mg tab	1	
erythromycin base 250 mg tab dr	1	
erythromycin base 333 mg tab dr	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
erythromycin base 500 mg tab	1	
erythromycin base 500 mg tab dr	1	
erythromycin ethylsuccinate 200 mg/5ml recon susp	1	
ERYTHROMYCIN ETHYLSUCCINATE 400 MG TAB *erythromycin ethylsuccinate*	3	
erythromycin ethylsuccinate 400 mg/5ml recon susp	1	
FIDAXOMICIN		
DIFICID 200 MG TAB *fidaxomicin*	3	
MEDICAL DEVICES AND SUPPLIES		
APPLICATORS,COTTON BALLS,ETC		
ALCOH-GLOVE CONTOURED WIPE PAD *alcohol swabs*	3	
ALCOH-WIPE SHEET *alcohol sheets*	3	
BLOOD COAGULATION TEST SUPPLIES		
COAGUCHEK XS SYSTEM KIT *pt/inr testing monitor*	3	
CATHETERS		
BARD URETHRAL CATHETER 16" MISC *catheters*	3	
SPEEDICATH COMPACT 12FR MISC *catheters*	3	
SPEEDICATH COMPACT 14FR MISC *catheters*	3	
CERVICAL CAPS		
FEMCAP 22 MM DEVICE *cervical caps*	2	GL Female ACA Affordable Care Act
FEMCAP 26 MM DEVICE *cervical caps*	2	GL Female ACA Affordable Care Act
FEMCAP 30 MM DEVICE *cervical caps*	2	GL Female ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CONDOMS - FEMALE		
FC FEMALE CONDOM MISC *condoms - female*	2	GL Female ACA Affordable Care Act
FC2 FEMALE CONDOM MISC *condoms - female*	2	GL Female ACA Affordable Care Act
DIAPHRAGMS		
CAYA DIAPHRAGM *diaphragm arc-spring*	2	ACA Affordable Care Act
OMNIFLEX DIAPHRAGM DIAPHRAGM *diaphragms*	2	ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM *diaphragm wide seal*	2	GL Female ACA Affordable Care Act
DISPOSABLE GLOVES		
CHEMOPLUS LATEX GLOVES MISC *disposable gloves*	3	
CHEMOPLUS NEOPRENE GLOVE MISC *disposable gloves*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CHEMOPLUS NITRILE GLOVES MISC *disposable gloves*	3	
LATEX GLOVES MEDIUM MISC *disposable gloves*	1	
NITRILE GLOVES LARGE MISC *disposable gloves*	3	
NITRILE GLOVES MEDIUM MISC *disposable gloves*	3	
NITRILE GLOVES SMALL MISC *disposable gloves*	3	
NITRILE GLOVES X-LARGE MISC *disposable gloves*	3	
NITRILE GLOVES/SIZE 10 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 6 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 6.5 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 7 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 7.5 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 8 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 8.5 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 9 MISC *disposable gloves*	1	
NITRILE GLOVES/SIZE 9.5 MEDIUM MISC *disposable gloves*	1	
POWDER FREE NITRILE GLOVES SM MISC *disposable gloves*	3	
FOOT CARE PRODUCTS		
BIOFREQUENCY INSOLES MISC *foot care products*	3	
GLUCOSE MONITORING TEST SUPPLIES		
1ST TIER UNILET COMFORTOUCH MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACCU-CHEK FASTCLIX LANCET KIT *lancets misc.*	2	
ACCU-CHEK FASTCLIX LANCETS MISC *lancets*	2	
ACCU-CHEK MULTICLIX LANCET DEV KIT *lancets misc.*	2	
ACCU-CHEK MULTICLIX LANCETS MISC *lancets*	2	
ACCU-CHEK SAFE-T PRO LANCETS MISC *lancets*	2	
ACCU-CHEK SOFTCLIX LANCET DEV KIT *lancets misc.*	2	
ACCU-CHEK SOFTCLIX LANCETS MISC *lancets*	2	
ACTI-LANCE 28G MISC *lancets*	2	
ACTI-LANCE LITE LANCETS 28G MISC *lancets*	2	
ACTI-LANCE SPECIAL LANCETS 17G MISC *lancets*	2	
ACTI-LANCE UNIVERSAL 23G MISC *lancets*	2	
ACTIVE 1ST BLOOD LANCETS 30G MISC *lancets*	2	
ADJUSTABLE LANCING DEVICE MISC *lancet devices*	2	
ADVANCED MOBILE LANCET MISC *lancets*	2	
ADVOCATE LANCETS MISC *lancets*	2	
ADVOCATE LANCETS 30G MISC *lancets*	2	
ADVOCATE LANCING DEVICE MISC *lancet devices*	2	
ADVOCATE RAPID-SAFE LANCING MISC *lancet devices*	2	
ADVOCATE SAFETY LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVOCATE SAFETY LANCETS 26G MISC *lancets*	2	
AGAMATRIX ULTRA-THIN LANCETS MISC *lancets*	2	
AIMSCO TWIST LANCETS 32G MISC *lancets*	2	
AIMSCO TWIST LANCETS 33G MISC *lancets*	2	
ALTERNATE SITE LANCING DEVICE MISC *lancet devices*	2	
AQUA LANCE ADJUSTABLE LANCING DEVICE *lancet devices*	2	
AQUALANCE LANCETS 30G MISC *lancets*	2	
ASSURE COMFORT LANCETS 28G MISC *lancets*	2	
ASSURE HAEMOLANCE PLUS HIGH MISC *lancets*	2	
ASSURE HAEMOLANCE PLUS LOW MISC *lancets*	2	
ASSURE HAEMOLANCE PLUS MICRO MISC *lancets*	2	
ASSURE HAEMOLANCE PLUS NORMAL MISC *lancets*	2	
ASSURE HAEMOLANCE PLUS PED MISC *lancets*	2	
ASSURE LANCE LANCETS MISC *lancets*	2	
ASSURE LANCE LANCETS 21G MISC *lancets*	2	
ASSURE LANCE PLUS SAFETY 25G MISC *lancets*	2	
ASSURE LANCE PLUS SAFETY 30G MISC *lancets*	2	
ASSURE LANCE SAFETY LANCET 28G MISC *lancets*	2	
ASSURE LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AT LAST LANCETS MISC *lancets*	2	
AURORA LANCET SUPER THIN 30G MISC *lancets*	2	
AURORA LANCET THIN 23G MISC *lancets*	2	
AUTO-LANCET MISC *lancet devices*	2	
AUTO-LANCET MINI MISC *lancet devices*	2	
AUTOLET II CLINISAFE KIT *lancets misc.*	2	
AUTOLET LANCING DEVICE MISC *lancet devices*	2	
AUTOLET LITE CLINISAFE KIT *lancets misc.*	2	
AUTOLET LITE STARTER PACK KIT *lancets misc.*	2	
AUTOLET MINI MISC *lancet devices*	2	
AUTOLET PLATFORMS MISC *lancets misc.*	2	
AUTOLET PLUS MISC *lancet devices*	2	
BD LANCET ULTRAFINE 30G MISC *lancets*	2	
BD LANCET ULTRAFINE 33G MISC *lancets*	2	
BD MICROTAINER LANCETS MISC *lancets*	2	
BLUESTAR DEVICE *blood glucose monitoring software*	3	
BULLSEYE MINI SAFETY LANCETS MISC *lancets*	2	
BULLSEYE SAFETY LANCETS MISC *lancets*	2	
CARDIOCOM LANCING DEVICE MISC *lancet devices*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREONE ADVANCED LANCING DEV MISC *lancet devices*	2	
CAREONE LANCET THIN 23G MISC *lancets*	2	
CAREONE LANCET ULTRA THIN 28G MISC *lancets*	2	
CARESENS LANCETS MISC *lancets*	2	
CARETOUCH LANCING/EJECTOR MISC *lancet devices*	2	
CARETOUCH SAFETY LANCETS MISC *lancets*	2	
CARETOUCH SAFETY LANCETS 26G MISC *lancets*	2	
CARETOUCH TWIST LANCETS 28G MISC *lancets*	2	
CARETOUCH TWIST LANCETS 30G MISC *lancets*	2	
CARETOUCH TWIST LANCETS 33G MISC *lancets*	2	
CGMS REPLACEMENT CABLE MISC *continuous blood glucose monitor supplies*	3	
CGMS SOFTWARE MISC *continuous blood glucose monitor supplies*	3	
CLEANLET LANCETS 28G MISC *lancets*	2	
CLEVER CHEK LANCETS MISC *lancets*	2	
CLEVER CHOICE LANCETS 21G MISC *lancets*	2	
CLEVER CHOICE LANCETS 23G MISC *lancets*	2	
CLEVER CHOICE LANCETS 28G MISC *lancets*	2	
COAGUCHEK LANCETS MISC *lancets*	2	
COMFORT ASSURED LANCETS 28G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT ASSURED LANCETS 33G MISC *lancets*	2	
COMFORT LANCETS MISC *lancets*	2	
CONTOUR CONTROL HIGH LIQUID *blood glucose calibration*	2	
CONTOUR CONTROL LOW LIQUID *blood glucose calibration*	2	
CONTOUR CONTROL NORMAL LIQUID *blood glucose calibration*	2	
CONTOUR NEXT CONTROL LOW SOLUTION *blood glucose calibration*	2	
CONTOUR NEXT CONTROL NORMAL SOLUTION *blood glucose calibration*	2	
CONTOUR NEXT EZ W/DEVICE KIT *blood glucose monitoring supplies*	2	
CONTOUR NEXT MONITOR W/DEVICE KIT *blood glucose monitoring supplies*	2	
CONTOUR NEXT ONE KIT *blood glucose monitoring supplies*	2	
CVS LANCETS 21G MISC *lancets*	2	
CVS LANCETS MICRO THIN 33G MISC *lancets*	2	
CVS LANCETS ORIGINAL MISC *lancets*	2	
CVS LANCETS THIN 26G MISC *lancets*	2	
CVS LANCETS ULTRA THIN 30G MISC *lancets*	2	
CVS LANCETS ULTRA-THIN 30G MISC *lancets*	2	
CVS LANCING DEVICE MISC *lancet devices*	2	
CVS ULTRA THIN LANCETS MISC *lancets*	2	
D-CARE GLUCOMETER W/DEVICE KIT *blood glucose monitoring supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXCOM G5 MOB/G4 PLAT SENSOR MISC *continuous blood glucose system sensor*	2	QL 4 / 28 DAYS ST AL1 At least 4 yrs old
DEXCOM G5 MOBILE RECEIVER DEVICE *continuous blood glucose system receiver*	2	QL 1 / 365 DAYS ST AL1 At least 4 yrs old
DEXCOM G5 MOBILE TRANSMITTER MISC *continuous blood glucose system transmitter*	2	QL 1 / 84 DAYS ST AL1 At least 2 yrs old
DEXCOM G5 RECEIVER KIT DEVICE *continuous blood glucose system receiver*	2	QL 1 / 365 DAYS ST AL1 At least 4 yrs old
DEXCOM G6 RECEIVER DEVICE *continuous blood glucose system receiver*	2	QL 1 / 365 DAYS ST AL1 At least 4 yrs old
DEXCOM G6 SENSOR MISC *continuous blood glucose system sensor*	2	QL 3 / 30 DAYS ST AL1 At least 4 yrs old
DEXCOM G6 TRANSMITTER MISC *continuous blood glucose system transmitter*	2	QL 1 / 90 DAYS ST AL1 At least 2 yrs old
DIATHRIVE LANCET ULTRA THIN 30 MISC *lancets*	2	
DIATHRIVE LANCETS MISC *lancets*	2	
DIATHRIVE LANCING DEVICE MISC *lancet devices*	2	
DROPLET LANCETS ULTRA THIN 30G MISC *lancets*	2	
DROPLET LANCING DEVICE MISC *lancet devices*	2	
DRUG MART LANCETS THIN 26G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DRUG MART LANCING DEVICE MISC *lancet devices*	2	
DRUG MART ON-THE-GO LANCET 30G MISC *lancets*	2	
DRUG MART UNILET LANCETS 28G MISC *lancets*	2	
DRUG MART UNILET LANCETS 30G MISC *lancets*	2	
DRUG MART UNILET LANCETS 33G MISC *lancets*	2	
E-Z JECT LANCET MICRO-THIN 33G MISC *lancets*	2	
E-Z JECT LANCET SUPER THIN 30G MISC *lancets*	2	
E-Z JECT LANCETS MISC *lancets*	2	
E-Z JECT LANCETS 21G MISC *lancets*	2	
E-Z JECT LANCETS THIN 26G MISC *lancets*	2	
EASY COMFORT LANCETS MISC *lancets*	2	
EASY COMFORT LANCETS TWIST TOP MISC *lancets*	2	
EASY MINI EJECT LANCING DEVICE MISC *lancet devices*	2	
EASY MINI LANCING DEVICE MISC *lancet devices*	2	
EASY TOUCH LANCETS 21G MISC *lancets*	2	
EASY TOUCH LANCETS 23G MISC *lancets*	2	
EASY TOUCH LANCETS 26G MISC *lancets*	2	
EASY TOUCH LANCETS 28G MISC *lancets*	2	
EASY TOUCH LANCETS 28G/TWIST MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH LANCETS 30G MISC *lancets*	2	
EASY TOUCH LANCETS 30G/TWIST MISC *lancets*	2	
EASY TOUCH LANCETS 32G MISC *lancets*	2	
EASY TOUCH LANCETS 32G/TWIST MISC *lancets*	2	
EASY TOUCH LANCETS 33G/TWIST MISC *lancets*	2	
EASY TOUCH LANCING DEVICE MISC *lancet devices*	2	
EASY TOUCH SAFETY LANCETS 21G MISC *lancets*	2	
EASY TOUCH SAFETY LANCETS 23G MISC *lancets*	2	
EASY TOUCH SAFETY LANCETS 26G MISC *lancets*	2	
EASY TOUCH SAFETY LANCETS 28G MISC *lancets*	2	
EASY TWIST & CAP LANCETS MISC *lancets*	2	
EMBRACE LANCETS ULTRA THIN 30G MISC *lancets*	2	
ENLITE GLUCOSE SENSOR MISC *continuous blood glucose system sensor*	3	AL1 At least 4 yrs old
EQL COLOR LANCETS 21G MISC *lancets*	2	
EQL COLOR LANCETS MICRO 33G MISC *lancets*	2	
EQL SUPER THIN LANCETS 30G MISC *lancets*	2	
EQL THIN LANCETS 26G MISC *lancets*	2	
EZ SMART BLOOD GLUCOSE LANCETS MISC *lancets*	2	
EZ-LETS LANCETS 21G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EZ-LETS LANCETS 26G MISC *lancets*	2	
EZ-LETS LANCETS 28G MISC *lancets*	2	
EZ-LETS LANCETS 30G MISC *lancets*	2	
FIFTY50 SAFETY SEAL LANCETS MISC *lancets*	2	
FIFTY50 UNILET LANCETS 33G MISC *lancets*	2	
FINE 30 MISC *lancets*	2	
FINGERSTIX LANCETS MISC *lancets*	2	
FORA LANCETS MISC *lancets*	2	
FORA LANCING DEVICE MISC *lancet devices*	2	
FREDS PHARMACY AUTOLET LANCING MISC *lancet devices*	2	
FREDS PHARMACY UNILET LANC 28G MISC *lancets*	2	
FREDS PHARMACY UNILET LANC 30G MISC *lancets*	2	
FREESTYLE LANCETS MISC *lancets*	2	
FREESTYLE UNISTICK II LANCETS MISC *lancets*	2	
GENTEEL BUTTERFLY TOUCH LANCET MISC *lancets*	2	
GENTEEL CONTACT TIPS (BLUE) MISC *lancets misc.*	2	
GENTEEL CONTACT TIPS (CLEAR) MISC *lancets misc.*	2	
GENTEEL CONTACT TIPS (GREEN) MISC *lancets misc.*	2	
GENTEEL CONTACT TIPS (ORANGE) MISC *lancets misc.*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENTEEL CONTACT TIPS (RAINBOW) MISC *lancets misc.*	2	
GENTEEL CONTACT TIPS (VIOLET) MISC *lancets misc.*	2	
GENTEEL CONTACT TIPS (YELLOW) MISC *lancets misc.*	2	
GENTEEL LANCING DEVICE (BLACK) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE (BLUE) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE (GOLD) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE (PINK) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE (WHITE) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE(PLATNM) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE(PURPLE) MISC *lancet devices*	2	
GENTEEL LANCING DEVICE(SILVER) MISC *lancet devices*	2	
GENTEEL LANCING KIT (BLUE) KIT *lancets misc.*	2	
GENTEEL NOZZLES MISC *lancets misc.*	2	
GENTLE-LET GP LANCETS MISC *lancets*	2	
GENTLE-LET LANCETS MISC *lancets*	2	
GENTLE-LET PLATFORMS MISC *lancets misc.*	2	
GLOBAL INJECT EASE LANCETS 28G MISC *lancets*	2	
GLOBAL INJECT EASE LANCETS 30G MISC *lancets*	2	
GLOBAL LANCING DEVICE MISC *lancet devices*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLUCOCOM LANCETS 28G MISC *lancets*	2	
GLUCOCOM LANCETS 30G MISC *lancets*	2	
GLUCOCOM LANCETS 33G MISC *lancets*	2	
GNP LANCETS MISC *lancets*	2	
GNP LANCETS 21G MISC *lancets*	2	
GNP LANCETS MICRO THIN 33G MISC *lancets*	2	
GNP LANCETS SUPER THIN 30G MISC *lancets*	2	
GNP LANCETS THIN MISC *lancets*	2	
GNP LANCETS THIN 26G MISC *lancets*	2	
GNP MICRO THIN LANCETS 33G MISC *lancets*	2	
GNP SUPER THIN LANCETS 30G MISC *lancets*	2	
GOJJI LANCING DEVICE/CLEAR CAP MISC *lancet devices*	2	
GOJJI STERILE LANCETS MISC *lancets*	2	
GOODSENSE COLOR LANCETS 33G MISC *lancets*	2	
GOODSENSE LANCETS 26G UNIV MISC *lancets*	2	
GOODSENSE LANCETS 30G MISC *lancets*	2	
GOODSENSE LANCETS 30G UNIV MISC *lancets*	2	
GOODSENSE LANCETS 33G MISC *lancets*	2	
GOODSENSE LANCETS 33G UNIV MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOODSENSE LANCING DEVICE MISC *lancet devices*	2	
GUARDIAN CONNECT TRANSMITTER MISC *continuous blood glucose system transmitter*	3	AL1 At least 2 yrs old
GUARDIAN LINK 3 TRANSMITTER MISC *continuous blood glucose system transmitter*	3	AL1 At least 2 yrs old
GUARDIAN REAL-TIME CHARGER MISC *continuous blood glucose monitor supplies*	3	
GUARDIAN REAL-TIME REPLACE PED DEVICE *continuous blood glucose system receiver*	3	AL1 At least 4 yrs old
GUARDIAN REAL-TIME REPLACEMENT DEVICE *continuous blood glucose system receiver*	3	AL1 At least 4 yrs old
GUARDIAN REAL-TIME STARTER KIT *continuous blood glucose monitor supplies*	3	
GUARDIAN REAL-TIME SYSTEM KIT *continuous blood glucose monitor supplies*	3	
GUARDIAN REAL-TIME SYSTEM PED KIT *continuous blood glucose monitor supplies*	3	
GUARDIAN REAL-TIME TEST PLUG MISC *continuous blood glucose monitor supplies*	3	
GUARDIAN RT SOFTWARE MISC *continuous blood glucose monitor supplies*	3	
GUARDIAN RT STARTER KIT *continuous blood glucose monitor supplies*	3	
GUARDIAN RT SYSTEM KIT *continuous blood glucose monitor supplies*	3	
GUARDIAN SENSOR (3) MISC *continuous blood glucose system sensor*	3	AL1 At least 4 yrs old
GUARDIAN TRANSMITTER MISC *continuous blood glucose system transmitter*	3	AL1 At least 2 yrs old
H-E-B INCONTROL ADV LANCING MISC *lancet devices*	2	
H-E-B INCONTROL LANCETS 28G MISC *lancets*	2	
H-E-B INCONTROL LANCETS 30G MISC *lancets*	2	
H-E-B INCONTROL LANCETS 33G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HAEMOLANCE MISC *lancets*	2	
HAEMOLANCE LOW FLOW LANCETS MISC *lancets*	2	
HAEMOLANCE PLUS MISC *lancets*	2	
HAEMOLANCE PLUS HIGH FLOW MISC *lancets*	2	
HAEMOLANCE PLUS LOW FLOW MISC *lancets*	2	
HAEMOLANCE PLUS MAX FLOW MISC *lancets*	2	
HAEMOLANCE PLUS PEDIATRIC FLOW MISC *lancets*	2	
HEALTH CARE LANCING DEVICE MISC *lancet devices*	2	
HEALTHY ACCENTS LANCING DEVICE MISC *lancet devices*	2	
HEALTHY ACCENTS UNILET LANCETS MISC *lancets*	2	
HY-VEE LANCETS MISC *lancets*	2	
HY-VEE THIN LANCETS MISC *lancets*	2	
HYPOLANCE AST LANCING KIT *lancets misc.*	2	
IN TOUCH LANCING DEVICE MISC *lancet devices*	2	
IN TOUCH STERILE LANCETS 30G MISC *lancets*	2	
KINNEY LANCETS MISC *lancets*	2	
KINNEY THIN LANCETS MISC *lancets*	2	
KROGER AUTOLET LANCING DEVICE MISC *lancet devices*	2	
KROGER HEALTHPRO LANCET 26G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KROGER LANCETS MISC *lancets*	2	
KROGER LANCETS 21G MISC *lancets*	2	
KROGER LANCETS MICRO THIN 33G MISC *lancets*	2	
KROGER LANCETS SUPER THIN MISC *lancets*	2	
KROGER LANCETS THIN MISC *lancets*	2	
KROGER LANCETS THIN 26G MISC *lancets*	2	
KROGER LANCETS ULTRATHIN 30G MISC *lancets*	2	
KROGER LANCING DEVICE MISC *lancet devices*	2	
LANCET DEVICE MISC *lancet devices*	2	
LANCET DEVICE WITH EJECTOR MISC *lancet devices*	2	
LANCET TRANSPORTER CASE MISC *lancets misc.*	2	
LANCETS MISC *lancets*	2	
LANCETS 28G MISC *lancets*	2	
LANCETS 30G MISC *lancets*	2	
LANCETS MICRO THIN 33G MISC *lancets*	2	
LANCETS SUPER THIN 28G MISC *lancets*	2	
LANCETS THIN MISC *lancets*	2	
LANCETS ULTRA FINE MISC *lancets*	2	
LANCETS ULTRA THIN MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LANCETS ULTRA THIN 30G MISC *lancets*	2	
LANCING DEVICE MISC *lancet devices*	2	
LANZO MISC *lancet devices*	2	
LEADER ADVANCED LANCING DEVICE MISC *lancet devices*	2	
LIBERTY MEDICAL LANCETS MISC *lancets*	2	
LIBERTY MINI LANCING DEVICE MISC *lancet devices*	2	
LIFESCAN UNISTIK 2 MISC *lancets*	2	
LIFESCAN UNISTIK II LANCETS MISC *lancets*	2	
LITE TOUCH LANCETS MISC *lancets*	2	
LITE TOUCH LANCING PEN MISC *lancet devices*	2	
LITETOUCH LANCETS MISC *lancets*	2	
LIVE BETTER ADV LANCING DEVICE MISC *lancet devices*	2	
LIVE BETTER LANCET SUPER THIN MISC *lancets*	2	
LIVE BETTER LANCET ULTRA THIN MISC *lancets*	2	
LONGS LANCETS STANDARD MISC *lancets*	2	
LONGS LANCETS THIN MISC *lancets*	2	
LONGS LANCETS ULTRA THIN MISC *lancets*	2	
MEDICHOICE SAFETY LANCET MISC *lancets*	2	
MEDICHOICE SAFETY LANCET EXTRA MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDICHOICE SAFETY LANCET NORM MISC *lancets*	2	
MEDISENSE THIN LANCETS MISC *lancets*	2	
MEDLANCE EXTRA 21G MISC *lancets*	2	
MEDLANCE LITE 25G MISC *lancets*	2	
MEDLANCE PLUS EXTRA 21G MISC *lancets*	2	
MEDLANCE PLUS LANCETS MISC *lancets*	2	
MEDLANCE PLUS LITE 25G MISC *lancets*	2	
MEDLANCE PLUS SPECIAL 0.8MM MISC *lancets*	2	
MEDLANCE PLUS SUPERLITE 30G MISC *lancets*	2	
MEDLANCE PLUS UNIVERSAL 21G MISC *lancets*	2	
MEDLANCE UNIVERSAL 21G MISC *lancets*	2	
MEIJER LANCETS MISC *lancets*	2	
MEIJER LANCETS THIN MISC *lancets*	2	
MEIJER LANCETS UNIVERSAL 21G MISC *lancets*	2	
MEIJER LANCETS UNIVERSAL 30G MISC *lancets*	2	
MEIJER LANCETS UNIVERSAL 33G MISC *lancets*	2	
MEIJER SUPER THIN LANCETS MISC *lancets*	2	
MICROLET LANCETS MISC *lancets*	2	
MICROLET NEXT LANCING DEVICE MISC *lancet devices*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MICROTAINER SAFETY FLOW LANCET MISC *lancets*	2	
MINI LANCING DEVICE MISC *lancet devices*	2	
MM LANCING DEVICE MISC *lancet devices*	2	
MM TWIST LANCETS MISC *lancets*	2	
MONOJECTOR END CAPS MISC *lancets misc.*	2	
MONOJECTOR OPD END CAPS MISC *lancets misc.*	2	
MONOLET LANCETS MISC *lancets*	2	
MONOLET OPD LANCETS MISC *lancets*	2	
MONOLETTOR SAFETY LANCETS MISC *lancets*	2	
MPD SAFETY LANCET 21G MISC *lancets*	2	
MPD SAFETY LANCET 23G MISC *lancets*	2	
MPD SAFETY LANCET 28G MISC *lancets*	2	
MPD SAFETY LANCET 30G MISC *lancets*	2	
MULTI-LANCET DEVICE MISC *lancet devices*	2	
MULTI-LANCET DEVICE 2 KIT *lancets misc.*	2	
MYGLUCOHEALTH LANCETS 30G MISC *lancets*	2	
NOVA SAFETY LANCETS 23G MISC *lancets*	2	
NOVA SAFETY LANCETS 28G MISC *lancets*	2	
NOVA SUREFLEX LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVA SUREFLEX LANCING DEVICE MISC *lancet devices*	2	
ON CALL LANCETS MISC *lancets*	2	
ON CALL LANCING DEVICE MISC *lancet devices*	2	
ON CALL PLUS LANCETS MISC *lancets*	2	
ON CALL PLUS LANCING DEVICE MISC *lancet devices*	2	
ONETOUCH CLUB LANCETS FINE PT MISC *lancets*	2	
ONETOUCH DELICA LANCETS 30G MISC *lancets*	2	
ONETOUCH DELICA LANCETS 33G MISC *lancets*	2	
ONETOUCH DELICA LANCING DEV MISC *lancet devices*	2	
ONETOUCH DELICA PLUS LANCET30G MISC *lancets*	2	
ONETOUCH DELICA PLUS LANCET33G MISC *lancets*	2	
ONETOUCH DELICA PLUS LANCING MISC *lancet devices*	2	
ONETOUCH FINEPOINT LANCETS MISC *lancets*	2	
ONETOUCH SURESOFT LANCING DEV MISC *lancets misc.*	2	
ONETOUCH ULTRASOFT LANCETS MISC *lancets*	2	
PARADIGM REAL-TIME STARTER KIT *continuous blood glucose monitor supplies*	3	
PC LANCETS SUPER THIN 30G MISC *lancets*	2	
PENLET II BLOOD SAMPLER KIT *lancets misc.*	2	
PENLET II REPLACEMENT CAP MISC *lancets misc.*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PERFECT LANCETS 28G MISC *lancets*	2	
PERFECT LANCETS 30G MISC *lancets*	2	
PHARMACIST CHOICE LANCETS MISC *lancets*	2	
PHARMACY COUNTER LANCETS MISC *lancets*	2	
PIP LANCETS 28G MISC *lancets*	2	
PIP LANCETS 30G MISC *lancets*	2	
PRECISION THINS GP LANCETS MISC *lancets*	2	
PREFERRED PLUS LANCETS COLORED MISC *lancets*	2	
PREFERRED PLUS LANCETS THIN MISC *lancets*	2	
PRESSURE ACTIVAT SAFETY LANCET MISC *lancets*	2	
PRO COMFORT LANCETS 30G MISC *lancets*	2	
PRO COMFORT LANCETS 31G MISC *lancets*	2	
PRODIGY LANCETS 28G MISC *lancets*	2	
PRODIGY LANCING DEVICE MISC *lancet devices*	2	
PRODIGY SAFETY LANCETS 26G MISC *lancets*	2	
PRODIGY TWIST TOP LANCETS 28G MISC *lancets*	2	
PSS SELECT GP LANCETS MISC *lancets*	2	
PSS SELECT PLATFORMS MISC *lancets misc.*	2	
PSS SELECT SAFETY LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PUSH BUTTON SAFETY LANCETS MISC *lancets*	2	
PUSH BUTTON SAFETY LANCETS 28G MISC *lancets*	2	
PX ADVANCED LANCING DEVICE MISC *lancet devices*	2	
PX LANCET AUTO INJECTOR MISC *lancet devices*	2	
PX LANCETS ULTRA THIN MISC *lancets*	2	
PX LANCETS ULTRA THIN 28G MISC *lancets*	2	
QC ADVANCED LANCING DEVICE MISC *lancet devices*	2	
QC LANCETS SUPER THIN 30G MISC *lancets*	2	
QC LANCETS ULTRA THIN MISC *lancets*	2	
QC UNILET LANCETS 28G MISC *lancets*	2	
QC UNILET LANCETS MICRO THIN MISC *lancets*	2	
RA E-ZJECT COLOR LANCETS 33G MISC *lancets*	2	
RA E-ZJECT LANCETS 28G MISC *lancets*	2	
RA E-ZJECT LANCETS THIN 26G MISC *lancets*	2	
RA E-ZJECT LANCETS THIN 28G MISC *lancets*	2	
RA E-ZJECT LANCETS ULTRA THIN MISC *lancets*	2	
RA LANCING DEVICE MISC *lancet devices*	2	
READYLANCE SAFETY LANCETS MISC *lancets*	2	
REALITY LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REALITY TRIGGER LANCETS MISC *lancets*	2	
RELION LANCET DEVICES 30G MISC *lancet devices*	2	
RELION LANCETS MICRO-THIN 33G MISC *lancets*	2	
RELION LANCETS STANDARD 21G MISC *lancets*	2	
RELION LANCETS THIN 26G MISC *lancets*	2	
RELION LANCETS ULTRA-THIN 30G MISC *lancets*	2	
RELION LANCING DEVICE KIT *lancets misc.*	2	
RELION LANCING DEVICE MISC *lancet devices*	2	
RELION ULTRA THIN LANCETS 30G MISC *lancets*	2	
RELION ULTRA THIN PLUS LANCETS MISC *lancets*	2	
REXALL LANCETS ULTRA THIN 30G MISC *lancets*	2	
RIGHTEST ALTERNATE SITE ADAPT MISC *lancets misc.*	2	
RIGHTEST GD500 LANCING DEVICE MISC *lancet devices*	2	
RIGHTEST GL300 LANCETS MISC *lancets*	2	
SAFE-T-LANCE MISC *lancets*	2	
SAFE-T-LANCE PLUS MISC *lancets*	2	
SAFETY LANCET 21G/PRESSURE ACT MISC *lancets*	2	
SAFETY LANCET 23G/PRESSURE ACT MISC *lancets*	2	
SAFETY LANCET 28G/PRESSURE ACT MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFETY LANCET 30G/PRESSURE ACT MISC *lancets*	2	
SAFETY LANCETS MISC *lancets*	2	
SAFETY LANCETS 21G MISC *lancets*	2	
SAFETY LANCETS 28G MISC *lancets*	2	
SAFETY LET LANCETS MISC *lancets*	2	
SAFETY SEAL LANCETS MISC *lancets*	2	
SAPS HEALTH TWIST TOP LANCETS MISC *lancets*	2	
SAPS TWIST TOP LANCETS MISC *lancets*	2	
SAPSCARE TWIST TOP LANCETS MISC *lancets*	2	
SB LANCETS THIN MISC *lancets*	2	
SB LANCETS ULTRA THIN MISC *lancets*	2	
SELECT-LITE DEVICE/LANCETS KIT *lancets misc.*	2	
SELECT-LITE LANCING DEVICE MISC *lancet devices*	2	
SHOPKO AUTOLET LANCING DEVICE MISC *lancet devices*	2	
SHOPKO ON-THE-GO LANCETS 30G MISC *lancets*	2	
SHOPKO UNILET LANCETS 28G MISC *lancets*	2	
SHOPKO UNILET LANCETS 30G MISC *lancets*	2	
SIDE BUTTON SAFETY LANCET MISC *lancets*	2	
SIMPLE DIAGNOSTICS LANCING DEV MISC *lancet devices*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SINGLE-LET MISC *lancets*	2	
SM LANCETS 33G MISC *lancets*	2	
SM TRUEDRAW LANCING DEVICE MISC *lancet devices*	2	
SMART DIABETES VANTAGE LANCING MISC *lancet devices*	2	
SMART SENSE COLOR LANCETS 33G MISC *lancets*	2	
SMART SENSE STANDARD LANCETS MISC *lancets*	2	
SMART SENSE SUPER THIN LANCETS MISC *lancets*	2	
SMART SENSE THIN LANCETS 26G MISC *lancets*	2	
SMARTEST LANCETS 28G MISC *lancets*	2	
SOF-SENSOR MISC *continuous blood glucose system sensor*	3	AL1 At least 4 yrs old
SOLUS V2 LANCETS 28G MISC *lancets*	2	
SOLUS V2 LANCING DEVICE MISC *lancet devices*	2	
SOLUS V2 TWIST LANCETS 30G MISC *lancets*	2	
STERILANCE PA MISC *lancets misc.*	2	
STERILANCE TL MISC *lancets*	2	
SUPER THIN LANCETS MISC *lancets*	2	
SURE COMFORT LANCETS 18G MISC *lancets*	2	
SURE COMFORT LANCETS 21G MISC *lancets*	2	
SURE COMFORT LANCETS 23G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT LANCETS 28G MISC *lancets*	2	
SURE COMFORT LANCETS 30G MISC *lancets*	2	
SURE COMFORT LANCING PEN MISC *lancet devices*	2	
SURE-LANCE FLAT LANCETS MISC *lancets*	2	
SURE-LANCE LANCETS 26G MISC *lancets*	2	
SURE-LANCE THIN LANCETS 28G MISC *lancets*	2	
SURE-LANCE ULTRA THIN LANCETS MISC *lancets*	2	
SURE-PEN MISC *lancet devices*	2	
SURE-TOUCH LANCETS UNIVERSAL MISC *lancets*	2	
SURELITE LANCETS MISC *lancets*	2	
TECHLITE AST LANCETS MISC *lancets*	2	
TECHLITE LANCETS MISC *lancets*	2	
TECHLITE LANCETS 30G MISC *lancets*	2	
TGT LANCET MICRO THIN 33G MISC *lancets*	2	
TGT LANCET THIN 26G MISC *lancets*	2	
TGT LANCET ULTRA THIN 30G MISC *lancets*	2	
TGT LANCING DEVICE MISC *lancet devices*	2	
THINLETS GP LANCETS MISC *lancets*	2	
TODAYS HEALTH LANCING DEVICE MISC *lancet devices*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TODAYS HEALTH THIN LANCETS 28G MISC *lancets*	2	
TODAYS HEALTH THIN LANCETS 30G MISC *lancets*	2	
TOPCARE LANCETS MICRO-THIN 33G MISC *lancets*	2	
TRAVEL LANCETS MISC *lancets*	2	
TRAVEL LANCETS ADVANCED 28G MISC *lancets*	2	
TRUE COMFORT TWIST TOP LANCETS MISC *lancets*	2	
TRUEDRAW LANCING DEVICE MISC *lancet devices*	2	
TRUEPLUS LANCETS 26G MISC *lancets*	2	
TRUEPLUS LANCETS 28G MISC *lancets*	2	
TRUEPLUS LANCETS 30G MISC *lancets*	2	
TRUEPLUS LANCETS 33G MISC *lancets*	2	
TRUEPLUS SAFETY LANCETS 28G MISC *lancets*	2	
ULTI-LANCE AUTOMATIC MISC *lancet devices*	2	
ULTILET CLASSIC LANCETS MISC *lancets*	2	
ULTILET LANCETS MISC *lancets*	2	
ULTILET SAFETY LANCETS MISC *lancets*	2	
ULTILET SAFETY LANCETS 23G MISC *lancets*	2	
ULTRA THIN LANCETS 31G MISC *lancets*	2	
ULTRA-CARE LANCETS 30G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA-THIN II AUTO LANCET MISC *lancets*	2	
ULTRA-THIN II LANCETS MISC *lancets*	2	
ULTRALANCE MISC *lancets misc.*	2	
UNILET COMFORTOUCH LANCET MISC *lancets*	2	
UNILET EXCELITE MISC *lancets*	2	
UNILET EXCELITE II MISC *lancets*	2	
UNILET G.P. LANCET MISC *lancets*	2	
UNILET G.P. SUPERLITE LANCET MISC *lancets*	2	
UNILET GP 28 ULTRA THIN MISC *lancets*	2	
UNILET LANCET MISC *lancets*	2	
UNILET MICRO-THIN 33G MISC *lancets*	2	
UNILET SUPER-THIN 30G MISC *lancets*	2	
UNILET SUPERLITE LANCET MISC *lancets*	2	
UNILET ULTRA-THIN 28G MISC *lancets*	2	
UNISTIK 1 MISC *lancets misc.*	2	
UNISTIK 2 MISC *lancets misc.*	2	
UNISTIK 2 COMFORT MISC *lancets misc.*	2	
UNISTIK 2 EXTRA MISC *lancets misc.*	2	
UNISTIK 2 NEONATAL MISC *lancets misc.*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNISTIK 2 NORMAL MISC *lancets misc.*	2	
UNISTIK 2 SUPER MISC *lancets misc.*	2	
UNISTIK 3 MISC *lancets misc.*	2	
UNISTIK 3 COMFORT MISC *lancets misc.*	2	
UNISTIK 3 EXTRA MISC *lancets misc.*	2	
UNISTIK 3 GENTLE MISC *lancets*	2	
UNISTIK 3 NEONATAL MISC *lancets misc.*	2	
UNISTIK 3 NORMAL MISC *lancets misc.*	2	
UNISTIK CZT COMFORT MISC *lancets misc.*	2	
UNISTIK CZT NORMAL MISC *lancets misc.*	2	
UNISTIK PRO SAFETY LANCET MISC *lancets*	2	
UNISTIK SAFETY LANCETS 28G MISC *lancets*	2	
UNISTIK SAFETY LANCETS 30G MISC *lancets*	2	
UNISTIK TOUCH SAFETY LANC 21G MISC *lancets*	2	
UNISTIK TOUCH SAFETY LANC 23G MISC *lancets*	2	
UNISTIK TOUCH SAFETY LANC 28G MISC *lancets*	2	
UNISTIK TOUCH SAFETY LANC 30G MISC *lancets*	2	
UNIVERSAL 1 LANCETS THIN 26G MISC *lancets*	2	
UNIVERSAL 1 LANCETS THIN 33G MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNIVERSAL 1 LANCETS ULTRA THIN MISC *lancets*	2	
VALUE PLUS LANCET STANDARD 21G MISC *lancets*	2	
VALUE PLUS LANCETS SUPER THIN MISC *lancets*	2	
VALUE PLUS LANCETS THIN 26G MISC *lancets*	2	
VALUE PLUS LANCING DEVICE MISC *lancet devices*	2	
VALUMARK LANCET SUPER THIN 30G MISC *lancets*	2	
VALUMARK LANCET ULTRA THIN 28G MISC *lancets*	2	
VIDA MIA AUTOLET LANCING DEV MISC *lancet devices*	2	
VIDA MIA UNILET LANCETS 28G MISC *lancets*	2	
VIDA MIA UNILET LANCETS 30G MISC *lancets*	2	
VITALET PRO LANCETS MISC *lancets*	2	
VITALET PRO PLUS LANCETS MISC *lancets*	2	
VIVAGUARD LANCETS MISC *lancets*	2	
VIVAGUARD LANCING DEVICE MISC *lancet devices*	2	
WALGREENS ADV TRAVEL LANCETS MISC *lancets*	2	
WALGREENS LANCETS MISC *lancets*	2	
WALGREENS LANCETS MICRO THIN MISC *lancets*	2	
WALGREENS LANCETS SUPER THIN MISC *lancets*	2	
WALGREENS THIN LANCETS MISC *lancets*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WALGREENS ULTRA THIN LANCETS MISC *lancets*	2	
IMPOTENCE AIDS - MALE		
RAPPORT RLS KIT *impotence aid device*	3	
RAPPORT VTD KIT *impotence aid device*	3	
INSULIN ADMINISTRATION SUPPLIES		
ACCU-CHEK COMBO KIT *insulin infusion pump*	3	
ACCU-CHEK FLEXLINK PLUS 10MM MISC *insulin infusion pump supplies*	3	
ACCU-CHEK FLEXLINK PLUS 6MM MISC *insulin infusion pump supplies*	3	
ACCU-CHEK FLEXLINK PLUS 8MM MISC *insulin infusion pump supplies*	3	
ACCU-CHEK LINKASSIST MISC *insulin infusion pump accessories*	3	
ACCU-CHEK PLASTIC CARTRIDGE MISC *insulin infusion pump supplies*	3	
ACCU-CHEK RAPID-D INFUSION SET MISC *insulin infusion pump supplies*	3	
ACCU-CHEK RAPID-D LINK MISC *insulin infusion pump supplies*	3	
ACCU-CHEK SPIRIT BATTERY KIT MISC *insulin infusion pump accessories*	3	
ACCU-CHEK SPIRIT CARTRIDGE MISC *insulin infusion pump supplies*	3	
ACCU-CHEK SPIRIT INSULIN PUMP KIT *insulin infusion pump*	3	
ACCU-CHEK TENDER I SET 24" MISC *insulin infusion pump supplies*	3	
ACCU-CHEK TENDER I SET 31" MISC *insulin infusion pump supplies*	3	
ACCU-CHEK TENDER I SET 43" MISC *insulin infusion pump supplies*	3	
ACCU-CHEK TENDER II SET 24" MISC *insulin infusion pump supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACCU-CHEK TENDER II SET 31" MISC *insulin infusion pump supplies*	3	
ACCU-CHEK TENDER II SET 43" MISC *insulin infusion pump supplies*	3	
ACCU-CHEK ULTRAFLEX INF SET MISC *insulin infusion pump supplies*	3	
ACCU-CHEK ULTRAFLEX-1 INF SET MISC *insulin infusion pump supplies*	3	
ANIMAS VIBE INSULIN PUMP KIT *insulin infusion pump*	3	
AUTOSOFT 30 INFUSION SET MISC *insulin infusion pump supplies*	3	
AUTOSOFT 90 INFUSION SET MISC *insulin infusion pump supplies*	3	
AUTOSOFT XC INFUSION SET MISC *insulin infusion pump supplies*	3	
CARTRIDGE IR 1000 3ML MISC *insulin infusion pump supplies*	1	
CARTRIDGE IR 1200 MISC *insulin infusion pump supplies*	1	
CARTRIDGE PUMP MISC *insulin infusion pump supplies*	1	
CLEO 90 INFUSION SET 24"/6MM MISC *insulin infusion pump supplies*	3	
CLEO 90 INFUSION SET 24"/9MM MISC *insulin infusion pump supplies*	3	
CLEO 90 INFUSION SET 31"/6MM MISC *insulin infusion pump supplies*	3	
CLEO 90 INFUSION SET 31"/9MM MISC *insulin infusion pump supplies*	3	
COMFORT INFUSION SET 23"/17MM MISC *insulin infusion pump supplies*	3	
COMFORT INFUSION SET 31"/17MM MISC *insulin infusion pump supplies*	3	
COMFORT INFUSION SET 32"/17MM MISC *insulin infusion pump supplies*	3	
COMFORT INFUSION SET 43"/17MM MISC *insulin infusion pump supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT SHORT INF SET 23"/13MM MISC *insulin infusion pump supplies*	3	
COMFORT SHORT INF SET 31"/13MM MISC *insulin infusion pump supplies*	3	
COMFORT SHORT INF SET 32"/13MM MISC *insulin infusion pump supplies*	3	
COMFORT SHORT INF SET 43"/13MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 23" 6MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 23" 8MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 23"/6MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 23"/8MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 32"/6MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 32"/8MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 43" 6MM MISC *insulin infusion pump supplies*	3	
CONTACT DETACH INF SET 43" 8MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 24" 6MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 24" 9MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 31" 6MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 31" 9MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 42" 6MM MISC *insulin infusion pump supplies*	3	
DELTEC COZMO CLEO SET 42" 9MM MISC *insulin infusion pump supplies*	3	
ENLITE SERTER MISC *insulin infusion pump supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSET 30 INFUSION SET 23" MISC *insulin infusion pump supplies*	3	
INSET 30 INFUSION SET 43" MISC *insulin infusion pump supplies*	3	
INSET INFUSION SET 23" 6MM MISC *insulin infusion pump supplies*	3	
INSET INFUSION SET 23" 9MM MISC *insulin infusion pump supplies*	3	
INSET INFUSION SET 43" 6MM MISC *insulin infusion pump supplies*	3	
INSET INFUSION SET 43" 9MM MISC *insulin infusion pump supplies*	3	
INSULIN PUMP IR2020 KIT *insulin infusion pump*	1	
MINILINK REAL-TIME REPLACEMENT KIT *insulin infusion pump accessories*	3	
MINILINK REAL-TIME TRANSMITTER MISC *insulin infusion pump accessories*	3	
MINILINK-REAL-TIME STARTER KIT *insulin infusion pump accessories*	3	
MINIMED 530G INSULIN PUMP DEVICE *insulin infusion pump*	3	
MINIMED 670G INSULIN PUMP DEVICE *insulin infusion pump*	3	
MINIMED PUMP RESERVOIR 3ML MISC *insulin infusion pump supplies*	3	
MIO INFUSION SET 18" 6MM MISC *insulin infusion pump supplies*	3	
MIO INFUSION SET 23" 6MM MISC *insulin infusion pump supplies*	3	
MIO INFUSION SET 32" 6MM MISC *insulin infusion pump supplies*	3	
MIO INFUSION SET 32" 9MM MISC *insulin infusion pump supplies*	3	
OMNIPOD 10 PACK MISC *insulin infusion disposable pump*	3	
OMNIPOD 5 PACK MISC *insulin infusion disposable pump*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNIPOD DASH 5 PACK PODS MISC *insulin infusion disposable pump*	3	
OMNIPOD DASH SYSTEM KIT *insulin infusion disposable pump*	3	
OMNIPOD STARTER KIT *insulin infusion disposable pump*	3	
ONETOUCH PING INSULIN PUMP KIT *insulin infusion pump*	3	
PARADIGM INSULIN PUMP DEVICE *insulin infusion pump*	3	
PARADIGM INSULIN PUMP PED DEVICE *insulin infusion pump*	3	
PARADIGM PATHWAY UPGRADE MISC *insulin infusion pump accessories*	3	
PARADIGM POLYFIN QR/WINGS 24" MISC *insulin infusion pump supplies*	3	
PARADIGM POLYFIN QR/WINGS 42" MISC *insulin infusion pump supplies*	3	
PARADIGM PUMP RESERVOIR 1.8ML MISC *insulin infusion pump supplies*	3	
PARADIGM PUMP RESERVOIR 3ML MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 18" 6MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 23" 6MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 23" 9MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 32" 6MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 32" 9MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 43" 6MM MISC *insulin infusion pump supplies*	3	
PARADIGM QUICK-SET 43" 9MM MISC *insulin infusion pump supplies*	3	
PARADIGM REAL-TIME TRANSMITTER MISC *insulin infusion pump accessories*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARADIGM REVEL INSULIN PUMP DEVICE *insulin infusion pump*	3	
PARADIGM SILHOUETTE 18" 13MM MISC *insulin infusion pump supplies*	3	
PARADIGM SILHOUETTE 32" 17MM MISC *insulin infusion pump supplies*	3	
PARADIGM SILHOUETTE COMBO 23" MISC *insulin infusion pump supplies*	3	
PARADIGM SILHOUETTE COMBO 43" MISC *insulin infusion pump supplies*	3	
PARADIGM SILHOUETTE FULL 23" MISC *insulin infusion pump supplies*	3	
PARADIGM SILHOUETTE FULL 43" MISC *insulin infusion pump supplies*	3	
PARADIGM SOF-SET MICRO QR 24" MISC *insulin infusion pump supplies*	3	
PARADIGM SOF-SET MICRO QR 42" MISC *insulin infusion pump supplies*	3	
PARADIGM SOF-SET ULT QR 24" MISC *insulin infusion pump supplies*	3	
PARADIGM SOF-SET ULT QR 42" MISC *insulin infusion pump supplies*	3	
PARADIGM SURE-T 23" 6MM MISC *insulin infusion pump supplies*	3	
PARADIGM SURE-T 23" 8MM MISC *insulin infusion pump supplies*	3	
POLYFIN INFUSION SET 24" MISC *insulin infusion pump supplies*	3	
POLYFIN INFUSION SET 42" MISC *insulin infusion pump supplies*	3	
POLYFIN QR INFUSION SET 24" MISC *insulin infusion pump supplies*	3	
POLYFIN QR INFUSION SET 42" MISC *insulin infusion pump supplies*	3	
POLYFIN TUBING SET 60" MISC *insulin infusion pump supplies*	3	
QUICK-SET INFUSION 23" 6MM MISC *insulin infusion pump supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUICK-SET INFUSION 23" 9MM MISC *insulin infusion pump supplies*	3	
QUICK-SET INFUSION 43" 6MM MISC *insulin infusion pump supplies*	3	
QUICK-SET INFUSION 43" 9MM MISC *insulin infusion pump supplies*	3	
SILHOUETTE 13MM MISC *insulin infusion pump supplies*	3	
SILHOUETTE 17MM MISC *insulin infusion pump supplies*	3	
SILHOUETTE INFUSION SET 23" MISC *insulin infusion pump supplies*	3	
SILHOUETTE INFUSION SET 43" MISC *insulin infusion pump supplies*	3	
SOF-SET INFUSION SET 24" MISC *insulin infusion pump supplies*	3	
SOF-SET INFUSION SET 42" MISC *insulin infusion pump supplies*	3	
SOF-SET MICRO QR INFUSION 24" MISC *insulin infusion pump supplies*	3	
SOF-SET MICRO QR INFUSION 42" MISC *insulin infusion pump supplies*	3	
SOF-SET ULTIMATE QR 24" MISC *insulin infusion pump supplies*	3	
SOF-SET ULTIMATE QR 42" MISC *insulin infusion pump supplies*	3	
SURE-T INFUSION SET 18" MISC *insulin infusion pump supplies*	3	
SURE-T INFUSION SET 23" MISC *insulin infusion pump supplies*	3	
SURE-T INFUSION SET 32" MISC *insulin infusion pump supplies*	3	
SURE-T INFUSION SET 6MM MISC *insulin infusion pump supplies*	3	
SURE-T INFUSION SET 8MM MISC *insulin infusion pump supplies*	3	
T:30 INFUSION SET MISC *insulin infusion pump supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
T:90 INFUSION SET MISC *insulin infusion pump supplies*	3	
T:FLEX INSULIN CARTRIDGE 4.8ML MISC *insulin infusion pump supplies*	3	
T:FLEX INSULIN PUMP DEVICE *insulin infusion pump*	3	
T:FLEX T:LOCK CARTRIDGE 4.8ML MISC *insulin infusion pump supplies*	3	
T:SLIM G4 INSULIN CARTRIDGE MISC *insulin infusion pump supplies*	3	
T:SLIM G4 INSULIN PUMP DEVICE *insulin infusion pump*	3	
T:SLIM INSULIN CARTRIDGE 3ML MISC *insulin infusion pump supplies*	3	
T:SLIM INSULIN DELIVERY SYSTEM DEVICE *insulin infusion pump*	3	
T:SLIM INSULIN PUMP DEVICE *insulin infusion pump*	3	
T:SLIM T:LOCK INSULIN CART 3ML MISC *insulin infusion pump supplies*	3	
T:SLIM X2 DEVICE *insulin infusion pump*	3	
T:SLIM X2 INS PUMP/CONTROL-IQ DEVICE *insulin infusion pump*	3	
T:SLIM X2 INSULIN PMP BASAL IQ DEVICE *insulin infusion pump*	3	
T:SLIM X2 INSULIN PMP/RFURB IQ DEVICE *insulin infusion pump*	3	
T:SLIM X2 INSULIN PUMP DEVICE *insulin infusion pump*	3	
T:SLIM X2 INSULIN PUMP/REFURB DEVICE *insulin infusion pump*	3	
T:SLIM X2/CONTROL-IQ/REFURB DEVICE *insulin infusion pump*	3	
TRUSTEEL INFUSION SET MISC *insulin infusion pump supplies*	3	
V-GO 20 KIT *insulin infusion disposable pump*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
V-GO 30 KIT *insulin infusion disposable pump*	3	
V-GO 40 KIT *insulin infusion disposable pump*	3	
VARISOFT INFUSION SET MISC *insulin infusion pump supplies*	3	
IV SETS/TUBING		
ACCU-CHEK TENDER 1 INFUSION KIT *iv sets/tubing*	3	
INFUSION SET MISC *iv sets/tubing*	1	
INFUSION SET 23" MISC *iv sets/tubing*	1	
INFUSION SET 23" 10MM MISC *iv sets/tubing*	1	
INFUSION SET 23" 8MM MISC *iv sets/tubing*	1	
INFUSION SET 23" COMFORT MISC *iv sets/tubing*	1	
INFUSION SET 24" 6MM MISC *iv sets/tubing*	1	
INFUSION SET 42" 6MM MISC *iv sets/tubing*	1	
INFUSION SET 42" 9MM MISC *iv sets/tubing*	1	
INFUSION SET 43" MISC *iv sets/tubing*	1	
INFUSION SET 43" 10MM MISC *iv sets/tubing*	1	
MASKS		
FACE MASK EARLOOP-STYLE MISC *masks*	3	
FACE MASK RESP N-100 PART MISC *masks*	1	
FACE MASK RESPIRATOR R-95 PART MISC *masks*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDICAL WASTE DISPOSAL SYSTEMS		
SHARPS CONTAINER MISC *sharps container*	1	
MISC. DEVICES		
ADAPTER CAP MISC *misc. devices*	1	
ADD-VANTAGE ADDAPTOR CONNECTOR MISC *misc. devices*	3	
ALPHAMOP FOAM REPLACEMENT PADS MISC *misc. devices*	3	
ALUMINUM FLIP OFF SEALS 13MM MISC *misc. devices*	1	
ALUMINUM FLIP OFF SEALS 20MM MISC *misc. devices*	1	
AMBER GLASS BOTTLE MISC *misc. devices*	1	
AMBER GLASS VIALS 2ML MISC *misc. devices*	1	
AMBER GLASS VIALS 2ML/13MM MISC *misc. devices*	1	
AMBER GLASS VIALS 30ML/20MM MISC *misc. devices*	1	
AUTOCLAVE AIR FILTER MISC *misc. devices*	3	
AUTOCLAVE PAPER 36" X 36" MISC *misc. devices*	1	
AUTOCLAVE PRINTER PAPER MISC *misc. devices*	3	
BLISTER PACK ADHESIVE LABEL MISC *misc. devices*	1	
BLISTER PACK-AMBER 12 CAVITY MISC *misc. devices*	1	
BOTTLE AMBER GLASS 33OZ MISC *misc. devices*	1	
BOTTLE AMBER GRADUATED 16OZ MISC *misc. devices*	1	
BOTTLE AMBER GRADUATED 8OZ MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOTTLE/WHITE 6OZ W/TWIST TOP MISC *misc. devices*	1	
BOTTLETOP DISPENSER MISC *misc. devices*	1	
BOTTLETOP DISPENSER ADAPTER MISC *misc. devices*	1	
BUBBLE POINT TESTER KIT/WIZARD MISC *misc. devices*	1	
CLEANROOM TACKY MAT 18"X36" MISC *misc. devices*	1	
CLEAR GLASS VIAL 10ML MISC *misc. devices*	1	
CLEAR GLASS VIALS 2ML MISC *misc. devices*	1	
COMAR PRESS-IN BOTTLE ADAPTERS MISC *misc. devices*	3	
COVERALL BOOTS/DISPOSABLE/UNIV MISC *misc. devices*	1	
COVERALL W/HOOD/3XL MISC *misc. devices*	1	
COVERALL W/HOOD/SMALL MISC *misc. devices*	1	
COVERALL W/HOOD/XL MISC *misc. devices*	1	
COVERALL W/HOOD/XXL MISC *misc. devices*	1	
COVERALLS ELAST BACK/WRST/ANKL MISC *misc. devices*	1	
DEODORANT TUBES 2.65OZ-CAPS MISC *misc. devices*	1	
DIAL-A-DOSE SYRINGE 15ML MISC *misc. devices*	3	
DIAL-A-DOSE SYRINGE 30ML MISC *misc. devices*	3	
DIAL-A-DOSE SYRINGE 60ML MISC *misc. devices*	3	
DISPENSER 50ML/FOAMER PUMP MISC *misc. devices*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DISPENSER MD JAR 50ML MISC *misc. devices*	3	
DISPENSER MD PEN 6.5ML MISC *misc. devices*	3	
DISPENSER MD PUMP 0.5ML MISC *misc. devices*	3	
DISPENSER MD PUMP 1.0ML MISC *misc. devices*	3	
DISPENSER MD PUMP 1.5ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 100ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 150ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 15ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 200ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 240ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 30ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 50ML MISC *misc. devices*	3	
DISPENSER MD PUMP BOTTLE 80ML MISC *misc. devices*	3	
DISPENSER MD SYRINGE 10ML MISC *misc. devices*	3	
DISPENSER MD SYRINGE 5ML MISC *misc. devices*	3	
DISPENSER MEGAPUMP AIRLESS MISC *misc. devices*	3	
DISPENSER MEGAPUMP MEZZO RND MISC *misc. devices*	3	
DISPENSER TIP CAP/PRECISEDOSE MISC *misc. devices*	3	
DISPENSER/MD FOAMER MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOPRTAINERS 10ML MISC *misc. devices*	3	
DROPPER & SCREW CAP 4OZ MISC *misc. devices*	3	
DROPPING BOTTLE 30ML MISC *misc. devices*	1	
DROPTAINERS OPHTHALMIC 15ML MISC *misc. devices*	3	
DROPTAINERS OPHTHALMIC 3ML MISC *misc. devices*	3	
DROPTAINERS OPHTHALMIC 7ML MISC *misc. devices*	3	
ECO-SMARTFUNNEL 186ML MISC *misc. devices*	3	
EMPTY VIAL 3ML MISC *misc. devices*	1	
FILTER 0.2 MICRON/25MM MISC *misc. devices*	1	
FILTER 0.2 MICRON/32MM MISC *misc. devices*	1	
FILTER 0.2 MICRON/47MM MISC *misc. devices*	1	
FILTER 0.22 MICRON/73MM/1000ML MISC *misc. devices*	1	
FILTER ATTACHMENT MISC *misc. devices*	1	
FILTER FLUORODYNE/0.22 MICRON MISC *misc. devices*	3	
FILTER/MILLEX-GP/50MM/CLEAR MISC *misc. devices*	3	
FOAM RING 2" MISC *misc. devices*	1	
FOIL WRAPPER 3" X 3" MISC *misc. devices*	3	
GLASS BOTTLE 15ML MISC *misc. devices*	1	
GLASS BOTTLE 30ML MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLASS BOTTLE 30ML/BRUSH CAP MISC *misc. devices*	1	
GLASS BOTTLE 30ML/PHENOLIC CAP MISC *misc. devices*	1	
GLASS BOTTLE 60ML MISC *misc. devices*	1	
GLASS SERUM BOTTLES 20ML MISC *misc. devices*	1	
GLASS SERUM BOTTLES 2ML MISC *misc. devices*	1	
GLASS SERUM BOTTLES 30ML MISC *misc. devices*	1	
GLASS SERUM BOTTLES 5ML MISC *misc. devices*	1	
GLASS VIAL 2ML MISC *misc. devices*	1	
GLASS VIAL AMBER 3ML MISC *misc. devices*	1	
GRADUATED BOTTLE 2OZ MISC *misc. devices*	1	
GRADUATED BOTTLE 4OZ MISC *misc. devices*	1	
HEAD COVERS 24" MISC *misc. devices*	1	
ILLUSIONS AA BREAST PROSTHESIS MISC *misc. devices*	3	
ILLUSIONS C BREAST PROSTHESIS MISC *misc. devices*	3	
INDICATOR/BIOLOGICAL TEST KIT *misc. devices*	3	
INHALATION VIAL CAP/BLUE MISC *misc. devices*	1	
INHALATION VIAL CAP/GREEN MISC *misc. devices*	1	
INHALATION VIAL CAP/ORANGE MISC *misc. devices*	1	
INHALATION VIAL CAP/RED MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INHALATION VIAL CAP/WHITE MISC *misc. devices*	1	
INHALATION VIAL CAP/YELLOW MISC *misc. devices*	1	
INHALATION VIAL W/ CAP/ORANGE MISC *misc. devices*	1	
INHALATION VIAL W/CAP/BLUE MISC *misc. devices*	1	
INHALATION VIAL W/CAP/GREEN MISC *misc. devices*	1	
INHALATION VIAL W/CAP/RED MISC *misc. devices*	1	
INHALATION VIAL W/CAP/WHITE MISC *misc. devices*	1	
INHALATION VIAL W/CAP/YELLOW MISC *misc. devices*	1	
INHALATION VIAL W/O CAP/AMBER MISC *misc. devices*	1	
INHALATION WORK STAT/50 HOLES MISC *misc. devices*	1	
JAR/8OZ/WHITE LID MISC *misc. devices*	1	
JUG AMBER GLASS 4L MISC *misc. devices*	1	
LAB COAT-DISPOSABLE LARGE MISC *misc. devices*	1	
LAB COAT-DISPOSABLE MEDIUM MISC *misc. devices*	1	
LAB COAT-DISPOSABLE SMALL MISC *misc. devices*	1	
LAB COAT-DISPOSABLE XL MISC *misc. devices*	1	
LAB COAT-DISPOSABLE XXL MISC *misc. devices*	1	
LUER TIP CAP TRAY MISC *misc. devices*	3	
MAZERUSTAR MIXER/MIX CONTAINER MISC *misc. devices*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDI-RDT BLISTER PACKS MISC *misc. devices*	3	
METERED NASAL SPRAY PUMP 15ML MISC *misc. devices*	1	
MINI MALLET 3/4" PLASTIC MISC *misc. devices*	3	
MIXER/MAZERUSTAR EMP JAR ADP MISC *misc. devices*	1	
MIXER/MAZERUSTAR KK-300SS MISC *misc. devices*	1	
MIXER/MAZERUSTAR KK-400W MISC *misc. devices*	1	
MIXER/MAZERUSTAR MD PUMP ADP MISC *misc. devices*	1	
MIXER/MAZERUSTAR/JAR ADP SET MISC *misc. devices*	1	
MIXER/MAZERUSTAR/JAR MXING ADP MISC *misc. devices*	1	
NAIL POLISH BOTTLE/BRUSH 15ML MISC *misc. devices*	3	
NASAL SPRAY METERED PUMP MISC *misc. devices*	3	
OINTMENT TUBE/METAL 1OZ MISC *misc. devices*	1	
OINTMENT TUBE/METAL 2OZ MISC *misc. devices*	1	
OINTMENT TUBE/METAL 4OZ MISC *misc. devices*	1	
OINTMENT TUBE/OPHTH TIP 1/8OZ MISC *misc. devices*	1	
OINTMENT TUBE/PLASTIC 1OZ MISC *misc. devices*	1	
OINTMENT TUBE/PLASTIC 2OZ MISC *misc. devices*	1	
OINTMENT TUBE/PLASTIC 4OZ MISC *misc. devices*	1	
OINTMENT TUBE/PLASTIC 6OZ MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OINTMENT TUBE/PLASTIC 8OZ MISC *misc. devices*	1	
PH ACCESSORIES STORAGE SOL MISC *misc. devices*	3	
PILLGUARD DISPENSER MISC *misc. devices*	3	
PILLGUARD REFILL CARTRIDGE MISC *misc. devices*	3	
PLASTIC BOTTLES 30ML MISC *misc. devices*	1	
PLASTIC BOTTLES 90ML MISC *misc. devices*	1	
PLASTIC ENEMA BOTTLE MISC *misc. devices*	1	
PLASTIC JAR 6OZ MISC *misc. devices*	1	
PLASTIC SCOOP 1ML MISC *misc. devices*	1	
POCKET PRO+ REPLACEMENT SENSOR MISC *misc. devices*	3	
POLYPROPYLENE CAP-LINER MISC *misc. devices*	1	
POSIDYNE ELD FILTER/0.2UM MISC *misc. devices*	3	
PRESS-IN BOTTLE ADAPTERS MISC *misc. devices*	1	
REFLECTIONS AA BREAST PROSTHES MISC *misc. devices*	3	
REFLECTIONS C BREAST PROSTHES MISC *misc. devices*	3	
SAFE-SENSE HEAD COVER CIRC 21" MISC *misc. devices*	3	
SERUM BOTTLE MISC *misc. devices*	1	
SERUM BOTTLE STOPPER 20MM MISC *misc. devices*	1	
SERUM BOTTLES/AMBER GLASS 20ML MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SERUM BOTTLES/AMBER GLASS 30ML MISC *misc. devices*	1	
SETTLING PLATE SDA/29ML/100X15 MISC *misc. devices*	1	
SETTLING PLATE TSA/25ML/100X15 MISC *misc. devices*	1	
SHAPERS LAYERED BREAST SHAPER MISC *misc. devices*	3	
SNAP-ON CHLOROBUTYL STOPPER MISC *misc. devices*	1	
SPRAY APPLICATOR KIT MISC *misc. devices*	1	
SPRAY BOTTLE/PLASTIC 120ML MISC *misc. devices*	3	
STIRRING ROD/GLASS 12X1/4" MISC *misc. devices*	1	
STRAINER/STAINLESS STEEL/2.5" MISC *misc. devices*	1	
SUPPOSISTRIP MOLD 1.4GM MISC *misc. devices*	3	
SUPPOSISTRIP MOLD 1.9GM MISC *misc. devices*	3	
SUPPOSITORY MOLD MISC *misc. devices*	1	
SUPPOSITORY MOLD/ALUMINUM 2 GM MISC *misc. devices*	1	
SUPPOSITORY SHELL MED 2.25GM MISC *misc. devices*	1	
SUPPOSITORY SHELL RACK MISC *misc. devices*	1	
SUPPOSITORY SHELL SMALL 1.46GM MISC *misc. devices*	1	
SUPPOSITORY SHELLS 2.0 ML MISC *misc. devices*	1	
SUPPOSITORY SHELLS 2.4ML MISC *misc. devices*	1	
SYRINGE DIAL-A-DOSE MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAP-N-CLICK SILICONE PAD MISC *misc. devices*	3	
TIP CAPS MISC *misc. devices*	1	
TIP RECTAL/VAG W/PERFORATIONS MISC *misc. devices*	1	
TOPI-CLICK APPLICATOR MISC *misc. devices*	3	
TOPI-CLICK APPLICATOR MICRO MISC *misc. devices*	3	
TOPI-CLICK NOZZLE MISC *misc. devices*	3	
TOPI-CLICK PERL APPLICATOR 4ML MISC *misc. devices*	3	
TOPI-CLICK PERL DOSE LOAD 35ML MISC *misc. devices*	3	
TOPI-CLICK PERL VAGINAL DOSING MISC *misc. devices*	3	
TROCHE MOLD 30 CAVITY MISC *misc. devices*	3	
TYVEK PROTECTIVE SLEEVES MISC *misc. devices*	3	
UNGUATOR 100/200/57MM MISC *misc. devices*	3	
UNGUATOR 15/20/30/36MM MISC *misc. devices*	3	
UNGUATOR 50/43MM/DISP BLADES MISC *misc. devices*	3	
UNGUATOR APPLICATOR 1"-SHORT MISC *misc. devices*	3	
UNGUATOR APPLICATOR 2.5"-LONG MISC *misc. devices*	3	
UNGUATOR EXACTDOSE 0.5ML MISC *misc. devices*	3	
UNGUATOR JAR 100/140 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 100/140 RED LID MISC *misc. devices*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNGUATOR JAR 15/20 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 15/20 GREEN LID MISC *misc. devices*	3	
UNGUATOR JAR 15/20 RED LID MISC *misc. devices*	3	
UNGUATOR JAR 15/28 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 20/33 BLUE MISC *misc. devices*	3	
UNGUATOR JAR 20/33 RED LID MISC *misc. devices*	3	
UNGUATOR JAR 20/33 WHITE MISC *misc. devices*	3	
UNGUATOR JAR 200/280 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 200/280 GREEN LID MISC *misc. devices*	3	
UNGUATOR JAR 200/280 RED LID MISC *misc. devices*	3	
UNGUATOR JAR 200/280 WHITE MISC *misc. devices*	3	
UNGUATOR JAR 30/42 BLUE MISC *misc. devices*	3	
UNGUATOR JAR 30/42 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 30/42 GREEN LID MISC *misc. devices*	3	
UNGUATOR JAR 30/42 RED LID MISC *misc. devices*	3	
UNGUATOR JAR 30/42 TURQUOISE MISC *misc. devices*	3	
UNGUATOR JAR 30/42 WHITE LID MISC *misc. devices*	3	
UNGUATOR JAR 30/42 YELLOW MISC *misc. devices*	3	
UNGUATOR JAR 50/70 BLUE MISC *misc. devices*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNGUATOR JAR 50/70 BLUE LID MISC *misc. devices*	3	
UNGUATOR JAR 50/70 GREEN LID MISC *misc. devices*	3	
UNGUATOR JAR 50/70 PINK MISC *misc. devices*	3	
UNGUATOR JAR 50/70 RED LID MISC *misc. devices*	3	
UNGUATOR JAR 50/70 TURQUOISE MISC *misc. devices*	3	
UNGUATOR JAR 50/70 WHITE LID MISC *misc. devices*	3	
UNGUATOR JAR 50/70 YELLOW MISC *misc. devices*	3	
UNGUATOR JAR AIRDYNAMIK MISC *misc. devices*	3	
UNGUATOR JAR W/SPINDLE 300/390 MISC *misc. devices*	3	
UNGUATOR JAR W/SPINDLE 500/600 MISC *misc. devices*	3	
UNGUATOR LID 1000ML MISC *misc. devices*	3	
UNGUATOR LID 500ML MISC *misc. devices*	3	
UNGUATOR VARIONOZZLE 1MM MISC *misc. devices*	3	
UNGUATOR VARIONOZZLE 4MM MISC *misc. devices*	3	
UNIVERSAL SLEEVE COVERS MISC *misc. devices*	1	
VAGINAL SUPPOSITORY APPLICATOR MISC *misc. devices*	1	
VARITHENA ADMINISTRATION PACK MISC *misc. devices*	3	
VIRAGE CUSTOM BREAST PROSTHES MISC *misc. devices*	3	
WEIGH BOAT MISC *misc. devices*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NASAL NEBULIZERS		
PARI SINUSTAR DELIVERY SYSTEM MISC *nasal nebulizers*	3	
PARI SINUSTAR NASAL NEBULIZER MISC *nasal nebulizers*	3	
NEBULIZERS		
EFLOW SCF ELECTRONIC NEBULIZER MISC *nebulizers*	3	
EFLOW SCF NEBULIZER HANDSET MISC *nebulizers*	3	
MINI COMPRESSOR MISC *nebulizers*	3	
PARI ALTERA NEBULIZER SYSTEM MISC *nebulizers*	3	
PARI BABY SIZE 1/PARI LC PLUS DEVICE *nebulizers*	3	
PARI ERAPID NEBULIZER SYSTEM MISC *nebulizers*	3	
PARI LC D NEBULIZER MISC *nebulizers*	3	
PARI LC PLUS NEB SET PED MASK MISC *nebulizers*	3	
PARI LC PLUS NEBULIZER MISC *nebulizers*	3	
PARI LC PLUS VIOS PRO NEB MISC *nebulizers*	3	
PARI LC SPRINT NEBULIZER SET MISC *nebulizers*	3	
PARI LC STAR NEBULIZER MISC *nebulizers*	3	
PARI PRONEB ULTRA II MISC *nebulizers*	3	
PARI SINUS AEROSOL SYSTEM MISC *nebulizers*	3	
PARI TREK S W/12V DC ADAPTOR DEVICE *nebulizers*	3	
PARI VIOS PRO LC PLUS SYSTEM MISC *nebulizers*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARI VIOS PRO LC SPRINT SYSTEM MISC *nebulizers*	3	
PRONEB ULTRA II DELUXE/LC STAR MISC *nebulizers*	3	
PRONEB ULTRA II DELUXE/LCD DEVICE *nebulizers*	3	
PRONEB ULTRA II DELX/LC SPRINT DEVICE *nebulizers*	3	
PRONEB ULTRA II PEDIATRIC DEVICE *nebulizers*	3	
PRONEB ULTRA II/LC PLUS DEVICE *nebulizers*	3	
PRONEB ULTRA II/LC SPRINT MISC *nebulizers*	3	
PULMONEB LT MISC *nebulizers*	2	
VIOS AEROSOL DELIVERY SYSTEM MISC *nebulizers*	3	
VIOS LC PLUS MISC *nebulizers*	3	
VIOS LC PLUS DELUXE MISC *nebulizers*	3	
VIOS LC PLUS PEDIATRIC MISC *nebulizers*	3	
VIOS LC SPRINT MISC *nebulizers*	3	
VIOS LC SPRINT DELUXE MISC *nebulizers*	3	
VIOS LC SPRINT PEDIATRIC MISC *nebulizers*	3	
NEEDLES & SYRINGES		
1ST TIER UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
1ST TIER UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS 32G X 6 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS 33G X 4 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 29G X 12MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
1ST TIER UNIFINE PENTIPS PLUS 33G X 4 MM MISC *insulin pen needle*	2	
ABOUTTIME PEN NEEDLE 30G X 8 MM MISC *insulin pen needle*	2	
ABOUTTIME PEN NEEDLE 31G X 5 MM MISC *insulin pen needle*	2	
ABOUTTIME PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	
ABOUTTIME PEN NEEDLE 32G X 4 MM MISC *insulin pen needle*	2	
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
ADVOCATE INSULIN PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVOCATE INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ADVOCATE INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ALLERGIST PACKAGE 26G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 26G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 26G X 3/8" 1 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 27G X 1/2" 0.5 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 27G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 27G X 3/8" 0.5 ML KIT *tuberculin/allergy syringes*	2	
ALLERGIST TRAY 27G X 3/8" 1 ML KIT *tuberculin/allergy syringes*	2	
ALLERGY SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
ALLERGY SYRINGE 27G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
ANESTHESIA NEEDLE 23GX1-3/8" MISC *needles & syringes*	2	
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASSURE ID SAFETY PEN NEEDLES 30G X 5 MM MISC *insulin pen needle*	2	
ASSURE ID SAFETY PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
ASSURE ID SAFETY PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
AURORA PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
AURORA PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
AURORA PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
AURORA UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
AURORA UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
AUTOJECT 2 MISC *injection device*	2	
AUTOPEN DEVICE *injection device for insulin*	2	
AXILLARY BLOCK NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
AXILLARY BLOCK NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
BARDIA BULB IRRIGATION SYRINGE 60 ML MISC *syringe (disposable)*	2	
BARDIA PISTON IRRIGATION SYR 60 ML MISC *syringe (disposable)*	2	
BD ALLERGY SYRINGE 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
BD AUTOSHIELD 29G X 5MM MISC *insulin pen needle*	2	
BD AUTOSHIELD 29G X 8MM MISC *insulin pen needle*	2	
BD AUTOSHIELD DUO 30G X 5 MM MISC *insulin pen needle*	2	
BD BLUNT FILL NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD BLUNT FILTER NEEDLE 18G X 1-1/2" MISC *needle (reusable) 18 g*	2	
BD DISP NEEDLE 22G X 3/4" MISC *needle (disp) 22 g*	2	
BD DISP NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
BD DISP NEEDLE 23G X 1-1/4" MISC *needle (disp) 23 g*	2	
BD DISP NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
BD DISP NEEDLE 27G X 1-1/4" MISC *needle (disp) 27 g*	2	
BD DISP NEEDLE 30G X 1" MISC *needle (disp) 30 g*	2	
BD DISP NEEDLE TW 18G X 1" MISC *needle (disp) 18 g*	2	
BD DISP NEEDLES 16G X 1-1/2" MISC *needle (disp) 16 g*	2	
BD DISP NEEDLES 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
BD DISP NEEDLES 19G X 1" MISC *needle (disp) 19 g*	2	
BD DISP NEEDLES 20G X 1" MISC *needle (disp) 20 g*	2	
BD DISP NEEDLES 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
BD DISP NEEDLES 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
BD DISP NEEDLES 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
BD DISP NEEDLES 25G X 5/8" MISC *needle (disp) 25 g*	2	
BD DISP NEEDLES 25G X 7/8" MISC *needle (disp) 25 g*	2	
BD DISP NEEDLES 27G X 1/2" MISC *needle (disp) 27 g*	2	
BD DISP NEEDLES 30G X 1/2" MISC *needle (disp) 30 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD ECLIPSE NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
BD ECLIPSE NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
BD ECLIPSE NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
BD ECLIPSE NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
BD ECLIPSE NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
BD ECLIPSE NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
BD ECLIPSE NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
BD ECLIPSE NEEDLE 30G X 1/2" MISC *needle (disp) 30 g*	2	
BD ECLIPSE SHIELDED NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
BD ECLIPSE SHIELDED NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
BD ECLIPSE SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD ECLIPSE SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD ECLIPSE SYRINGE 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD ECLIPSE SYRINGE 30G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD FILTER NEEDLE/5 MICRON MISC *needles & syringes*	2	
BD HYPODERMIC NEEDLE 16G X 1" MISC *needle (disp) 16 g*	2	
BD HYPODERMIC NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
BD HYPODERMIC NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
BD HYPODERMIC NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
BD HYPODERMIC NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
BD HYPODERMIC NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
BD HYPODERMIC NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
BD HYPODERMIC NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
BD HYPODERMIC NEEDLE 21G X 2" MISC *needle (disp) 21 g*	2	
BD HYPODERMIC NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
BD HYPODERMIC NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
BD HYPODERMIC NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
BD HYPODERMIC NEEDLE 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
BD HYPODERMIC NEEDLE 23G X 3/4" MISC *needle (disp) 23 g*	2	
BD HYPODERMIC NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
BD HYPODERMIC NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
BD HYPODERMIC NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
BD HYPODERMIC NEEDLE 26G X 1/2" MISC *needle (disp) 26 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD HYPODERMIC NEEDLE 26G X 3/8" MISC *needle (disp) 26 g*	2	
BD HYPODERMIC NEEDLE 26G X 5/8" MISC *needle (disp) 26 g*	2	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 25G X 1" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 25G X 5/8" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 26G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 27.5G X 5/8" 2 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U-100 1 ML MISC *insulin syringes (disposable)*	2	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC *insulin syringe/needle u-500*	2	
BD INSULIN SYRINGE U/F 1/2UNIT 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD INSULIN SYRINGE U/F 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U/F 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE U/F 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD INTEGRA NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
BD INTEGRA NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
BD INTEGRA SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD INTEGRA SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD INTEGRA SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD INTEGRA SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD INTEGRA SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD INTEGRA SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD KLATSKIN BIOPSY NEEDLE 16G X 4" MISC *needle (disp) 16 g*	2	
BD LUER-LOCK SYRINGE 18G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOCK SYRINGE 18G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 18G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 20G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD LUER-LOK SYRINGE 20G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 20G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 21G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 21G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 22G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD LUER-LOK SYRINGE 22G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD LUER-LOK SYRINGE 22G X 3/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 23G X 1-1/4" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD LUER-LOK SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 25G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD LUER-LOK SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD LUER-LOK SYRINGE 26G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD MULTIFIT REUSABLE SYRINGE 3 ML MISC *syringe (reusable)*	2	
BD OSGOOD BIOPSY NEEDLE 16G X 1-5/16" MISC *needle (disp) 16 g*	2	
BD OSGOOD BIOPSY NEEDLE 18G X 1" MISC *needle (reusable) 18 g*	2	
BD PEN MISC *injection device for insulin*	2	
BD PEN MINI MISC *injection device for insulin*	2	
BD PEN NEEDLE MICRO U/F 32G X 6 MM MISC *insulin pen needle*	2	
BD PEN NEEDLE MINI U/F 31G X 5 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM MISC *insulin pen needle*	2	
BD PEN NEEDLE NANO U/F 32G X 4 MM MISC *insulin pen needle*	2	
BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM MISC *insulin pen needle*	2	
BD PEN NEEDLE SHORT U/F 31G X 8 MM MISC *insulin pen needle*	2	
BD PRECISIONGLIDE NEEDLE 27G X 1-1/2" MISC *needle (disp) 27 g*	2	
BD ROSENTHAL BIOPSY NEEDLE 16G X 1-5/16" MISC *needle (disp) 16 g*	2	
BD ROSENTHAL BIOPSY NEEDLE 18G X 1" MISC *needle (reusable) 18 g*	2	
BD SAFETY-LOK INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE ALLERGY SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
BD SAFETYGLIDE ALLERGY SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD SAFETYGLIDE NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
BD SAFETYGLIDE NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
BD SAFETYGLIDE NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
BD SAFETYGLIDE NEEDLE 27G X 5/8" MISC *needle (disp) 27 g*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
BD SAFETYGLIDE SHIELDED NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
BD SAFETYGLIDE SYRINGE/NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
BD SAFETYGLIDE SYRINGE/NEEDLE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD SYRINGE 60 ML MISC *syringe (disposable)*	2	
BD SYRINGE BLUNT CANNULA 17G 10 ML MISC *syringe (disposable)*	2	
BD SYRINGE BLUNT CANNULA 17G 5 ML MISC *syringe (disposable)*	2	
BD SYRINGE CATH TIP 60 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SYRINGE DUAL CANNULA 10 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER SLIP TIP 20 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 1 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 10 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 20 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 3 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 30 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 5 ML MISC *syringe (disposable)*	2	
BD SYRINGE LUER-LOK 60 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 1 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 10 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 20 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 3 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 30 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 5 ML MISC *syringe (disposable)*	2	
BD SYRINGE SLIP TIP 60 ML MISC *syringe (disposable)*	2	
BD SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD SYRINGE/NEEDLE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
BD SYRINGE/NEEDLE SLIP TIP 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD SYRINGE/NEEDLE SLIP TIP 26G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
BD TB SYRINGE 21G X 1" 1 ML MISC *tuberculin/allergy syringes*	2	
BD TB SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
BD TB SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
BD TB SYRINGE 27G X 1/2" 0.5 ML MISC *tuberculin/allergy syringes*	2	
BD TB SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
BD TUBERCULIN SYRINGE 1 ML MISC *syringe (disposable)*	2	
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
BD YALE LNR REUSABLE NEEDLE 26G X 1/2" MISC *needle (reusable) 26 g*	2	
BD YALE LNR REUSABLE NEEDLE 30G X 1/2" MISC *needle (reusable) 30 g*	2	
BD YALE REUSABLE TB SYRINGE 1 ML MISC *syringe (reusable)*	2	
CAREFINE PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
CAREFINE PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
CAREFINE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREFINE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
CAREFINE PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
CAREFINE PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
CAREFINE PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
CAREONE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
CAREONE INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
CAREONE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
CAREONE INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
CAREONE UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS PLUS 29G X 12MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS PLUS 31G X 6 MM MISC *insulin pen needle*	2	
CAREONE UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREONE UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
CARETOUCH INSULIN SYRINGE 29G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
CARETOUCH PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
CARETOUCH PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
CARETOUCH PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
CARETOUCH PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
CARETOUCH PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
CEQUR SIMPLICITY 2U DEVICE *injection device for insulin*	2	
CEQUR SIMPLICITY INSERTER MISC *injection device for insulin*	2	
CEQUR SIMPLICITY STARTER KIT *injection device for insulin*	3	
CLEVER CHOICE COMFORT EZ 29G X 12MM MISC *insulin pen needle*	2	
CLEVER CHOICE COMFORT EZ 33G X 4 MM MISC *insulin pen needle*	2	
CLICKFINE PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
CLICKFINE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
CLICKFINE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
CLICKFINE PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
COMFORT EZ MICRO PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 32G X 8 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 33G X 5 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 33G X 6 MM MISC *insulin pen needle*	2	
COMFORT EZ PEN NEEDLES 33G X 8 MM MISC *insulin pen needle*	2	
COMFORT EZ SHORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
CONTROL SYRINGE DISPOSABLE 10 ML MISC *syringe (disposable)*	2	
CORNWALL DISPENSING SYRINGE 10 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CORNWALL SYR PIPET OUTFIT 10ML MISC *needles & syringes*	2	
CORNWALL SYR PIPET OUTFIT 1ML MISC *needles & syringes*	2	
CORNWALL SYR PIPET OUTFIT 2ML MISC *needles & syringes*	2	
CORNWALL SYR PIPET OUTFIT 5ML MISC *needles & syringes*	2	
CRONO SYRINGE 19G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
CRONO SYRINGE 19G X 1-1/2" 20 ML MISC *syringe/needle (disp) 20 ml*	2	
DIALYSIS SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
DIALYSIS SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
DROPLET INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPLET INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
DROPLET INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
DROPLET MICRON 34G X 3.5 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 29G X 10MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
DROPLET PEN NEEDLES 32G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
DROPSAFE SAFETY PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
DRUG MART UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY COMFORT PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
EASY COMFORT PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY COMFORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
EASY COMFORT PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
EASY COMFORT PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
EASY COMFORT PEN NEEDLES 33G X 5 MM MISC *insulin pen needle*	2	
EASY COMFORT PEN NEEDLES 33G X 6 MM MISC *insulin pen needle*	2	
EASY GLIDE LUER LOCK SYRINGE 1 ML MISC *syringe (disposable)*	2	
EASY GLIDE PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
EASY TOUCH ALLERGY SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH ALLERGY SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH FLIPLOCK INSULIN SY 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH FLIPLOCK INSULIN SY 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH FLIPLOCK INSULIN SY 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH FLIPLOCK NEEDLES 18G X 1" MISC *needle (disp) 18 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 19G X 1" MISC *needle (disp) 19 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 20G X 1" MISC *needle (disp) 20 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK NEEDLES 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 21G X 1" MISC *needle (disp) 21 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 22G X 1" MISC *needle (disp) 22 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 22G X 3/4" MISC *needle (disp) 22 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 23G X 1" MISC *needle (disp) 23 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 23G X 5/8" MISC *needle (disp) 23 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 25G X 1" MISC *needle (disp) 25 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 25G X 5/8" MISC *needle (disp) 25 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 26G X 1/2" MISC *needle (disp) 26 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 27G X 1" MISC *needle (disp) 27 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 27G X 1/2" MISC *needle (disp) 27 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 28G X 1/2" MISC *needle (disp) 28 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 29G X 1/2" MISC *needle (disp) 29 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 30G X 1/2" MISC *needle (disp) 30 g*	2	
EASY TOUCH FLIPLOCK NEEDLES 30G X 5/16" MISC *needle (disp) 30 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK NEEDLES 31G X 5/16" MISC *needle (disp) 31 g*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1.5" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1.5" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH FLIPLOCK SAFETY SYR 26G X 3/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE FLIPLOCK 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE FLIPLOCK 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE SHEATHLOCK 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH FLURINGE SHEATHLOCK 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH HYPODERMIC NEEDLE 16G X 1" MISC *needle (disp) 16 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 16G X 1-1/2" MISC *needle (disp) 16 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 18G X 1.25" MISC *needle (disp) 18 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH HYPODERMIC NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 23G X 1-1/4" MISC *needle (disp) 23 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 23G X 3/4" MISC *needle (disp) 23 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 24G X 1" MISC *needle (disp) 24 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 24G X 1.25" MISC *needle (disp) 24 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 26G X 1/2" MISC *needle (disp) 26 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 26G X 3/8" MISC *needle (disp) 26 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 26G X 5/8" MISC *needle (disp) 26 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 27G X 1-1/2" MISC *needle (disp) 27 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 27G X 1-1/4" MISC *needle (disp) 27 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 30G X 1" MISC *needle (disp) 30 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 30G X 1/2" MISC *needle (disp) 30 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH HYPODERMIC NEEDLE 31G X 5/16" MISC *needle (disp) 31 g*	2	
EASY TOUCH HYPODERMIC NEEDLE 32G X 5/16" MISC *needle (disp) 32 g*	2	
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 30G X 5 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
EASY TOUCH PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM MISC *insulin pen needle*	2	
EASY TOUCH SAFETY PEN NEEDLES 29G X 8MM MISC *insulin pen needle*	2	
EASY TOUCH SAFETY PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
EASY TOUCH SAFETY SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SAFETY SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SAFETY SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SAFETY SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SAFETY SYRINGE 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH SAFETY SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SHEATHLOCK SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EASY TOUCH SYRINGE BARREL 10ML MISC *needles & syringes*	2	
EASY TOUCH SYRINGE BARREL 1ML MISC *needles & syringes*	2	
EASY TOUCH SYRINGE BARREL 3ML MISC *needles & syringes*	2	
EASY TOUCH SYRINGE BARREL 5ML MISC *needles & syringes*	2	
EASY TOUCH TB FLIPLOCK SYRINGE 26G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH TB FLIPLOCK SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH TB FLIPLOCK SYRINGE 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH TB SHEATHLOCK SYR 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH TB SHEATHLOCK SYR 26G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
EASY TOUCH TB SHEATHLOCK SYR 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
EASY TOUCH TB SHEATHLOCK SYR 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASYPOINT NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
EASYPOINT NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
EASYPOINT NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	
EASYPOINT NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
EASYPOINT NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
EASYPOINT NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
EASYPOINT NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
EASYPOINT NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
EASYPOINT NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
EASYPOINT NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
EASYPOINT NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
EASYPOINT NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
ELITE-THIN INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 28G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 28G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 29G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELITE-THIN INSULIN SYRINGE 29G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ELITE-THIN INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EPIDURAL NEEDLE 18G X 2" MISC *epidural needle (disp) 18 g*	2	
EPIDURAL NEEDLE 18G X 3-1/2" MISC *epidural needle (disp) 18 g*	2	
EPIDURAL NEEDLE 18G X 4" MISC *epidural needle (disp) 18 g*	2	
EPIDURAL NEEDLE TW 18G X 3-1/2" MISC *epidural needle (reusable) 18 g*	2	
EPILOR SYRINGE 10 ML MISC *syringe (disposable)*	2	
EPILOR SYRINGE 5 ML MISC *syringe (disposable)*	2	
EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EQL INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EQL INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT INSULIN SYR 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM MISC *insulin pen needle*	2	
EXEL COMFORT POINT PEN NEEDLE 31G X 4 MM MISC *insulin pen needle*	2	
EXEL COMFORT POINT PEN NEEDLE 31G X 6 MM MISC *insulin pen needle*	2	
EXEL COMFORT POINT PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	
FIFTY50 PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
FIFTY50 PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
FIFTY50 PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIFTY50 PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
FILTER NEEDLE 18G X 1-1/2" MISC *filter needles*	2	
FLOW-EZE VENTED NEEDLE MISC *hypodermic needles (disposable)*	2	
FREDS PHARMACY UNIFINE PENTIP+ 31G X 5 MM MISC *insulin pen needle*	2	
FREDS PHARMACY UNIFINE PENTIP+ 31G X 8 MM MISC *insulin pen needle*	2	
FREDS PHARMACY UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
FREESTYLE PRECISION INS SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
FREESTYLE PRECISION INS SYR 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
FREESTYLE PRECISION INS SYR 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
FREESTYLE PRECISION INS SYR 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL EASE INJECT PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
GLOBAL EASE INJECT PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
GLOBAL EASE INJECT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
GLOBAL EASE INJECT PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL EASY GLIDE INSULIN SYR 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL EASY GLIDE PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLOBAL INSULIN SYRINGES 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP CLICKFINE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
GNP CLICKFINE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
GNP INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNP INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
GNP ULTRA COM INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNP ULTRA COM INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM MISC *insulin pen needle*	2	
GOODSENSE PEN NEEDLE PENFINE 31G X 5 MM MISC *insulin pen needle*	2	
GOODSENSE PEN NEEDLE PENFINE 31G X 8 MM MISC *insulin pen needle*	2	
GOODSENSE PEN NEEDLE PENFINE 32G X 4 MM MISC *insulin pen needle*	2	
GOODSENSE PEN NEEDLE PENFINE 32G X 6 MM MISC *insulin pen needle*	2	
GREENE POINT SPINAL NEEDLE 22G X 3-1/2" MISC *spinal needle (reusable) 22 g*	2	
H-E-B INCONTROL PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
H-E-B INCONTROL PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
H-E-B INCONTROL PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
H-E-B INCONTROL PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
H-E-B INCONTROL PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
H-E-B INCONTROL UNIFINE PENTIP 32G X 4 MM MISC *insulin pen needle*	2	
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
HEALTHWISE MINI PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
HEALTHWISE PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
HEALTHWISE SHORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
HEALTHWISE UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
HEALTHY ACCENTS UNIFINE PENTIP 29G X 12MM MISC *insulin pen needle*	2	
HEALTHY ACCENTS UNIFINE PENTIP 31G X 5 MM MISC *insulin pen needle*	2	
HEALTHY ACCENTS UNIFINE PENTIP 31G X 6 MM MISC *insulin pen needle*	2	
HEALTHY ACCENTS UNIFINE PENTIP 31G X 8 MM MISC *insulin pen needle*	2	
HEALTHY ACCENTS UNIFINE PENTIP 32G X 4 MM MISC *insulin pen needle*	2	
HM ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
HUBER NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
HUBER NEEDLE 19G X 1-1/4" MISC *needle (disp) 19 g*	2	
HUBER NEEDLE 19G X 3/4" MISC *needle (disp) 19 g*	2	
HUBER NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUBER NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
HUBER NEEDLE 20G X 1-1/4" MISC *needle (disp) 20 g*	2	
HUBER NEEDLE 20G X 3/4" MISC *needle (disp) 20 g*	2	
HUBER NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
HUBER NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
HUBER NEEDLE 22G X 1-1/4" MISC *needle (disp) 22 g*	2	
HUBER NEEDLE 22G X 3/4" MISC *needle (disp) 22 g*	2	
HUMAPEN LUXURA HD DEVICE *injection device for insulin*	2	
HYPODERMIC NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
HYPODERMIC NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
HYPODERMIC NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
HYPODERMIC NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
HYPODERMIC NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	
HYPODERMIC NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
HYPODERMIC NEEDLE 20G X 3/4" MISC *needle (disp) 20 g*	2	
HYPODERMIC NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
HYPODERMIC NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
HYPODERMIC NEEDLE 21G X 1-1/4" MISC *needle (disp) 21 g*	2	
HYPODERMIC NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPODERMIC NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
HYPODERMIC NEEDLE 22G X 1-1/4" MISC *needle (disp) 22 g*	2	
HYPODERMIC NEEDLE 22G X 3/4" MISC *needle (disp) 22 g*	2	
HYPODERMIC NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
HYPODERMIC NEEDLE 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
HYPODERMIC NEEDLE 23G X 3/4" MISC *needle (disp) 23 g*	2	
HYPODERMIC NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
HYPODERMIC NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
HYPODERMIC NEEDLE 25G X 3/4" MISC *needle (disp) 25 g*	2	
HYPODERMIC NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
HYPODERMIC NEEDLE 26G X 1/2" MISC *needle (disp) 26 g*	2	
HYPODERMIC NEEDLE 26G X 3/8" MISC *needle (disp) 26 g*	2	
HYPODERMIC NEEDLE 26G X 5/8" MISC *needle (disp) 26 g*	2	
HYPODERMIC NEEDLE 27G X 1-1/2" MISC *needle (disp) 27 g*	2	
HYPODERMIC NEEDLE 27G X 1-1/4" MISC *needle (disp) 27 g*	2	
HYPODERMIC NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
HYPODERMIC NEEDLE 30G X 1/2" MISC *needle (disp) 30 g*	2	
INFUSION NEEDLE 15GX2" MISC *needles & syringes*	2	
INJECT-EASE MISC *injection device*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INJECT-EASE AUTOMATIC INJECTOR MISC *injection device*	2	
INPEN 100-BLUE-LILLY DEVICE *injection device for insulin*	2	
INPEN 100-BLUE-NOVO DEVICE *injection device for insulin*	2	
INPEN 100-GRAY-LILLY DEVICE *injection device for insulin*	2	
INPEN 100-GREY-NOVO DEVICE *injection device for insulin*	2	
INPEN 100-PINK-LILLY DEVICE *injection device for insulin*	2	
INPEN 100-PINK-NOVO DEVICE *injection device for insulin*	2	
INSULIN SYRINGE 27G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 29G X 1" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE/NEEDLE 27G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE/NEEDLE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
INSULIN SYRINGE/NEEDLE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
INSUPEN PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSUPEN PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
INSUPEN PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
INSUPEN PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
INSUPEN PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
INSUPEN SENSITIVE 32G X 6 MM MISC *insulin pen needle*	2	
INSUPEN SENSITIVE 32G X 8 MM MISC *insulin pen needle*	2	
INSUPEN ULTRAFIN 29G X 12MM MISC *insulin pen needle*	2	
INSUPEN ULTRAFIN 30G X 8 MM MISC *insulin pen needle*	2	
INSUPEN ULTRAFIN 31G X 6 MM MISC *insulin pen needle*	2	
INSUPEN ULTRAFIN 31G X 8 MM MISC *insulin pen needle*	2	
KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
KINRAY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
KINRAY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
KINRAY INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
KMART VALU INSULIN SYRINGE 29G U-100 0.5 ML MISC *insulin syringes (disposable)*	2	
KMART VALU INSULIN SYRINGE 29G U-100 1 ML MISC *insulin syringes (disposable)*	2	
KMART VALU INSULIN SYRINGE 30G U-100 0.3 ML MISC *insulin syringes (disposable)*	2	
KMART VALU INSULIN SYRINGE 30G U-100 0.5 ML MISC *insulin syringes (disposable)*	2	
KMART VALU INSULIN SYRINGE 30G U-100 1 ML MISC *insulin syringes (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KROGER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
KROGER INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
KROGER PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
KROGER PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
KROGER PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
KROGER PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
KROGER PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
KROGER PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
LEADER INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEADER INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LEADER INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
LEADER UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
LEADER UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
LEADER UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
LEADER UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	
LEADER UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LITETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
LITETOUCH PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
LITETOUCH PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
LITETOUCH PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
LITETOUCH PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
LITETOUCH PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
LLX EXTENSION NEEDLE MISC *needles & syringes*	2	
LOCAL ANESTHESIA NEEDLE 20G X 4" MISC *needle (disp) 20 g*	2	
LOCAL ANESTHESIA NEEDLE 22 X 4" MISC *needle (disp) 22 g*	2	
LOCAL ANESTHESIA NEEDLE 22G X 3" MISC *needle (disp) 22 g*	2	
LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
LUER LOCK SAFETY SYRINGES 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
LUER LOCK SAFETY SYRINGES 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
LUER LOCK SAFETY SYRINGES 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
LUER LOCK SAFETY SYRINGES 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
LUER LOCK SAFETY SYRINGES 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUER LOCK SAFETY SYRINGES 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
LUER LOCK SAFETY SYRINGES 3 ML MISC *syringe (disposable)*	2	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MAGELLAN SYRINGE-SAFETY NEEDLE 23G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
MAGELLAN TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MAGELLAN TUBERCULIN SYRINGE 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MARATHON MEDICAL PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
MARATHON MEDICAL PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
MARATHON MEDICAL PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
MARATHON MEDICAL PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM MISC *insulin pen needle*	2	
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 8MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAXICOMFORT II PEN NEEDLE 31G X 6 MM MISC *insulin pen needle*	2	
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MEDIC INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MEDICINE SHOPPE PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
MEDICINE SHOPPE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
MEDICINE SHOPPE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
MEIJER PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
MEIJER PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
MEIJER PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
MICRODOT PEN NEEDLE 31G X 6 MM MISC *insulin pen needle*	2	
MICRODOT PEN NEEDLE 32G X 4 MM MISC *insulin pen needle*	2	
MICRODOT PEN NEEDLE 33G X 4 MM MISC *insulin pen needle*	2	
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MM PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
MM PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
MM PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
MM PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
MONOJECT ALLERGIST TRAY 27G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
MONOJECT ALLERGIST TRAY 28G X 1/2" 0.5 ML KIT *tuberculin/allergy syringes*	2	
MONOJECT ALLERGIST TRAY 28G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
MONOJECT BLUNTIP CANNULA 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
MONOJECT BLUNTIP CANNULA 21G X 1" MISC *needle (disp) 21 g*	2	
MONOJECT BLUNTIP SYR/CANNULA 3 ML MISC *syringe (disposable)*	2	
MONOJECT BLUNTIP SYR/CANNULA 6 ML MISC *syringe (disposable)*	2	
MONOJECT CONTROL SYRINGE 12 ML MISC *syringe (disposable)*	2	
MONOJECT CONTROL SYRINGE 20 ML MISC *syringe (disposable)*	2	
MONOJECT FILTER ASPIRATOR MISC *needles & syringes*	2	
MONOJECT FILTER NEEDLE 18G X 1-1/2" MISC *filter needles*	2	
MONOJECT FILTER NEEDLE 20G X 1-1/2" MISC *filter needles*	2	
MONOJECT HYPODERMIC NEEDLE 14G X 1" MISC *needle (disp) 14 g*	2	
MONOJECT HYPODERMIC NEEDLE 14G X 1-1/2" MISC *needle (disp) 14 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT HYPODERMIC NEEDLE 14G X 2" MISC *needle (disp) 14 g*	2	
MONOJECT HYPODERMIC NEEDLE 16G X 1" MISC *needle (disp) 16 g*	2	
MONOJECT HYPODERMIC NEEDLE 16G X 1-1/2" MISC *needle (disp) 16 g*	2	
MONOJECT HYPODERMIC NEEDLE 16G X 3/4" MISC *needle (disp) 16 g*	2	
MONOJECT HYPODERMIC NEEDLE 16G X 5/8" MISC *needle (disp) 16 g*	2	
MONOJECT HYPODERMIC NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
MONOJECT HYPODERMIC NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
MONOJECT HYPODERMIC NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
MONOJECT HYPODERMIC NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
MONOJECT HYPODERMIC NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	
MONOJECT HYPODERMIC NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
MONOJECT HYPODERMIC NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
MONOJECT HYPODERMIC NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
MONOJECT HYPODERMIC NEEDLE 21G X 2" MISC *needle (disp) 21 g*	2	
MONOJECT HYPODERMIC NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
MONOJECT HYPODERMIC NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
MONOJECT HYPODERMIC NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
MONOJECT HYPODERMIC NEEDLE 23G X 3/4" MISC *needle (disp) 23 g*	2	
MONOJECT HYPODERMIC NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/4" MISC *needle (disp) 25 g*	2	
MONOJECT HYPODERMIC NEEDLE 25G X 2" MISC *needle (disp) 25 g*	2	
MONOJECT HYPODERMIC NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
MONOJECT HYPODERMIC NEEDLE 26G X 1-1/2" MISC *needle (disp) 26 g*	2	
MONOJECT HYPODERMIC NEEDLE 26G X 1/2" MISC *needle (disp) 26 g*	2	
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/2" MISC *needle (disp) 27 g*	2	
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/4" MISC *needle (disp) 27 g*	2	
MONOJECT HYPODERMIC NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
MONOJECT HYPODERMIC NEEDLE 30G X 3/4" MISC *needle (disp) 30 g*	2	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT INSULIN SYRINGE U-100 1 ML MISC *insulin syringes (disposable)*	2	
MONOJECT INTRODUCER NEEDLE 18G X 1-1/4" MISC *needle (reusable) 18 g*	2	
MONOJECT LIFESHIELD SYRINGE 18G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT LIFESHIELD SYRINGE 18G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SAFETY NDL 18G X 1" MISC *needle (disp) 18 g*	2	
MONOJECT MAGELLAN SAFETY NDL 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
MONOJECT MAGELLAN SAFETY NDL 19G X 1" MISC *needle (disp) 19 g*	2	
MONOJECT MAGELLAN SAFETY NDL 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
MONOJECT MAGELLAN SAFETY NDL 20G X 1" MISC *needle (disp) 20 g*	2	
MONOJECT MAGELLAN SAFETY NDL 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
MONOJECT MAGELLAN SAFETY NDL 21G X 1" MISC *needle (disp) 21 g*	2	
MONOJECT MAGELLAN SAFETY NDL 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
MONOJECT MAGELLAN SAFETY NDL 21G X 5/8" MISC *needle (disp) 21 g*	2	
MONOJECT MAGELLAN SAFETY NDL 22G X 1" MISC *needle (disp) 22 g*	2	
MONOJECT MAGELLAN SAFETY NDL 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
MONOJECT MAGELLAN SAFETY NDL 23G X 1" MISC *needle (disp) 23 g*	2	
MONOJECT MAGELLAN SAFETY NDL 23G X 5/8" MISC *needle (disp) 23 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT MAGELLAN SAFETY NDL 25G X 1" MISC *needle (disp) 25 g*	2	
MONOJECT MAGELLAN SAFETY NDL 25G X 5/8" MISC *needle (disp) 25 g*	2	
MONOJECT MAGELLAN SYRINGE 18G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT MAGELLAN SYRINGE 18G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT MAGELLAN SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT MAGELLAN SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT MAGELLAN SYRINGE 23G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT MAGELLAN SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
MONOJECT MAGELLAN SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT MEDICATION TRANSF NDL MISC *hypodermic needles (disposable)*	2	
MONOJECT PHARMACY TRAY 1 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 12 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 20 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 3 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 35 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 6 ML MISC *syringe (disposable)*	2	
MONOJECT PHARMACY TRAY 60 ML MISC *syringe (disposable)*	2	
MONOJECT PISTON SYRINGE 140 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/CATHTIP 35 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/LLOCK 20 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/LLOCK 35 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/LLOCK 60 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/LTIP 20 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SOFTPACK/RG LOCK 35 ML MISC *syringe (disposable)*	2	
MONOJECT SOFTPACK/RG LUER 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE 12 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE 18G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 20G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 20G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT SYRINGE 20G X 3/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 21G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 21G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT SYRINGE 21G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
MONOJECT SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 21G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 22G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
MONOJECT SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 25G X 1-1/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 27G X 1-1/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
MONOJECT SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT SYRINGE 3 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE 6 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE CATH TIP 35 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE CATH TIP 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE ECC LUER 20 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE ECC LUER 35 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE ECCENTRIC TIP 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER LOCK 20 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER LOCK 35 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER LOCK 6 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER LOCK 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER-LOCK TIP 140 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE LUER-LOCK TIP 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE PHARMACY TRAY 1 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SYRINGE REG LUER 12 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REG LUER 20 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REG LUER 3 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REG LUER 35 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REG LUER 6 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REGULAR TIP 20 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REGULAR TIP 3 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REGULAR TIP 6 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE REGULAR TIP 60 ML MISC *syringe (disposable)*	2	
MONOJECT SYRINGE TOOMEY TYPE 60 ML MISC *syringe (disposable)*	2	
MONOJECT TB SAFETY SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SAFETY SYRINGE 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SYRINGE 1 ML MISC *syringe (disposable)*	2	
MONOJECT TB SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SYRINGE 28G X 1/2" 0.5 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT TB SYRINGE 28G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
MS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
MS INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
MULTI-DRAW NEEDLE 20G X 1" MISC *blood collection needle 20 g*	2	
MULTI-DRAW NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
MULTI-DRAW NEEDLE 21G X 1" MISC *blood collection needle 21 g*	2	
MULTI-DRAW NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
MULTI-DRAW NEEDLE 22G X 1" MISC *blood collection needle 22 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULTI-DRAW NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
MULTIFIT REUSABLE SYRINGE 10 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE SYRINGE 20 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE SYRINGE 3 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE SYRINGE 30 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE SYRINGE 5 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE SYRINGE 50 ML MISC *syringe (reusable)*	2	
MULTIFIT REUSABLE TB SYRINGE 2 ML MISC *syringe (reusable)*	2	
NOKOR ADMIX NEEDLE 16G X 1" MISC *needle (disp) 16 g*	2	
NOKOR ADMIX NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
NOKOR VENTED NEEDLE 16G X 1" MISC *needle (disp) 16 g*	2	
NOKOR VENTED NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
NOKOR VENTED NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
NORDIPEN 5 INJECTION DEVICE MISC *injection device*	2	
NORDIPEN DELIVERY SYSTEM MISC *injection device*	2	
NORM-JECT LUER LOCK SYRINGE 10 ML MISC *syringe (disposable)*	2	
NORM-JECT LUER LOCK SYRINGE 20 ML MISC *syringe (disposable)*	2	
NORM-JECT LUER SLIP SYRINGE 1 ML MISC *syringe (disposable)*	2	
NOVOFINE 32G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOFINE AUTOCOVER 30G X 8 MM MISC *insulin pen needle*	2	
NOVOFINE PLUS 32G X 4 MM MISC *insulin pen needle*	2	
NOVOPEN ECHO DEVICE *injection device for insulin*	2	
NOVOTWIST 32G X 5 MM MISC *insulin pen needle*	2	
OMNITROPE PEN 10 INJ DEVICE MISC *injection device*	2	
OMNITROPE PEN 5 INJ DEVICE MISC *injection device*	2	
PATIENT SAFE SYRINGE 10 ML MISC *syringe (disposable)*	2	
PATIENT SAFE SYRINGE 20 ML MISC *syringe (disposable)*	2	
PATIENT SAFE SYRINGE 3 ML MISC *syringe (disposable)*	2	
PATIENT SAFE SYRINGE 30 ML MISC *syringe (disposable)*	2	
PATIENT SAFE SYRINGE 5 ML MISC *syringe (disposable)*	2	
PATIENT SAFE SYRINGE 60 ML MISC *syringe (disposable)*	2	
PC UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
PC UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
PC UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
PC UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
PEN NEEDLES 1/2" 29G X 12MM MISC *insulin pen needle*	2	
PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
PEN NEEDLES 3/16" 31G X 5 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEN NEEDLES 30G X 5 MM MISC *insulin pen needle*	2	
PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
PEN NEEDLES 5/16" 30G X 8 MM MISC *insulin pen needle*	2	
PEN NEEDLES 5/16" 31G X 8 MM MISC *insulin pen needle*	2	
PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
POLY HUB NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
POLY HUB NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
POLY HUB NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POLY HUB NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	
POLY HUB NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
POLY HUB NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
POLY HUB NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
POLY HUB NEEDLE 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
POLY HUB NEEDLE 25G X 1" MISC *needle (disp) 25 g*	2	
POLY HUB NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
POLY HUB NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
POLY HUB NEEDLE 27G X 1-1/4" MISC *needle (disp) 27 g*	2	
POLY HUB NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
POLY HUB NEEDLE 30G X 1/2" MISC *needle (disp) 30 g*	2	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SURE-DOSE SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SURE-DOSE SYRINGE 30G X 3/8" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SURE-DOSE SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
PREFERRED PLUS UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
PREFERRED PLUS UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
PREFERRED PLUS UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
PREFERRED PLUS UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
PREVENT SAFETY PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
PREVENT SAFETY PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
PRO COMFORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
PRO COMFORT PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
PRO COMFORT PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
PRO COMFORT PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PURE COMFORT PEN NEEDLE 32G X 4 MM MISC *insulin pen needle*	2	
PURE COMFORT PEN NEEDLE 32G X 5 MM MISC *insulin pen needle*	2	
PURE COMFORT PEN NEEDLE 32G X 6 MM MISC *insulin pen needle*	2	
PURE COMFORT PEN NEEDLE 32G X 8 MM MISC *insulin pen needle*	2	
PX EXTRA SHORT PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
PX INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
PX MINI PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
PX PEN NEEDLE 29G X 12MM MISC *insulin pen needle*	2	
PX PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PX SHORTLENGTH PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
QC PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
QC PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
QC PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
QC UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
RA INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RA INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
RA INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RA INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
RA PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
RA PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
REALITY INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
REALITY INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
REALITY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
REALITY INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
REGIONAL BLOCK NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
RELI-ON INSULIN SYRINGE 29G 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELI-ON INSULIN SYRINGE 29G 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELI-ON INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELI-ON INSULIN SYRINGE 30G 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELI-ON INSULIN SYRINGE 30G 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELI-ON INSULIN SYRINGE 30G 1 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
RELION INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
RELION MINI PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
RELION PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
RELION PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
RELION PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELION PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
RELION SHORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
RETROBULBAR NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
REUSABLE SYRINGE BARREL 1.5OZ MISC *needles & syringes*	2	
REUSABLE SYRINGE BARREL 1OZ MISC *needles & syringes*	2	
REUSABLE SYRINGE BARREL 2OZ MISC *needles & syringes*	2	
REUSABLE SYRINGE BARREL 3OZ MISC *needles & syringes*	2	
REUSABLE SYRINGE BARREL 4OZ MISC *needles & syringes*	2	
ROBB INFUSION SYRINGE 100 ML MISC *syringe (reusable)*	2	
ROBB-TYPE ANGIO SYRINGE 80CC MISC *needles & syringes*	2	
SAFESNAP ALLERGY SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
SAFESNAP INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SAFESNAP INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SAFESNAP INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SAFESNAP INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SAFESNAP INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SAFESNAP SYRINGE 10 ML MISC *syringe (disposable)*	2	
SAFESNAP SYRINGE 20G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFESNAP SYRINGE 20G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 21G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 21G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 22G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 22G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFESNAP SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFESNAP SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFESNAP SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFESNAP SYRINGE 3 ML MISC *syringe (disposable)*	2	
SAFESNAP SYRINGE 5 ML MISC *syringe (disposable)*	2	
SAFESNAP TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
SAFESNAP TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
SAFETY INSULIN SYRINGES 27G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SAFETY INSULIN SYRINGES 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SAFETY INSULIN SYRINGES 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SAFETY INSULIN SYRINGES 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SAFETY INSULIN SYRINGES 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SAFETY SYRINGE/NEEDLE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SAFETY SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGE/NEEDLE 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SAFETY SYRINGES/NEEDLE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY SYRINGES/NEEDLE 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFETY SYRINGES/NEEDLE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFETY SYRINGES/NEEDLE 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFETY SYRINGES/NEEDLE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFETY SYRINGES/NEEDLE 27G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFETY-GARD NEEDLE 18G MISC *hypodermic needles (disposable)*	2	
SAFETY-GARD NEEDLE 20G MISC *hypodermic needles (disposable)*	2	
SAFETY-LOK SYRINGE 10 ML MISC *syringe (disposable)*	2	
SAFETY-LOK SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SAFETY-LOK SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY-LOK SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SAFETY-LOK SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY-LOK SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY-LOK SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY-LOK SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SAFETY-LOK SYRINGE 3 ML MISC *syringe (disposable)*	2	
SAFETY-LOK SYRINGE 5 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFETY-LOK TB SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
SAFETY-LOK TB SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
SANA-LOK CONTROL SYRINGE 10 ML MISC *syringe (reusable)*	2	
SANA-LOK CONTROL SYRINGE 20 ML MISC *syringe (reusable)*	2	
SANA-LOK CONTROL SYRINGE 5 ML MISC *syringe (reusable)*	2	
SB INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SB INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SB INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SB INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
SB INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
SECURE SAFE ALLERGY TRAY 27G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
SECURESAFE HYPODERMIC NEEDLE 18G X 1" MISC *needle (disp) 18 g*	2	
SECURESAFE HYPODERMIC NEEDLE 18G X 1-1/2" MISC *needle (disp) 18 g*	2	
SECURESAFE HYPODERMIC NEEDLE 19G X 1" MISC *needle (disp) 19 g*	2	
SECURESAFE HYPODERMIC NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
SECURESAFE HYPODERMIC NEEDLE 20G X 1" MISC *needle (disp) 20 g*	2	
SECURESAFE HYPODERMIC NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
SECURESAFE HYPODERMIC NEEDLE 21G X 1" MISC *needle (disp) 21 g*	2	
SECURESAFE HYPODERMIC NEEDLE 21G X 1-1/2" MISC *needle (disp) 21 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SECURESAFE HYPODERMIC NEEDLE 22G X 1" MISC *needle (disp) 22 g*	2	
SECURESAFE HYPODERMIC NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
SECURESAFE HYPODERMIC NEEDLE 23G X 1" MISC *needle (disp) 23 g*	2	
SECURESAFE HYPODERMIC NEEDLE 23G X 1-1/2" MISC *needle (disp) 23 g*	2	
SECURESAFE HYPODERMIC NEEDLE 25G X 1-1/2" MISC *needle (disp) 25 g*	2	
SECURESAFE HYPODERMIC NEEDLE 25G X 5/8" MISC *needle (disp) 25 g*	2	
SECURESAFE HYPODERMIC NEEDLE 26G X 1/2" MISC *needle (disp) 26 g*	2	
SECURESAFE HYPODERMIC NEEDLE 27G X 1/2" MISC *needle (disp) 27 g*	2	
SECURESAFE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SECURESAFE INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SECURESAFE SYRINGE/NEEDLE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SECURESAFE SYRINGE/NEEDLE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SECURESAFE SYRINGE/NEEDLE 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SECURESAFE SYRINGE/NEEDLE 25G X 1-1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SECURESAFE SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SECURESAFE SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SECURESAFE SYRINGE/NEEDLE 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SECURESAFE TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
SECURESAFE TUBERCULIN SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
SECURESAFE TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
SHOPKO UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS PLUS 29G X 12MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	
SHOPKO UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
SPINAL NEEDLE 18G X 3" MISC *spinal needle (disp) 18 g*	2	
SPINAL NEEDLE 18G X 3-1/2" MISC *spinal needle (disp) 18 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPINAL NEEDLE 18G X 3-1/2" MISC *spinal needle (reusable) 18 g*	2	
SPINAL NEEDLE 18G X 6" MISC *spinal needle (disp) 18 g*	2	
SPINAL NEEDLE 19G X 3" MISC *spinal needle (disp) 19 g*	2	
SPINAL NEEDLE 19G X 3-1/2" MISC *spinal needle (disp) 19 g*	2	
SPINAL NEEDLE 20G X 1-1/2" MISC *spinal needle (disp) 20 g*	2	
SPINAL NEEDLE 20G X 2-1/2" MISC *spinal needle (disp) 20 g*	2	
SPINAL NEEDLE 20G X 3" MISC *spinal needle (disp) 20 g*	2	
SPINAL NEEDLE 20G X 3-1/2" MISC *spinal needle (disp) 20 g*	2	
SPINAL NEEDLE 20G X 3-1/2" MISC *spinal needle (reusable) 20 g*	2	
SPINAL NEEDLE 20G X 6" MISC *spinal needle (disp) 20 g*	2	
SPINAL NEEDLE 22G X 1-1/2" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 22G X 2-1/2" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 22G X 3" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 22G X 3-1/2" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 22G X 3-1/2" MISC *spinal needle (reusable) 22 g*	2	
SPINAL NEEDLE 22G X 5" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 22G X 7" MISC *spinal needle (disp) 22 g*	2	
SPINAL NEEDLE 23G X 3-1/2" MISC *spinal needle (disp) 23 g*	2	
SPINAL NEEDLE 25G X 1" MISC *spinal needle (disp) 25 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPINAL NEEDLE 25G X 2" MISC *spinal needle (disp) 25 g*	2	
SPINAL NEEDLE 25G X 3" MISC *spinal needle (disp) 25 g*	2	
SPINAL NEEDLE 25G X 3-1/2" MISC *spinal needle (disp) 25 g*	2	
SPINAL NEEDLE 25G X 3-1/2" MISC *spinal needle (reusable) 25 g*	2	
SPINAL NEEDLE 25G X 4-11/16" MISC *spinal needle (disp) 25 g*	2	
SPINAL NEEDLE 26G X 3-1/2" MISC *spinal needle (disp) 26 g*	2	
SPINAL NEEDLE 27G X 3-1/2" MISC *spinal needle (disp) 27 g*	2	
SPINAL NEEDLE 27G X 4-11/16" MISC *spinal needle (disp) 27 g*	2	
SPINAL NEEDLE 29G X 3-1/2" MISC *spinal needle (disp) 29 g*	2	
SPINAL NEEDLE 29G X 4-11/16" MISC *spinal needle (disp) 29 g*	2	
SPINAL NEEDLE TW 18G X 2-1/2" MISC *spinal needle (disp) 18 g*	2	
SPINAL NEEDLE TW 18G X 3-1/2" MISC *spinal needle (disp) 18 g*	2	
SPINAL NEEDLE/STYLET TW 14G X 2" MISC *spinal needle (reusable) 14 g*	2	
SPINAL NEEDLE/STYLET TW 18G X 1-1/2" MISC *spinal needle (reusable) 18 g*	2	
SPINAL NEEDLE/STYLET TW 18G X 2-1/2" MISC *spinal needle (reusable) 18 g*	2	
SPINAL NEEDLE/STYLET TW 18G X 6" MISC *spinal needle (reusable) 18 g*	2	
STIMEX INSULATED NEEDLE 22G X 1-1/2" MISC *needle (disp) 22 g*	2	
STIMEX INSULATED NEEDLE 22G X 2-1/8" MISC *needle (disp) 22 g*	2	
STIMEX INSULATED NEEDLE 22G X 4-1/4" MISC *needle (disp) 22 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE COMFORT PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
SURE COMFORT PEN NEEDLES 30G X 8 MM MISC *insulin pen needle*	2	
SURE COMFORT PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
SURE COMFORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
SURE COMFORT PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
SURE COMFORT PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
SURE-FINE PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
SURE-FINE PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
SURE-FINE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
SURE-JECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE-JECT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
SURE-JECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
SYMPATHETIC NERVE NEEDLE 18G X 6" MISC *needle (disp) 18 g*	2	
SYMPATHETIC NERVE NEEDLE 19G X 5" MISC *needle (disp) 19 g*	2	
SYMPATHETIC NERVE NEEDLE 20G X 5" MISC *needle (disp) 20 g*	2	
SYRINGE 10-12 ML 12 ML MISC *syringe (disposable)*	2	
SYRINGE 18G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 2-3 ML 3 ML MISC *syringe (disposable)*	2	
SYRINGE 20-25 ML 25 ML MISC *syringe (disposable)*	2	
SYRINGE 20G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 20G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 20G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 21G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 21G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 21G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 21G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 21G X 1-1/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 21G X 1-1/4" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 22G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 22G X 1" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 22G X 1-1/2" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 22G X 1-1/2" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 22G X 1-1/4" 6 ML MISC *syringe/needle (disp) 6 ml*	2	
SYRINGE 22G X 3/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 25G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 27G X 1-1/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 2G X 1-1/4" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE 30 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE 30-35 ML 35 ML MISC *syringe (disposable)*	2	
SYRINGE 5-6 ML 6 ML MISC *syringe (disposable)*	2	
SYRINGE 50-60 ML 60 ML MISC *syringe (disposable)*	2	
SYRINGE DISPOSABLE 10 ML MISC *syringe (disposable)*	2	
SYRINGE DISPOSABLE 20 ML MISC *syringe (disposable)*	2	
SYRINGE DISPOSABLE 30 ML MISC *syringe (disposable)*	2	
SYRINGE DISPOSABLE 60 ML MISC *syringe (disposable)*	2	
SYRINGE ECCENTRIC TIP 10 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 10 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 20 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 20G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 20G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SYRINGE LUER LOCK 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SYRINGE LUER LOCK 21G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 21G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE LUER LOCK 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SYRINGE LUER LOCK 22G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 22G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SYRINGE LUER LOCK 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
SYRINGE LUER LOCK 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 25G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
SYRINGE LUER LOCK 3 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 30 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 35 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 5 ML MISC *syringe (disposable)*	2	
SYRINGE LUER LOCK 60 ML MISC *syringe (disposable)*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE LUER SLIP 1 ML MISC *syringe (disposable)*	2	
SYRINGE LUER SLIP 10 ML MISC *syringe (disposable)*	2	
SYRINGE LUER SLIP 25G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SYRINGE LUER SLIP 26G X 3/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SYRINGE LUER SLIP 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
SYRINGE LUER SLIP 3 ML MISC *syringe (disposable)*	2	
SYRINGE LUER SLIP 35 ML MISC *syringe (disposable)*	2	
SYRINGE LUER SLIP 5 ML MISC *syringe (disposable)*	2	
SYRINGE LUER SLIP 60 ML MISC *syringe (disposable)*	2	
SYRINGE/CANNULA 10 ML MISC *syringe (disposable)*	2	
SYRINGE/CANNULA 3 ML MISC *syringe (disposable)*	2	
SYRINGE/CANNULA 5 ML MISC *syringe (disposable)*	2	
SYRINGE/HYPODERMIC SAFETY 18G X 1" 12 ML MISC *syringe/needle (disp) 12 ml*	2	
TB SYRINGE 1 ML MISC *needles & syringes*	2	
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECHLITE INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 15/64" 1 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TECHLITE PEN NEEDLES 29G X 10MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
TECHLITE PEN NEEDLES 32G X 8 MM MISC *insulin pen needle*	2	
TODAYS HEALTH MINI PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TODAYS HEALTH PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	
TOOMEY SYRINGE 70 ML MISC *syringe (disposable)*	2	
TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
TOPCARE CLICKFINE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUE COMFORT PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
TRUE COMFORT PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
TRUE COMFORT PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
TRUEPLUS PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
TRUEPLUS PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
TRUEPLUS PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
TRUEPLUS PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
TRUEPLUS PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
TUBERCULIN SYRINGE 26G X 3/8" 1 ML MISC *tuberculin/allergy syringes*	2	
TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
TUOHY EPIDURAL NEEDLE TW 14G X 3" MISC *epidural needle (reusable) 14 g*	2	
TUOHY EPIDURAL NEEDLE TW 16G X 3" MISC *epidural needle (reusable) 16 g*	2	
TUOHY EPIDURAL NEEDLE TW 17G X 3" MISC *epidural needle (reusable) 17 g*	2	
TUOHY EPIDURAL NEEDLE TW 17G X 3-1/2" MISC *epidural needle (disp) 17 g*	2	
TUOHY EPIDURAL NEEDLE TW 17G X 7" MISC *epidural needle (reusable) 17 g*	2	
TUOHY EPIDURAL NEEDLE TW 18G X 2" MISC *epidural needle (disp) 18 g*	2	
TUOHY EPIDURAL NEEDLE TW 18G X 3" MISC *epidural needle (reusable) 18 g*	2	
TUOHY EPIDURAL NEEDLE TW 18G X 3-1/2" MISC *epidural needle (disp) 18 g*	2	
TUOHY EPIDURAL NEEDLE TW 20G X 3-1/2" MISC *epidural needle (disp) 20 g*	2	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 1/4" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTICARE MICRO PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE MICRO PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
ULTICARE MICRO PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
ULTICARE MINI PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
ULTICARE MINI PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
ULTICARE PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
ULTICARE PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
ULTICARE SAFETY SYRINGE 22G X 1-1/2" 1.5 ML MISC *syringe/needle (disp) 1.5 ml*	2	
ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
ULTICARE SYRINGE 22G X 1-1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
ULTICARE SYRINGE 22G X 1-1/2" 1.5 ML MISC *syringe/needle (disp) 1.5 ml*	2	
ULTICARE SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
ULTICARE TUBERCULIN SAFETY SYR 25G X 1" 1 ML MISC *tuberculin/allergy syringes*	2	
ULTICARE TUBERCULIN SAFETY SYR 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
ULTICARE TUBERCULIN SAFETY SYR 27G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
ULTICARE TUBERCULIN SAFETY SYR 27G X 5/8" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
ULTICARE TUBERCULIN SAFETY SYR 28G X 1/2" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM MISC *insulin pen needle*	2	
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM MISC *insulin pen needle*	2	
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM MISC *insulin pen needle*	2	
ULTILET INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 1/4" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 30G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTILET INSULIN SYRINGE SHORT 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTILET PEN NEEDLE 29G X 12.7MM MISC *insulin pen needle*	2	
ULTILET PEN NEEDLE 31G X 5 MM MISC *insulin pen needle*	2	
ULTILET PEN NEEDLE 31G X 8 MM MISC *insulin pen needle*	2	
ULTILET PEN NEEDLE 32G X 4 MM MISC *insulin pen needle*	2	
ULTRA COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA FLO INSULIN PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA THIN PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
ULTRA-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM MISC *insulin pen needle*	2	
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM MISC *insulin pen needle*	2	
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM MISC *insulin pen needle*	2	
ULTRACARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRACARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
ULTRACARE PEN NEEDLES 31G X 5 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 32G X 4 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 32G X 5 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 32G X 6 MM MISC *insulin pen needle*	2	
ULTRACARE PEN NEEDLES 33G X 4 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 30G X 5 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 31G X 5 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 32G X 6 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS 33G X 4 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 29G X 12MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 30G X 5 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 31G X 6 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
UNIFINE PENTIPS PLUS 33G X 4 MM MISC *insulin pen needle*	2	
UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM MISC *insulin pen needle*	2	
UNIFINE SAFECONTROL PEN NEEDLE 30G X 8 MM MISC *insulin pen needle*	2	
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	
VALUMARK PEN NEEDLES 29G X 12MM MISC *insulin pen needle*	2	
VALUMARK PEN NEEDLES 31G X 6 MM MISC *insulin pen needle*	2	
VALUMARK PEN NEEDLES 31G X 8 MM MISC *insulin pen needle*	2	
VANISHPOINT ALLERGY TRAY 27G X 1/2" 1 ML KIT *tuberculin/allergy syringes*	2	
VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 1 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 1 ML MISC *insulin syringe/needle u-100*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 22G X 1" 10 ML MISC *syringe/needle (disp) 10 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SAFETY SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 22G X 1" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 25G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 25G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 25G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SAFETY SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 27G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	
VANISHPOINT SAFETY SYRINGE 27G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SAFETY SYRINGE 27G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SYRINGE 20G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 20G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 21G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 21G X 1-1/2" 10 ML MISC *syringe/needle (disp) 10 ml*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SYRINGE 21G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 21G X 1-1/2" 5 ML MISC *syringe/needle (disp) 5 ml*	2	
VANISHPOINT SYRINGE 22G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 22G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 23G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 23G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 25G X 1" 1 ML MISC *syringe/needle (disp) 1 ml*	2	
VANISHPOINT SYRINGE 25G X 1" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 25G X 1-1/2" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT SYRINGE 25G X 5/8" 3 ML MISC *syringe/needle (disp) 3 ml*	2	
VANISHPOINT TUBERCULIN SYRINGE 25G X 1" 1 ML MISC *tuberculin/allergy syringes*	2	
VANISHPOINT TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC *tuberculin/allergy syringes*	2	
VANISHPOINT TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC *tuberculin/allergy syringes*	2	
VIDA MIA UNIFINE PENTIPS 29G X 12MM MISC *insulin pen needle*	2	
VIDA MIA UNIFINE PENTIPS 31G X 6 MM MISC *insulin pen needle*	2	
VIDA MIA UNIFINE PENTIPS 31G X 8 MM MISC *insulin pen needle*	2	
VIDA MIA UNIFINE PENTIPS 32G X 4 MM MISC *insulin pen needle*	2	
VP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC *insulin syringe/needle u-100*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WEGMANS UNIFINE PENTIPS PLUS 31G X 5 MM MISC *insulin pen needle*	2	
WEGMANS UNIFINE PENTIPS PLUS 31G X 6 MM MISC *insulin pen needle*	2	
WEGMANS UNIFINE PENTIPS PLUS 31G X 8 MM MISC *insulin pen needle*	2	
WEGMANS UNIFINE PENTIPS PLUS 32G X 4 MM MISC *insulin pen needle*	2	
WEISS EPIDURAL NEEDLE 17G X 3" MISC *epidural needle (reusable) 17 g*	2	
WEISS EPIDURAL NEEDLE 20G X 2" MISC *epidural needle (disp) 20 g*	2	
WEISS EPIDURAL NEEDLE TW 17G X 3-1/2" MISC *epidural needle (disp) 17 g*	2	
WEISS EPIDURAL NEEDLE TW 17G X 5" MISC *epidural needle (disp) 17 g*	2	
WEISS EPIDURAL NEEDLE TW 17G X 8 CM MISC *epidural needle (disp) 17 g*	2	
WEISS EPIDURAL NEEDLE TW 18G X 2" MISC *epidural needle (disp) 18 g*	2	
WEISS EPIDURAL NEEDLE TW 18G X 3-1/2" MISC *epidural needle (disp) 18 g*	2	
WEISS EPIDURAL NEEDLE TW 18G X 5" MISC *epidural needle (disp) 18 g*	2	
WEISS EPIDURAL NEEDLE TW 18G X 8 CM MISC *epidural needle (disp) 18 g*	2	
WEISS EPIDURAL NEEDLE TW 20G X 3-1/2" MISC *epidural needle (disp) 20 g*	2	
WHITACRE SPINAL NEEDLE 22G X 1-1/2" MISC *spinal needle (disp) 22 g*	2	
WHITACRE SPINAL NEEDLE 22G X 3-1/2" MISC *spinal needle (disp) 22 g*	2	
WHITACRE SPINAL NEEDLE 25G X 1-1/2" MISC *spinal needle (disp) 25 g*	2	
WHITACRE SPINAL NEEDLE 25G X 3-1/2" MISC *spinal needle (disp) 25 g*	2	
WHITACRE SPINAL NEEDLE 25G X 4-11/16" MISC *spinal needle (disp) 25 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WHITACRE SPINAL NEEDLE 27G X 1-1/2" MISC *spinal needle (disp) 27 g*	2	
WHITACRE SPINAL NEEDLE 27G X 3-1/2" MISC *spinal needle (disp) 27 g*	2	
WHITACRE SPINAL NEEDLE 27G X 4-11/16" MISC *spinal needle (disp) 27 g*	2	
WHITE PED ARTERIAL NEEDLE 19G X 1-1/2" MISC *needle (disp) 19 g*	2	
WHITE PED ARTERIAL NEEDLE 20G X 1-1/2" MISC *needle (disp) 20 g*	2	
YALE DISP NEEDLES 21G X 1-1/4" MISC *needle (disp) 21 g*	2	
YALE REUSABLE NEEDLE 17G X 3-1/2" MISC *needle (reusable) 17 g*	2	
YALE REUSABLE NEEDLE 19G X 3" MISC *needle (reusable) 19 g*	2	
YALE REUSABLE NEEDLE 25G X 2" MISC *needle (reusable) 25 g*	2	
YALE REUSABLE NEEDLE 26G X 3/4" MISC *needle (reusable) 26 g*	2	
YALE REUSABLE NEEDLE 27G X 1" MISC *needle (reusable) 27 g*	2	
YALE REUSABLE NEEDLE 30G X 1/2" MISC *needle (reusable) 30 g*	2	
YALE REUSABLE TB SYRINGE 1/2 ML MISC *syringe (reusable)*	2	
YALE SPINAL NEEDLE 17G X 3-1/2" MISC *spinal needle (reusable) 17 g*	2	
YALE SPINAL NEEDLE 18G X 3" MISC *spinal needle (reusable) 18 g*	2	
YALE SPINAL NEEDLE 18G X 3-1/2" MISC *spinal needle (reusable) 18 g*	2	
YALE SPINAL NEEDLE 19G X 3" MISC *spinal needle (reusable) 19 g*	2	
YALE SPINAL NEEDLE 19G X 3-1/2" MISC *spinal needle (reusable) 19 g*	2	
YALE SPINAL NEEDLE 20G X 2" MISC *spinal needle (reusable) 20 g*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
YALE SPINAL NEEDLE 20G X 3" MISC *spinal needle (reusable) 20 g*	2	
YALE SPINAL NEEDLE 20G X 3-1/2" MISC *spinal needle (reusable) 20 g*	2	
YALE SPINAL NEEDLE 20G X 4" MISC *spinal needle (reusable) 20 g*	2	
YALE SPINAL NEEDLE 22G X 1-1/2" MISC *spinal needle (reusable) 22 g*	2	
YALE SPINAL NEEDLE 22G X 2" MISC *spinal needle (reusable) 22 g*	2	
YALE SPINAL NEEDLE 22G X 3" MISC *spinal needle (reusable) 22 g*	2	
YALE SPINAL NEEDLE 22G X 3-1/2" MISC *spinal needle (reusable) 22 g*	2	
YALE SPINAL NEEDLE 24G X 3-1/2" MISC *spinal needle (reusable) 24 g*	2	
YALE SPINAL NEEDLE 26G X 3-1/2" MISC *spinal needle (reusable) 26 g*	2	
ORAL DOSING DEVICES		
EXACTA-MED ORAL SYRINGE 5ML MISC *oral syringes*	3	
SYRINGE PRECISEDOSE DISPENSER MISC *oral syringes*	3	
OSTOMY SUPPLIES		
KARAYA GUM POWDER *karaya gum (ostomy)*	1	
PARENTERAL THERAPY SUPPLIES		
CLEAR GLASS VIALS 5ML MISC *parenteral therapy supplies*	1	
I-PORT ADVANCE 6MM MISC *parenteral therapy supplies*	3	
I-PORT ADVANCE 9MM MISC *parenteral therapy supplies*	3	
MILLEX-FG FILTER/TEFLON MISC *parenteral therapy supplies*	3	
MONOJECT HYPODERMIC NEEDLE TIP MISC *parenteral therapy supplies*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE CAPS MISC *parenteral therapy supplies*	1	
SYRINGE FILTER 0.2 MICRON/32MM MISC *parenteral therapy supplies*	1	
SYRINGE FILTER 0.45 MICRON MISC *parenteral therapy supplies*	1	
SYRINGE FILTER/0.2 MICRON/25MM MISC *parenteral therapy supplies*	1	
SYRINGE FILTER/0.2 MICRON/30MM MISC *parenteral therapy supplies*	1	
SYRINGE FILTER/MILLEX-GS/25MM MISC *parenteral therapy supplies*	3	
SYRINGE FILTER/MILLEX-GV/33MM MISC *parenteral therapy supplies*	1	
SYRINGE FILTER/MILLEX/25MM MISC *parenteral therapy supplies*	1	
VACUUM FILTER 0.20UM/150ML MISC *parenteral therapy supplies*	1	
VIAL STOPPER MISC *parenteral therapy supplies*	1	
PEAK FLOW METERS		
ASSESS FULL RANGE PEAK METER DEVICE *peak flow meter*	3	
RESPIRATORY THERAPY SUPPLIES		
ACE AEROSOL CLOUD ENHANCER MISC *respiratory therapy supplies*	3	
ADULT MASK DEVICE *respiratory therapy supplies*	2	
ADULT MASK MISC *respiratory therapy supplies*	1	
AEROBIKA DEVICE *respiratory therapy supplies*	2	
ALL FLOW 1000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
ALL FLOW 2000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
ALL FLOW 3000 PFT FILTER DEVICE *respiratory therapy supplies*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALL FLOW 4000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
ALL FLOW 5000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
ALL FLOW 6000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
ALL FLOW 7000 PFT FILTER DEVICE *respiratory therapy supplies*	2	
BREATHE EASE NEB MASK/CHILD MISC *respiratory therapy supplies*	3	
BREATHE EASE NEB MASK/INFANT MISC *respiratory therapy supplies*	3	
BREATHERITE VALVED MDI CHAMBER DEVICE *respiratory therapy supplies*	2	
CARETOUCH 2 CPAP HOSE HANGER MISC *respiratory therapy supplies*	3	
CARETOUCH CPAP & BIPAP HOSE MISC *respiratory therapy supplies*	3	
CARETOUCH CPAP MASK WIPES MISC *respiratory therapy supplies*	3	
CARETOUCH CPAP PRE-WASH SOLN MISC *respiratory therapy supplies*	3	
CARETOUCH CPAP TUBE BRUSH MISC *respiratory therapy supplies*	3	
CARETOUCH UNIVERSL CPAP FILTER MISC *respiratory therapy supplies*	3	
CO MONITOR DEVICE *respiratory therapy supplies*	2	
EBASE CONTROLLER KIT MISC *respiratory therapy supplies*	3	
EFLOW SCF AEROSOL HEAD MISC *respiratory therapy supplies*	3	
FILTER AIR PP MISC *respiratory therapy supplies*	1	
IN-CHECK DIAL FLOW TRAINER DEVICE *respiratory therapy supplies*	2	
IN-CHECK INSPIRATORY FLOW MTR DEVICE *respiratory therapy supplies*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MISTASSIST DEVICE *respiratory therapy supplies*	2	
NEBULIZER DEVICE *respiratory therapy supplies*	2	
OMBRA TABLE TOP COMPRESSOR DEVICE *respiratory therapy supplies*	2	
ONE FLOW SPIROMETER DEVICE *respiratory therapy supplies*	2	
PARI ALTERA NEBULIZER HANDSET MISC *respiratory therapy supplies*	3	
PARI ERAPID NEBULIZER HANDSET MISC *respiratory therapy supplies*	3	
PARI MANUAL INTERRUPTER DEVICE *respiratory therapy supplies*	2	
PARI TREK S COMBO PACK DEVICE *respiratory therapy supplies*	2	
PARI TREK S PORTABLE POWER KIT *respiratory therapy supplies*	3	
PRIMEAIRE HOLDING CHAMBER DEVICE *respiratory therapy supplies*	2	
QUAKE DEVICE *respiratory therapy supplies*	2	
SPIRO PD DEVICE *respiratory therapy supplies*	2	
THRESHOLD PEP DEVICE *respiratory therapy supplies*	2	
VORTEX HOLDING CHAMBER/MASK DEVICE *respiratory therapy supplies*	2	
RUBBER GOODS		
ENEMA BOTTLE MISC *rubber goods*	1	
SCAR TREATMENTS		
CELLPAD SHEET *occlusive silicone sheets*	3	
CICASIL SHEET *occlusive silicone sheets*	3	
CICATRACE PAD SHEET *occlusive silicone sheets*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COATAMAX PATCH SHEET *occlusive silicone sheets*	3	
CRYSTASIL SHEET *occlusive silicone sheets*	3	
DERM-SILK SHEET *occlusive silicone sheets*	3	
KELOTOP SHEET *occlusive silicone sheets*	3	
POLYTOZA PATCH SHEET *occlusive silicone sheets*	3	
SCARCINPAD SHEET *occlusive silicone sheets*	3	
SCARSILK SHEET *occlusive silicone sheets*	3	
SILIVEX SHEET *occlusive silicone sheets*	3	
SILTREX SHEET *occlusive silicone sheets*	3	
SKIN ADHESIVES		
SURGISEAL LIQUID *skin adhesives*	3	
SURGISEAL STYLUS LIQUID *skin adhesives*	3	
SURGISEAL TWIST LIQUID *skin adhesives*	3	
SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES		
AEROCHAMBER MINI CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
AEROCHAMBER MV MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER PLUS FLO-VU MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER PLUS FLO-VU LARGE MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER PLUS FLO-VU SMALL MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER PLUS FLO-VU W/MASK MISC *spacer/aerosol-holding chambers*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AEROCHAMBER Z-STAT PLUS MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER Z-STAT PLUS CHAMBR MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER Z-STAT PLUS/LARGE MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC *spacer/aerosol-holding chambers*	2	
AEROCHAMBER Z-STAT PLUS/SMALL MISC *spacer/aerosol-holding chambers*	2	
AEROVENT PLUS DEVICE *spacer/aerosol-holding chambers*	2	
ARIAL CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
BREATHE EASE LARGE DEVICE *spacer/aerosol-holding chambers*	2	
BREATHE EASE MEDIUM DEVICE *spacer/aerosol-holding chambers*	2	
BREATHE EASE SMALL DEVICE *spacer/aerosol-holding chambers*	2	
BREATHERITE MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE COLL SPACER ADULT MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE COLL SPACER CHILD MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE COLL SPACER INFANT MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE RIGID SPACER/MASK MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE SPACER NEONATE MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE SPACER SMALL CHILD MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE/LARGE MASK MISC *spacer/aerosol-holding chambers*	2	
BREATHERITE/MEDIUM MASK MISC *spacer/aerosol-holding chambers*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BREATHERITE/SMALL MASK MISC *spacer/aerosol-holding chambers*	2	
CLEVER CHOICE HOLDING CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
COMPACT SPACE CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
COMPACT SPACE CHAMBER/LG MASK DEVICE *spacer/aerosol-holding chambers*	2	
COMPACT SPACE CHAMBER/MED MASK DEVICE *spacer/aerosol-holding chambers*	2	
COMPACT SPACE CHAMBER/SM MASK DEVICE *spacer/aerosol-holding chambers*	2	
EASIVENT MISC *spacer/aerosol-holding chambers*	2	
EASIVENT MASK LARGE MISC *spacer/aerosol-holding chambers*	2	
EASIVENT MASK MEDIUM MISC *spacer/aerosol-holding chambers*	2	
EASIVENT MASK SMALL MISC *spacer/aerosol-holding chambers*	2	
EQ SPACE CHAMBER ANTI-STATIC DEVICE *spacer/aerosol-holding chambers*	2	
EQ SPACE CHAMBER ANTI-STATIC L DEVICE *spacer/aerosol-holding chambers*	2	
EQ SPACE CHAMBER ANTI-STATIC M DEVICE *spacer/aerosol-holding chambers*	2	
EQ SPACE CHAMBER ANTI-STATIC S DEVICE *spacer/aerosol-holding chambers*	2	
FLEXICHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
FLEXICHAMBER ADULT MASK/SMALL MISC *spacer/aerosol-holding chamber supplies - masks*	2	
FLEXICHAMBER CHILD MASK/LARGE MISC *spacer/aerosol-holding chamber supplies - masks*	2	
FLEXICHAMBER CHILD MASK/SMALL MISC *spacer/aerosol-holding chamber supplies - masks*	2	
INSPIRACHAMBER/LARGE DEVICE *spacer/aerosol-holding chambers*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSPIRACHAMBER/MEDIUM DEVICE *spacer/aerosol-holding chambers*	2	
INSPIRACHAMBER/MOUTHPIECE DEVICE *spacer/aerosol-holding chambers*	2	
INSPIRACHAMBER/SMALL DEVICE *spacer/aerosol-holding chambers*	2	
INSPIREASE MISC *spacer/aerosol-holding chambers*	2	
INSPIREASE RESERVOIR BAGS MISC *spacer/aerosol-holding chamber supplies - bags*	2	
LITEAIRE DEVICE *spacer/aerosol-holding chambers*	2	
MASK VORTEX MISC *spacer/aerosol-holding chamber supplies - masks*	2	
MICROCHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
MICROCHAMBER MISC *spacer/aerosol-holding chambers*	2	
MICROSPACER MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER ADVANTAGE-LG MASK MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER ADVANTAGE-MED MASK MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER ADVANTAGE-SM MASK MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER DIAMOND MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER DIAMOND-LG MASK DEVICE *spacer/aerosol-holding chambers*	2	
OPTICHAMBER DIAMOND-MD MASK MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER DIAMOND-SM MASK MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER FACE MASK-LARGE MISC *spacer/aerosol-holding chambers*	2	
OPTICHAMBER FACE MASK-MEDIUM MISC *spacer/aerosol-holding chambers*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPTICHAMBER FACE MASK-SMALL MISC *spacer/aerosol-holding chambers*	2	
OPTIHALER DEVICE *spacer/aerosol-holding chambers*	2	
OPTIHALER MISC *spacer/aerosol-holding chambers*	2	
PANDA MASK LARGE MISC *spacer/aerosol-holding chamber supplies - masks*	2	
PANDA MASK MEDIUM MISC *spacer/aerosol-holding chamber supplies - masks*	2	
PANDA MASK SMALL MISC *spacer/aerosol-holding chamber supplies - masks*	2	
PEDIATRIC PANDA MASK MISC *spacer/aerosol-holding chamber supplies - masks*	2	
POCKET CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
POCKET SPACER DEVICE *spacer/aerosol-holding chambers*	2	
PRO COMFORT SPACER ADULT MISC *spacer/aerosol-holding chambers*	2	
PRO COMFORT SPACER CHILD MISC *spacer/aerosol-holding chambers*	2	
PRO COMFORT SPACER INFANT DEVICE *spacer/aerosol-holding chambers*	2	
PROCARE SPACER/ADULT MASK DEVICE *spacer/aerosol-holding chambers*	2	
PROCARE SPACER/CHILD MASK DEVICE *spacer/aerosol-holding chambers*	2	
RITEFLO DEVICE *spacer/aerosol-holding chambers*	2	
VALVED HOLDING CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
VORTEX VALVED HOLDING CHAMBER DEVICE *spacer/aerosol-holding chambers*	2	
WATCHHALER DEVICE *spacer/aerosol-holding chambers*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
URINARY DRAINAGE & IRRIGATION SUPPLIES		
BARD IRRIGATION SYRINGE/BULB MISC *irrigation supplies*	3	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)		
NURTEC 75 MG TAB DISP *rimegepant sulfate*	3	PA AL1 At least 18 yrs old
UBRELVY 100 MG TAB *ubrogepant*	3	QL 16 / 30 DAYS PA AL1 At least 18 yrs old
UBRELVY 50 MG TAB *ubrogepant*	3	QL 16 / 30 DAYS PA AL1 At least 18 yrs old
CGRP RECEPTOR ANTAGONISTS - MONOCOLONAL ANTIBODIES		
AIMOVIG (140 MG DOSE) 70 MG/ML SOLN A-INJ *erenumab-aooe*	2	QL 1 / 28 DAYS PA AL1 At least 18 yrs old
AIMOVIG 140 MG/ML SOLN A-INJ *erenumab-aooe*	2	QL 1 / 28 DAYS PA AL1 At least 18 yrs old
AIMOVIG 70 MG/ML SOLN A-INJ *erenumab-aooe*	2	QL 1 / 28 DAYS PA AL1 At least 18 yrs old
EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR *galcanezumab-gnlm*	2	QL 9 / 180 DAYS PA AL1 At least 18 yrs old
EMGALITY 120 MG/ML SOLN A-INJ *galcanezumab-gnlm*	2	QL 1 / 28 DAYS PA AL1 At least 18 yrs old
EMGALITY 120 MG/ML SOLN PRSYR *galcanezumab-gnlm*	2	QL 1 / 28 DAYS PA AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYEPTI 100 MG/ML SOLUTION *eptinezumab-jjmr*	3	S Specialty Drug
ERGOT COMBINATIONS		
ergotamine-caffeine 1-100 mg tab	1	
MIGERGOT 2-100 MG SUPPOS *ergotamine w/ caffeine*	3	
dihydroergotamine mesylate 1 mg/ml solution	1	
ERGOMAR 2 MG SL TAB *ergotamine tartrate*	3	
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA 50 MG PACKET *diclofenac potassium (migraine)*	3	
SELECTIVE SEROTONIN AGONIST-NSAID COMBINATIONS		
sumatriptan-naproxen sodium 85-500 mg tab	1	QL 18 / 30 DAYS
TREXIMET 10-60 MG TAB *sumatriptan-naproxen sodium*	3	QL 9 / 30 DAYS ST
SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
almotriptan malate 12.5 mg tab	1	QL 12 / 30 DAYS
almotriptan malate 6.25 mg tab	1	QL 12 / 30 DAYS
eletriptan hydrobromide 20 mg tab	1	QL 12 / 30 DAYS
eletriptan hydrobromide 40 mg tab	1	QL 12 / 30 DAYS
frovatriptan succinate 2.5 mg tab	1	QL 18 / 30 DAYS
naratriptan hcl 1 mg tab	1	QL 18 / 30 DAYS
naratriptan hcl 2.5 mg tab	1	QL 18 / 30 DAYS
rizatriptan benzoate 10 mg tab	1	QL 18 / 30 DAYS
rizatriptan benzoate 10 mg tab disp	1	QL 18 / 30 DAYS
rizatriptan benzoate 5 mg tab	1	QL 18 / 30 DAYS
rizatriptan benzoate 5 mg tab disp	1	QL 18 / 30 DAYS
sumatriptan 20 mg/act solution	1	QL 12 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sumatriptan 5 mg/act solution	1	QL 12 / 30 DAYS
sumatriptan succinate 100 mg tab	1	QL 18 / 30 DAYS
sumatriptan succinate 25 mg tab	1	QL 18 / 30 DAYS
sumatriptan succinate 4 mg/0.5ml soln a-inj	1	QL 6 / 30 DAYS
sumatriptan succinate 50 mg tab	1	QL 18 / 30 DAYS
sumatriptan succinate 6 mg/0.5ml soln a-inj	1	QL 6 / 30 DAYS
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SOLN PRSYR *sumatriptan succinate*	2	QL 6 / 30 DAYS ST
sumatriptan succinate 6 mg/0.5ml solution	1	QL 5 / 30 DAYS
sumatriptan succinate refill 4 mg/0.5ml soln cart	1	QL 6 / 30 DAYS
sumatriptan succinate refill 6 mg/0.5ml soln cart	1	QL 6 / 30 DAYS
TOSYMRA 10 MG/ACT SOLUTION *sumatriptan*	3	QL 18 / 30 DAYS ST
zolmitriptan 2.5 mg tab	1	QL 12 / 30 DAYS
zolmitriptan 2.5 mg tab disp	1	QL 12 / 30 DAYS
zolmitriptan 5 mg tab	1	QL 12 / 30 DAYS
zolmitriptan 5 mg tab disp	1	QL 12 / 30 DAYS
SELECTIVE SEROTONIN AGONISTS 5-HT(1F)		
REYVOW 100 MG TAB *lasmiditan succinate*	3	PA AL1 At least 18 yrs old
REYVOW 50 MG TAB *lasmiditan succinate*	3	PA AL1 At least 18 yrs old
MINERALS & ELECTROLYTES		
BICARBONATES		
SODIUM ACETATE 2 MEQ/ML SOLUTION *sodium acetate*	1	
sodium acetate 4 meq/ml solution	1	
sodium bicarbonate 4.2 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium bicarbonate 8.4 % solution	1	
SODIUM LACTATE 5 MEQ/ML SOLUTION *sodium lactate*	1	
THAM 30 MEQ/100ML SOLUTION *tromethamine*	3	
CALCIUM		
calcium chloride 10 % solution	1	
CALCIUM GLUCONATE 10 % SOLUTION *calcium gluconate*	1	
CALCIUM COMBINATIONS		
CALCIUM GLUCONATE-NACL 1-0.675 GM/50ML-% SOLUTION *calcium gluconate-sodium chloride*	1	
CALCIUM GLUCONATE-NACL 2-0.675 GM/100ML-% SOLUTION *calcium gluconate-sodium chloride*	1	
ELECTROLYTES & DEXTROSE		
DEXTROSE 5%/ELECTROLYTE #48 SOLUTION *electrolyte-48 in dextrose*	1	
dextrose in lactated ringers 5 % solution	1	
DEXTROSE-NACL 10-0.2 % SOLUTION *dextrose w/ sodium chloride*	1	
DEXTROSE-NACL 10-0.45 % SOLUTION *dextrose w/ sodium chloride*	1	
DEXTROSE-NACL 2.5-0.45 % SOLUTION *dextrose w/ sodium chloride*	1	
dextrose-nacl 5-0.2 % solution	1	
DEXTROSE-NACL 5-0.225 % SOLUTION *dextrose w/ sodium chloride*	1	
DEXTROSE-NACL 5-0.3 % SOLUTION *dextrose w/ sodium chloride*	1	
dextrose-nacl 5-0.33 % solution	1	
dextrose-nacl 5-0.45 % solution	1	
dextrose-nacl 5-0.9 % solution	1	
DEXTROSE-SODIUM CHLORIDE 5-0.225 % SOLUTION *dextrose w/ sodium chloride*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXTROSE-SODIUM CHLORIDE 5-0.3 % SOLUTION *dextrose w/ sodium chloride*	1	
dextrose-sodium chloride 5-0.45 % solution	1	
dextrose-sodium chloride 5-0.9 % solution	1	
ELLIOTTS B SOLUTION *intrathecal electrolytes w/ dextrose*	3	
IONOSOL-MB IN D5W SOLUTION *electrolyte-mb in dextrose*	3	
ISOLYTE-P IN D5W SOLUTION *electrolyte-p in dextrose*	3	
KCL IN D5W LACTATED RINGERS 40 MEQ/L SOLUTION *potassium chloride in d5w lactated ringers*	1	
kcl in dextrose-nacl 0.15-5-0.45 % solution	1	
kcl in dextrose-nacl 10-5-0.45 meq/l-%-% solution	1	
kcl in dextrose-nacl 20-5-0.2 meq/l-%-% solution	1	
KCL IN DEXTROSE-NACL 20-5-0.225 MEQ/L-%-% SOLUTION *potassium chloride in dextrose & sodium chloride*	1	
KCL IN DEXTROSE-NACL 20-5-0.33 MEQ/L-%-% SOLUTION *potassium chloride in dextrose & sodium chloride*	1	
kcl in dextrose-nacl 20-5-0.45 meq/l-%-% solution	1	
kcl in dextrose-nacl 20-5-0.9 meq/l-%-% solution	1	
kcl in dextrose-nacl 30-5-0.45 meq/l-%-% solution	1	
kcl in dextrose-nacl 40-5-0.45 meq/l-%-% solution	1	
KCL IN DEXTROSE-NACL 40-5-0.9 MEQ/L-%-% SOLUTION *potassium chloride in dextrose & sodium chloride*	1	
KCL-LACTATED RINGERS-D5W 20 MEQ/L SOLUTION *potassium chloride in d5w lactated ringers*	1	
NORMOSOL-M IN D5W SOLUTION *electrolyte-m in dextrose*	3	
NORMOSOL-R IN D5W SOLUTION *electrolyte-r in dextrose*	3	
potassium chloride in dextrose 20-5 meq/l-% solution	1	
POTASSIUM CHLORIDE IN DEXTROSE 40-5 MEQ/L-% SOLUTION *potassium chloride in dextrose*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELECTROLYTES PARENTERAL		
ISOLYTE-S SOLUTION *electrolyte-s*	3	
ISOLYTE-S PH 7.4 SOLUTION *electrolyte-s (ph 7.4)*	3	
lactated ringers solution	1	
LACTATED RINGERS SOLUTION *lactated ringer's*	1	
NORMOSOL-R SOLUTION *electrolyte-r*	3	
NORMOSOL-R PH 7.4 SOLUTION *electrolyte-r (ph 7.4)*	3	
PLASMA-LYTE 148 SOLUTION *electrolyte-148*	3	
PLASMA-LYTE A SOLUTION *electrolyte-a*	3	
potassium chloride in nacl 20-0.45 meq/l-% solution	1	
POTASSIUM CHLORIDE IN NACL 20-0.45 MEQ/L-% SOLUTION *potassium chloride in nacl*	1	
potassium chloride in nacl 20-0.9 meq/l-% solution	1	
potassium chloride in nacl 40-0.9 meq/l-% solution	1	
POTASSIUM CHLORIDE IN NACL 40-0.9 MEQ/L-% SOLUTION *potassium chloride in nacl*	1	
ringers solution	1	
TPN ELECTROLYTES CONC *parenteral electrolytes*	3	
FLUORIDE		
FLUORABON 0.55 (0.25 F) MG/0.6ML SOLUTION *sodium fluoride*	3	ACA Affordable Care Act
fluoritab 0.275 (0.125 f) mg/drop solution	1	ACA Affordable Care Act
fluoritab 0.55 (0.25 f) mg chew tab	1	ACA Affordable Care Act
fluoritab 1.1 (0.5 f) mg chew tab	1	ACA Affordable Care Act
fluoritab 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLURA-DROPS 0.55 (0.25 F) MG/DROP SOLUTION *sodium fluoride*	2	ACA Affordable Care Act
ludent 0.55 (0.25 f) mg chew tab	1	ACA Affordable Care Act
ludent 1.1 (0.5 f) mg chew tab	1	ACA Affordable Care Act
ludent 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act
nafrinse 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act
nafrinse drops 0.275 (0.125 f) mg/drop solution	1	ACA Affordable Care Act
sodium fluoride 0.55 (0.25 f) mg chew tab	1	ACA Affordable Care Act
sodium fluoride 1.1 (0.5 f) mg chew tab	1	ACA Affordable Care Act
SODIUM FLUORIDE 1.1 (0.5 F) MG TAB *sodium fluoride*	2	ACA Affordable Care Act
sodium fluoride 1.1 (0.5 f) mg/ml solution	1	ACA Affordable Care Act
sodium fluoride 2.2 (1 f) mg chew tab	1	ACA Affordable Care Act
SODIUM FLUORIDE 2.2 (1 F) MG TAB *sodium fluoride*	2	ACA Affordable Care Act
FLUORIDE COMBINATIONS		
FLORIVA 0.25-400 MG-UNIT/ML LIQUID *sodium fluoride-vitamin d*	3	ACA Affordable Care Act
MAGNESIUM		
MAGNESIUM SULFATE 2 GM/50ML SOLUTION *magnesium sulfate*	1	
magnesium sulfate 2 gm/50ml solution	1	
MAGNESIUM SULFATE 20 GM/500ML SOLUTION *magnesium sulfate*	1	
magnesium sulfate 20 gm/500ml solution	1	
MAGNESIUM SULFATE 4 GM/100ML SOLUTION *magnesium sulfate*	1	
magnesium sulfate 4 gm/100ml solution	1	
MAGNESIUM SULFATE 4 GM/50ML SOLUTION *magnesium sulfate*	1	
magnesium sulfate 4 gm/50ml solution	1	
MAGNESIUM SULFATE 40 GM/1000ML SOLUTION *magnesium sulfate*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
magnesium sulfate 40 gm/1000ml solution	1	
magnesium sulfate 50 % solution	1	
MAGNESIUM SULFATE IN D5W 1-5 GM/100ML-% SOLUTION *magnesium sulfate in dextrose*	1	
magnesium sulfate in d5w 1-5 gm/100ml-% solution	1	
MANGANESE		
MANGANESE CHLORIDE 0.1 MG/ML SOLUTION *manganese chloride*	1	
PHOSPHATE		
K-PHOS 500 MG TAB *potassium phosphate monobasic*	2	
phospha 250 neutral 155-852-130 mg tab	1	
phospho-trin 250 neutral 155-852-130 mg tab	1	
phosphorous 155-852-130 mg tab	1	
POTASSIUM PHOSPHATES 15 MMOLE/5ML SOLUTION *potassium phosphates*	1	
POTASSIUM PHOSPHATES 150 MMOLE/50ML SOLUTION *potassium phosphates*	1	
potassium phosphates 45 mmole/15ml solution	1	
POTASSIUM PHOSPHATES(71 MEQ K) 45 MMOLE/15ML SOLUTION *potassium phosphates*	1	
sodium phosphates 45 mmole/15ml solution	1	
virt-phos 250 neutral 155-852-130 mg tab	1	
POTASSIUM		
K-TAB 8 MEQ TAB ER *potassium chloride*	3	
klor-con 10 10 meq tab er	1	
klor-con 20 meq packet	1	
klor-con 8 meq tab er	1	
klor-con m10 10 meq tab er	1	
KLOR-CON M15 15 MEQ TAB ER *potassium chloride microencapsulated crystals er*	3	
klor-con m20 20 meq tab er	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
klor-con sprinkle 10 meq cap er	1	
klor-con sprinkle 8 meq cap er	1	
potassium acetate 2 meq/ml solution	1	
POTASSIUM CHLORIDE 0.4 MEQ/ML SOLUTION *potassium chloride*	1	
POTASSIUM CHLORIDE 10 MEQ/100ML SOLUTION *potassium chloride*	1	
potassium chloride 10 meq/100ml solution	1	
POTASSIUM CHLORIDE 10 MEQ/50ML SOLUTION *potassium chloride*	1	
potassium chloride 2 meq/ml solution	1	
potassium chloride 20 meq packet	1	
POTASSIUM CHLORIDE 20 MEQ/100ML SOLUTION *potassium chloride*	1	
potassium chloride 20 meq/100ml solution	1	
potassium chloride 20 meq/15ml (10%) solution	1	
POTASSIUM CHLORIDE 20 MEQ/50ML SOLUTION *potassium chloride*	1	
POTASSIUM CHLORIDE 40 MEQ/100ML SOLUTION *potassium chloride*	1	
potassium chloride 40 meq/15ml (20%) solution	1	
potassium chloride crys er 10 meq tab er	1	
potassium chloride crys er 20 meq tab er	1	
potassium chloride er 10 meq cap er	1	
potassium chloride er 10 meq tab er	1	
potassium chloride er 20 meq tab er	1	
potassium chloride er 8 meq cap er	1	
potassium chloride er 8 meq tab er	1	
POTASSIUM CHLORIDE ER 8 MEQ TAB ER *potassium chloride*	2	
SODIUM		
LIQUIVIDA HYDRATION 0.9 % KIT *sodium chloride*	3	
sodium chloride (pf) 0.9 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium chloride 0.45 % solution	1	
sodium chloride 0.9 % solution	1	
sodium chloride 2.5 meq/ml solution	1	
sodium chloride 3 % solution	1	
sodium chloride 5 % solution	1	
sodium chloride flush 0.9 % solution	1	
TRACE MINERALS		
CHROMIC CHLORIDE 40 MCG/10ML SOLUTION *chromic chloride*	1	
CUPRIC CHLORIDE 0.4 MG/ML SOLUTION *cupric chloride*	1	
SELENIOUS ACID 60 MCG/ML SOLUTION *selenious acid*	1	
ZINC		
GALZIN 25 MG CAP *zinc acetate (oral)*	3	
GALZIN 50 MG CAP *zinc acetate (oral)*	3	
ZINC CHLORIDE 1 MG/ML SOLUTION *zinc chloride*	1	
ZINC SULFATE 1 MG/ML SOLUTION *zinc sulfate*	1	
ZINC SULFATE 3 MG/ML SOLUTION *zinc sulfate*	1	
ZINC SULFATE 5 MG/ML SOLUTION *zinc sulfate*	1	
MISCELLANEOUS THERAPEUTIC CLASSES		
ANTILEPROTICS		
THALOMID 100 MG CAP *thalidomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
THALOMID 150 MG CAP *thalidomide*	2	QL 60 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THALOMID 200 MG CAP *thalidomide*	2	QL 60 / 30 DAYS PA S Specialty Drug
THALOMID 50 MG CAP *thalidomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS		
BENLYSTA 120 MG RECON SOLN *belimumab*	3	QL 7.5 / 30 DAYS PA S Specialty Drug
BENLYSTA 200 MG/ML SOLN A-INJ *belimumab*	3	QL 4 / 28 DAYS PA S Specialty Drug
BENLYSTA 200 MG/ML SOLN PRSYR *belimumab*	3	QL 4 / 28 DAYS PA S Specialty Drug
BENLYSTA 400 MG RECON SOLN *belimumab*	3	QL 10 / 30 DAYS PA S Specialty Drug
CHELATING AGENTS		
clovique 250 mg cap	1	S Specialty Drug
penicillamine 250 mg cap	1	S Specialty Drug
penicillamine 250 mg tab	1	S Specialty Drug
trientine hcl 250 mg cap	1	S Specialty Drug
CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS		
PRISMASOL B22GK 4/0 22-4 MEQ/L SOLUTION *bicarbonate-dextrose-potassium (crrt)*	3	
PRISMASOL BGK 0/2.5 32-2.5 MEQ/L SOLUTION *bicarbonate-dextrose-calcium (crrt)*	3	
PRISMASOL BGK 2/0 32-2 MEQ/L SOLUTION *bicarbonate-dextrose-potassium (crrt)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRISMASOL BGK 2/3.5 32-2-3.5 MEQ/L SOLUTION *bicarbonate-dextrose-potassium-calcium (crrt)*	3	
PRISMASOL BGK 4/0/1.2 32-4-1.2 MEQ/L SOLUTION *bicarbonate-dextose-potassium-magnesium (crrt)*	3	
PRISMASOL BGK 4/2.5 32-4-2.5 MEQ/L SOLUTION *bicarbonate-dextrose-potassium-calcium (crrt)*	3	
PRISMASOL BK 0/0/1.2 32-1.2 MEQ/L SOLUTION *bicarbonate-magnesium (crrt)*	3	
CYCLOSPORINE ANALOGS		
cyclosporine 100 mg cap	1	
cyclosporine 25 mg cap	1	
cyclosporine 50 mg/ml solution	1	
cyclosporine modified 100 mg cap	1	
cyclosporine modified 100 mg/ml solution	1	
cyclosporine modified 25 mg cap	1	
cyclosporine modified 50 mg cap	1	
gengraf 100 mg cap	1	
gengraf 100 mg/ml solution	1	
gengraf 25 mg cap	1	
NEORAL 100 MG CAP *cyclosporine modified (for microemulsion)*	3	
NEORAL 100 MG/ML SOLUTION *cyclosporine modified (for microemulsion)*	3	
NEORAL 25 MG CAP *cyclosporine modified (for microemulsion)*	3	
SANDIMMUNE 100 MG CAP *cyclosporine*	3	
SANDIMMUNE 100 MG/ML SOLUTION *cyclosporine*	3	
SANDIMMUNE 25 MG CAP *cyclosporine*	3	
SANDIMMUNE 50 MG/ML SOLUTION *cyclosporine*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENZYMES		
AMPHADASE 150 UNIT/ML SOLUTION *hyaluronidase bovine*	3	S Specialty Drug
HYLENEX 150 UNIT/ML SOLUTION *hyaluronidase human*	3	
VITRASE 200 UNIT/ML SOLUTION *hyaluronidase ovine*	3	S Specialty Drug
XIAFLEX 0.9 MG RECON SOLN *collagenase clostridium histolyticum*	3	S Specialty Drug
IMMUNE GLOBULIN IMMUNOSUPPRESSANTS		
ATGAM 50 MG/ML INJECTABLE *lymphocyte immune globulin,anti-thymocyte globulin (equine)*	3	S Specialty Drug
THYMOGLOBULIN 25 MG RECON SOLN *anti-thymocyte globulin (rabbit), lymphocyte immune globulin*	3	
IMMUNOMODULATORS FOR MYELODYSPLASTIC SYNDROMES		
REVLIMID 10 MG CAP *lenalidomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
REVLIMID 15 MG CAP *lenalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
REVLIMID 2.5 MG CAP *lenalidomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
REVLIMID 20 MG CAP *lenalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
REVLIMID 25 MG CAP *lenalidomide*	2	QL 21 / 28 DAYS PA S Specialty Drug
REVLIMID 5 MG CAP *lenalidomide*	2	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
CELLCEPT 200 MG/ML RECON SUSP *mycophenolate mofetil*	3	
CELLCEPT 250 MG CAP *mycophenolate mofetil*	3	
CELLCEPT 500 MG TAB *mycophenolate mofetil*	3	
CELLCEPT INTRAVENOUS 500 MG RECON SOLN *mycophenolate mofetil hcl*	3	
mycophenolate mofetil 200 mg/ml recon susp	1	
mycophenolate mofetil 250 mg cap	1	
mycophenolate mofetil 500 mg tab	1	
mycophenolate mofetil hcl 500 mg recon soln	1	
mycophenolate sodium 180 mg tab dr	1	
mycophenolate sodium 360 mg tab dr	1	
MYFORTIC 180 MG TAB DR *mycophenolate sodium*	3	
MYFORTIC 360 MG TAB DR *mycophenolate sodium*	3	
INTERLEUKIN-6 (IL-6) ANTAGONISTS		
SYLVANT 100 MG RECON SOLN *siltuximab*	3	S Specialty Drug
SYLVANT 400 MG RECON SOLN *siltuximab*	3	S Specialty Drug
IRRIGATION SOLUTIONS		
lactated ringers solution	1	
physiolyte solution	1	
physiosol irrigation solution	1	
ringers irrigation solution	1	
sterile water for irrigation solution	1	
tis-u-sol solution	1	
water for irrigation, sterile solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MACROLIDE IMMUNOSUPPRESSANTS		
ASTAGRAF XL 0.5 MG CAP ER 24H *tacrolimus*	3	QL 450 / 30 DAYS
ASTAGRAF XL 1 MG CAP ER 24H *tacrolimus*	3	QL 300 / 30 DAYS
ASTAGRAF XL 5 MG CAP ER 24H *tacrolimus*	3	QL 180 / 30 DAYS
ENVARSUS XR 0.75 MG TAB ER 24H *tacrolimus*	3	QL 30 / 30 DAYS
ENVARSUS XR 1 MG TAB ER 24H *tacrolimus*	3	QL 30 / 30 DAYS
ENVARSUS XR 4 MG TAB ER 24H *tacrolimus*	3	QL 30 / 30 DAYS
everolimus 0.25 mg tab	1	
everolimus 0.5 mg tab	1	
everolimus 0.75 mg tab	1	
PROGRAF 0.2 MG PACKET *tacrolimus*	3	
PROGRAF 0.5 MG CAP *tacrolimus*	3	
PROGRAF 1 MG CAP *tacrolimus*	3	
PROGRAF 1 MG PACKET *tacrolimus*	3	
PROGRAF 5 MG CAP *tacrolimus*	3	
PROGRAF 5 MG/ML SOLUTION *tacrolimus*	3	
RAPAMUNE 0.5 MG TAB *sirolimus*	3	
RAPAMUNE 1 MG TAB *sirolimus*	3	
RAPAMUNE 1 MG/ML SOLUTION *sirolimus*	3	
RAPAMUNE 2 MG TAB *sirolimus*	3	
sirolimus 0.5 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sirolimus 1 mg tab	1	
sirolimus 1 mg/ml solution	1	
sirolimus 2 mg tab	1	
tacrolimus 0.5 mg cap	1	
tacrolimus 1 mg cap	1	
tacrolimus 5 mg cap	1	
ZORTRESS 0.25 MG TAB *everolimus (immunosuppressant)*	3	
ZORTRESS 0.5 MG TAB *everolimus (immunosuppressant)*	3	
ZORTRESS 0.75 MG TAB *everolimus (immunosuppressant)*	3	
ZORTRESS 1 MG TAB *everolimus (immunosuppressant)*	3	
MONOCLONAL ANTIBODIES		
GAMIFANT 10 MG/2ML SOLUTION *emapalumab-lzsg*	3	S Specialty Drug
GAMIFANT 50 MG/10ML SOLUTION *emapalumab-lzsg*	3	S Specialty Drug
SIMULECT 10 MG RECON SOLN *basiliximab*	3	
SIMULECT 20 MG RECON SOLN *basiliximab*	3	
UPLIZNA 100 MG/10ML SOLUTION *inebilizumab-cdon*	3	S Specialty Drug
PERITONEAL DIALYSIS SOLUTIONS		
DELFLEX-LC/1.5% DEXTROSE 344 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DELFLEX-LC/2.5% DEXTROSE 394 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DELFLEX-LC/4.25% DEXTROSE 483 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DELFLEX-SM/1.5% DEXTROSE 347 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DELFLEX-SM/2.5% DEXTROSE 398 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIANEAL LOW CALCIUM/1.5% DEX 344 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DIANEAL LOW CALCIUM/2.5% DEX 395 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DIANEAL LOW CALCIUM/4.25% DEX 483 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DIANEAL PD-2/1.5% DEXTROSE 346 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DIANEAL PD-2/2.5% DEXTROSE 396 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
DIANEAL PD-2/4.25% DEXTROSE 485 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
EXTRANEAL 7.5 % SOLUTION *icodextrin-electrolytes*	3	
ULTRABAG/DIANEAL PD-2/1.5% DEX 346 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
ULTRABAG/DIANEAL PD-2/2.5% DEX 396 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
ULTRABAG/DIANEAL PD-2/4.25%DEX 485 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
ULTRABAG/DIANEAL/1.5% DEXTROSE 344 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
ULTRABAG/DIANEAL/2.5% DEXTROSE 395 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
ULTRABAG/DIANEAL/4.25% DEX 483 MOSM/L SOLUTION *peritoneal dialysis solutions*	3	
POTASSIUM REMOVING AGENTS		
kionex 15 gm/60ml suspension	1	
LOKELMA 10 GM PACKET *sodium zirconium cyclosilicate*	2	QL 30 / 30 DAYS
LOKELMA 5 GM PACKET *sodium zirconium cyclosilicate*	2	QL 30 / 30 DAYS
sodium polystyrene sulfonate powder	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium polystyrene sulfonate 15 gm/60ml suspension	1	
sodium polystyrene sulfonate 30 gm/120ml suspension	1	
sodium polystyrene sulfonate 50 gm/200ml suspension	1	
sps 15 gm/60ml suspension	1	
VELTASSA 16.8 GM PACKET *patiromer sorbitex calcium*	2	QL 30 / 30 DAYS
VELTASSA 25.2 GM PACKET *patiromer sorbitex calcium*	2	QL 30 / 30 DAYS
VELTASSA 8.4 GM PACKET *patiromer sorbitex calcium*	2	QL 30 / 30 DAYS
PROSTAGLANDINS		
alprostadil 500 mcg/ml solution	1	
PROSTIN VR 500 MCG/ML SOLUTION *alprostadil*	3	
PURINE ANALOGS		
AZASAN 100 MG TAB *azathioprine*	3	
AZASAN 75 MG TAB *azathioprine*	3	
azathioprine 50 mg tab	1	
AZATHIOPRINE SODIUM 100 MG RECON SOLN *azathioprine sodium*	1	
IMURAN 50 MG TAB *azathioprine*	3	
SCLEROSING AGENTS		
ASCLERA 0.5 % SOLUTION *polidocanol (laureth-9)*	3	
ASCLERA 1 % SOLUTION *polidocanol (laureth-9)*	3	
sodium tetradecyl sulfate 3 % solution	1	
SOTRADECOL 1 % SOLUTION *sodium tetradecyl sulfate*	3	
sotradecol 3 % solution	1	
VARITHENA 180 MG/18ML FOAM *polidocanol (laureth-9)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE T-CELL COSTIMULATION BLOCKERS		
NULOJIX 250 MG RECON SOLN *belatacept*	3	
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
LIDOCAINE HCL 4 % SOLUTION *lidocaine hcl (mouth-throat)*	3	
lidocaine viscous hcl 2 % solution	1	
ANTI-INFECTIVES - THROAT		
clotrimazole 10 mg troche	1	
nystatin 100000 unit/ml suspension	1	
ORAVIG 50 MG TAB *miconazole (mouth-throat)*	3	
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate 0.12 % solution	1	
paroex 0.12 % solution	1	
periogard 0.12 % solution	1	
DENTAL PRODUCTS - COMBINATIONS		
fluoridex sensitivity relief 1.1-5 % paste	1	ACA Affordable Care Act
NAFRINSE DAILY ACIDULATED 1 MG/5ML RECON SOLN *sodium fluoride-phosphoric acid*	3	ACA Affordable Care Act
sodium fluoride 5000 sensitive 1.1-5 % paste	1	ACA Affordable Care Act
FLUORIDE DENTAL PRODUCTS		
cavarest 1.1 % gel	1	ACA Affordable Care Act
clinpro 5000 1.1 % paste	1	ACA Affordable Care Act
denta 5000 plus 1.1 % cream	1	ACA Affordable Care Act
dentagel 1.1 % gel	1	ACA Affordable Care Act
easygel 0.4 % gel	1	ACA Affordable Care Act
fluoridex 1.1 % paste	1	ACA Affordable Care Act
fluoridex daily renewal 0.63 % conc	1	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluoridex enhanced whitening 1.1 % paste	1	ACA Affordable Care Act
just for kids 0.4 % gel	1	ACA Affordable Care Act
NAFRINSE DAILY/NEUTRAL 0.05 % RECON SOLN *sodium fluoride (dental)*	3	ACA Affordable Care Act
NAFRINSE WEEKLY 0.2 % RECON SOLN *sodium fluoride (dental)*	3	ACA Affordable Care Act
neutral sodium fluoride 0.2 % solution	1	ACA Affordable Care Act
periomed 0.63 % conc	1	ACA Affordable Care Act
sf 1.1 % gel	1	ACA Affordable Care Act
sf 5000 plus 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 1.1 % gel	1	ACA Affordable Care Act
sodium fluoride 5000 plus 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 5000 ppm 1.1 % cream	1	ACA Affordable Care Act
sodium fluoride 5000 ppm 1.1 % paste	1	ACA Affordable Care Act
PROTECTANTS - MOUTH/THROAT		
EPISIL LIQUID *oral wound care products*	3	
GELX GEL *oral wound care products*	3	
MUCOTROL WAFER *oral wound care products*	3	
MUGARD LIQUID *oral wound care products*	3	
ORAMAGICRX RECON SUSP *oral wound care products*	3	
ORAPEUTIC GEL *oral wound care products*	3	
SALICEPT RECON SUSP *oral wound care products*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SALIVA STIMULANTS		
cevimeline hcl 30 mg cap	1	
pilocarpine hcl 5 mg tab	1	
pilocarpine hcl 7.5 mg tab	1	
STEROIDS - MOUTH/THROAT/DENTAL		
oralone 0.1 % paste	1	
triamcinolone acetonide 0.1 % paste	1	
MULTIVITAMINS		
INFUVITE ADULT INJECTABLE *multiple vitamin*	3	
M.V.I. ADULT INJECTABLE *multiple vitamin*	3	
PEDIATRIC MULTIPLE VITAMINS		
INFUVITE PEDIATRIC SOLUTION *pediatric multiple vitamins*	3	
M.V.I. PEDIATRIC RECON SOLN *pediatric multiple vitamins*	3	
PRENATAL MV & MIN W/FE-FA		
ATABEX EC 29-1 MG TAB DR *prenatal vit w/ docusate-iron carbonyl-folic acid*	3	
ATABEX OB 29-1 MG TAB *prenatal vit w/ fe bisglycinate chelate-folic acid*	3	
AZESCHEW PRENATAL/POSTNATAL 13-1 MG CHEW TAB *prenatal without a vit w/ fe fumarate-folic acid*	3	
AZESCO 13-1 MG TAB *prenatal vit w/ ferrous gluconate-folic acid*	3	
BAL-CARE DHA 27-1 & 430 MG MISC *prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3*	3	GL Female
C-NATE DHA 28-1-200 MG CAP *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
CITRANATAL B-CALM 20-1 MG & 2 X 25 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-fa & vit b6*	3	GL Female
CITRANATAL BLOOM 90-1 MG TAB *prenatal vit w/ docusate-fe carbonyl-fe gluconate-folic acid*	3	
CITRANATAL RX 27-1 MG TAB *prenatal without vit a w/ fe carbonyl-fe gluc-docusate-fa*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CO-NATAL FA TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
COMPLETENATE 29-1 MG CHEW TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
CONCEPT DHA 53.5-38-1 MG CAP *prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3*	3	GL Female
CONCEPT OB 130-92.4-1 MG CAP *prenatal without a vit w/ fe fum-iron polysacch complex -fa*	3	GL Female
DOTHELLE DHA 53.5-38-1 MG CAP *prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3*	3	GL Female
DUET DHA 400 25-1 & 400 MG MISC *prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3*	3	GL Female
DUET DHA BALANCED 25-1 & 267 MG MISC *prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3*	3	GL Female
ELITE-OB 50-1.25 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
ENBRACE HR CAP *prenatal vit w/ fe glycine cysteinate-fa-omega 3 fatty acids*	3	
FOLIVANE-OB 130-92.4-1 MG CAP *prenatal without a vit w/ fe fum-iron polysacch complex -fa*	3	GL Female
HEMENATAL OB + DHA 28-6-1 & 203 MG MISC *prenatal vit w/ fe poly cmplx-fe heme polypept-fa & omega 3*	3	GL Female
HEMENATAL OB 28-6-1 MG TAB *prenatal vit w/ fe polysacch complex-fe heme polypeptide-fa*	3	
INATAL GT TAB *prenatal vit w/ docusate-iron carbonyl-folic acid*	3	
KOSHER PRENATAL PLUS IRON 30-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
M-NATAL PLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
M-VIT TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
MARNATAL-F 60-1 MG CAP *prenatal without vit a w/ iron polysaccharide complex-fa*	3	GL Female
MYNATAL CAP *prenatal multivit-min w/fe-fa*	3	GL Female
MYNATAL 90-1 MG TAB *prenatal vit w/ docusate-iron carbonyl-folic acid*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MYNATAL ADVANCE TAB *prenatal vit w/ docusate-iron carbonyl-folic acid*	3	
MYNATAL PLUS TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
MYNATAL-Z TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
MYNATE 90 PLUS TAB ER *prenatal vit w/ docusate-fe fumarate-folic acid*	3	
NATACHEW 28-1 MG CHEW TAB *prenatal vit w/ fe fum-fe bisglycinate chelate-folic acid*	3	GL Female
NATALVIT TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	
NATELLE ONE 28-1-250 MG CAP *prenatal without vit a w/ fe fum-fa-omega fatty acids*	3	
NEEVO DHA 27-1.13 MG CAP *prenatal without vit a w/ fe fumarate-l methylfolate-omegas*	3	GL Female
NEONATAL COMPLETE 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
NEONATAL COMPLETE 29-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	
NEONATAL PLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
NEONATAL VITAMIN 27-0.8 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
NESTABS 32-1 MG TAB *prenatal vit without vit a w/ fe bisglycinate-folic acid*	3	GL Female
NESTABS DHA 32-1 MG MISC *prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3*	3	GL Female
NIVA-PLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
O-CAL FA 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
O-CAL PRENATAL TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
OB COMPLETE 50-1.25 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
OB COMPLETE ONE 50-1-476 MG CAP *prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-fish oil*	3	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OB COMPLETE PETITE 35-5-1-200 MG CAP *prenatal w/o vit a w/ fe carbonyl-fe aspart glyc-fa-omega 3*	3	GL Female
OB COMPLETE PREMIER 30-20-1 MG TAB *prenatal vit w/ iron carbonyl-fe aspart glycinate-fa*	3	GL Female
OB COMPLETE/DHA 30-10-1-200 MG CAP *prenat vit w/ iron carbonyl-fe asp glyc-fa-omega fatty acid*	3	GL Female
OBSTETRIX DHA 29-1 & 387 MG MISC *prenatal w/fe carbonyl-fa-dss-omega 3 fatty acids*	3	
OBSTETRIX EC 29-1 MG TAB *prenatal vit w/ docusate-iron carbonyl-folic acid*	3	
ONE VITE WOMENS PLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PNV FOLIC ACID + IRON 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PNV PRENATAL PLUS MULTIVIT+DHA 27-1 & 312 MG MISC *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
PNV PRENATAL PLUS MULTIVITAMIN 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PNV TABS 29-1 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
PNV-OMEGA 28-0.6-0.4-340 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3*	3	GL Female
PNV-SELECT 27-0.6-0.4 MG TAB *prenatal vit w/ ferrous fumarate-l methylfolate-folic acid*	3	GL Female
PREFERA OB 34-1 MG TAB *prenatal vit w/ fe polysacch complex-fe heme polypeptide-fa*	3	
PREGENNA 20-1 MG TAB *prenatal vit w/ fe bisglycinate chelate-folic acid*	3	
PRENA1 PEARL 30-1.4-200 MG CAP ER *prenatal without a w/ fe fumarate-sod feredetate-fa-dha*	3	GL Female
PRENARA 15-1 MG CAP *prenatal vit w/ ferrous fumarate-folic acid*	3	
PRENATA 29-1 MG CHEW TAB *prenatal without a vit w/ fe fumarate-folic acid*	3	GL Female
PRENATABS RX 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	2	GL Female
PRENATAL 19 CHEW TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENATAL 19 TAB *prenatal vit w/ docusate-fe fumarate-folic acid*	2	GL Female
PRENATAL 19 29-1 MG CHEW TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female
PRENATAL 19 29-1 MG TAB *prenatal vit w/ docusate-fe fumarate-folic acid*	2	GL Female
PRENATAL 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PRENATAL PLUS IRON 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	2	GL Female
PRENATAL VITAMIN PLUS LOW IRON 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female
PRENATAL-U 106.5-1 MG CAP *prenatal without a vit w/ fe fumarate-folic acid*	2	GL Female
PRENATE ELITE 20-0.6-0.4 MG TAB *prenatal w/ fe asparto glycinate-l methylfolate-folic acid*	3	GL Female
PRENATRIX 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	
PRENATVITE COMPLETE 1 MG TAB *prenatal multivit-min w/fe-fa*	3	
PRENATVITE PLUS 1 MG TAB *prenatal multivit-min w/fe-fa*	3	
PRENATVITE RX 0.8 MG TAB *prenatal multivit-min w/fe-fa*	3	GL Female
PREPLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PRETAB 29-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
PRIMACARE 30-1-470 MG CAP *prenatal without a w/ fe asp glyc-l methylfolate-fa-omega 3*	3	
PROVIDA OB 20-20-1.25 MG CAP *prenatal without a vit w/ fe fum-iron polysacch complex -fa*	3	GL Female
PUREFE OB PLUS 162-115.2-1 MG CAP *prenatal without a vit w/ fe fum-iron polysacch complex -fa*	3	GL Female
RELNATE DHA 28-1-200 MG CAP *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
SE-NATAL 19 29-1 MG CHEW TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SE-NATAL 19 29-1 MG TAB *prenatal vit w/ docusate-fe fumarate-folic acid*	2	GL Female
SELECT-OB 29-0.6-0.4 MG CHEW TAB *prenatal vit w/ iron polysaccharide cmplx-l methylfolate-fa*	3	
SELECT-OB 29-1 MG CHEW TAB *prenatal vit w/ iron polysaccharide complex-folic acid*	3	GL Female
TARON-BC 20-1 MG & 2 X 25 MG MISC *prenatal without vit a w/ iron carbonyl-folic acid & vit b6*	3	
TARON-C DHA 53.5-38-1 MG CAP *prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3*	3	GL Female
THRIVITE RX 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
TL FOLATE 27-0.5-0.5 MG TAB *prenatal vit w/ ferrous fumarate-l methylfolate-folic acid*	3	
TL-CARE DHA 27-1-500 MG CAP *prenatal w/fe fumarate-fa-dss-fish oil*	3	
TRI-TABS DHA 32-1 MG MISC *prenatal vit without vit a w/ fe bisglycinate-fa-omeg 3*	3	GL Female
TRICARE TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
TRICARE PRENATAL DHA ONE 0.8 MG CAP *prenatal multivit-min w/fe-fa*	3	GL Female
TRICARE PRENATAL DHA ONE 27-1-500 MG CAP *prenatal w/fe fumarate-fa-dss-fish oil*	3	
TRINATAL RX 1 60-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
TRINATE TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female
TRINAZ 12-1 MG TAB *prenatal vit w/ ferrous gluconate-folic acid*	3	
ULTIMATECARE ONE 27-1 MG CAP *prenatal vit w/ iron carbonyl-fe aspart glyc-fa-omega 3*	3	
VENA-BAL DHA 27-1 & 430 MG MISC *prenatal w/fe polysacch cmplx-sod feredetate-fa-omega 3*	3	GL Female
VIL-RX 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
VINATE DHA RF 27-1.13 MG CAP *prenatal without vit a w/ fe fumarate-l methylfolate-omegas*	3	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VINATE II 29-1 MG TAB *prenatal vit w/ fe bisglycinate chelate-folic acid*	2	
VINATE M 27-1 MG TAB *prenatal vit w/ selenium-fe fumarate-folic acid*	2	GL Female
VINATE ONE 60-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	2	GL Female
VIRT-C DHA 53.5-38-1 MG CAP *prenatal vit w/ fe fum-iron polysacch complex -fa-omega 3*	3	GL Female
VIRT-NATE DHA 28-1-200 MG CAP *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
VIRT-PN 27-0.6-0.4 MG TAB *prenatal vit w/ ferrous fumarate-l methylfolate-folic acid*	3	GL Female
VIRT-PN PLUS 28-0.6-0.4-340 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3*	3	GL Female
VITAFOL GUMMIES 3.33-0.333-34.8 MG CHEW TAB *prenatal vit w/ ferric phosphate-fa-omega 3 fatty acids*	3	GL Female
VITAFOL-NANO 18-0.6-0.4 MG TAB *prenatal w/o a vit w/ fe fumarate-l methylfolate-folic acid*	3	
VITAFOL-OB TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
VITAPEARL 30-1.4-200 MG CAP ER *prenatal without a w/ fe fumarate-sod feredetate-fa-dha*	3	GL Female
VITATHELY WITH GINGER 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
VIVA DHA 28-1-200 MG CAP *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
VOL-NATE 28-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
VOL-PLUS 27-1 MG TAB *prenatal vit w/ ferrous fumarate-folic acid*	3	GL Female
VOL-TAB RX 29-1 MG TAB *prenatal vit w/ iron carbonyl-folic acid*	3	GL Female
VP-HEME OB + DHA 28-6-1 & 203 MG MISC *prenatal vit w/ fe poly cmplx-fe heme polypept-fa & omega 3*	3	GL Female
VP-PNV-DHA 28-1-215.8 MG CAP *prenatal vit w/ ferrous fumarate-fa-omega 3 fatty acids*	3	GL Female
ZALVIT 13-1 MG TAB *prenatal vit w/ ferrous gluconate-folic acid*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZATEAN-PN PLUS 28-0.6-0.4-340 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-omega 3*	3	GL Female
PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL		
COMPLETE NATAL DHA 29-1-200 & 250 MG MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
NESTABS ABC 32-1-200 MG MISC *prenatal mv & min w/o vit a w/fe polysac cmplx-fa-ca-omega 3*	3	GL Female
PR NATAL 400 29-1-200 & 400 MG MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
PR NATAL 400 EC 29-1-200 & 400 MG (DR) MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
PR NATAL 430 29-1-200 & 430 MG MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
PR NATAL 430 EC 29-1-200 & 430 MG (DR) MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
TRIVEEN-DUO DHA 29-1-200 & 400 MG MISC *prenatal mv & min w/fe bisglyc-fe prot succ-fa-ca-omega 3*	3	GL Female
PRENATAL MV & MIN W/FE-FA-DHA		
CITRANATAL 90 DHA 90-1 & 300 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha*	3	
CITRANATAL ASSURE 35-1 & 300 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha*	3	
CITRANATAL BLOOM DHA 90-1 & 300 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha*	3	
CITRANATAL DHA 27-1 & 250 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha*	3	GL Female
CITRANATAL ESSENCE 35-1 & 300 MG THER PACK *prenatal w/o vit a w/ fe carbonyl-fe gluconate-fa-dha*	3	
CITRANATAL HARMONY 27-1-260 MG CAP *prenatal w/o vit a w/ fe fumarate-fe carbonyl-dss-fa-dha*	3	
CITRANATAL MEDLEY 27-1-200 MG CAP *prenatal w/o vit a w/ fe fumarate-fe carbonyl-fa-dha*	3	
FOLET DHA 38-1 & 350 MG THER PACK *prenatal vit w/fe carbonyl-fe bisglyc-methylfol-dss & dha*	3	
FOLET ONE 38-1-225 MG CAP *prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha*	3	
NEONATAL + DHA 29-1 & 200 MG MISC *prenatal mv & min w/fe fumarate-fa-dha*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NESTABS ONE 38-1-225 MG CAP *prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dha*	3	
NEXA PLUS 29-1.25-350 MG CAP *prenatal w/o vit a w/fe fumarate-docusate ca-folic acid-dha*	3	
OBSTETRIX ONE 38-1-225 MG CAP *prenatal w/o a w/fe carbonyl-fe bisglyc-l methylfol-dss-dha*	3	
PNV OB+DHA 27-1 & 250 MG MISC *prenatal w/o vit a w/ fe carbonyl-fe gluconate-dss-fa-dha*	3	GL Female
PNV-DHA 27-0.6-0.4-300 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
PNV-DHA+DOCUSATE 27-1.25-300 MG CAP *prenatal w/o vit a w/ fe fumarate-dss-fa-dha*	3	
PREFERAOB +DHA 28-6-1 & 200 MG MISC *prenatal vit w/ fe polysacch cmplx-fe heme polypept-fa & dha*	3	
PREFERAOB ONE 22-6-1-200 MG CAP *prenatal vit w/ fe polysacch cmplx-fe heme polypept-fa & dha*	3	
PRENA 1 TRUE 30-1.4 & 300 MG MISC *prenatal without a w/ fe amino acid chelate-fa-dha*	3	GL Female
PRENAISSANCE 29-1.25-325 MG CAP *prenatal w/o vit a w/ fe fumarate-dss-fa-dha*	3	
PRENAISSANCE PLUS 28-1-250 MG CAP *prenatal w/o vit a w/ fe carbonyl-dss-fa-dha*	3	
PRENATAL + DHA 27-1 & 250 MG THER PACK *prenatal w/o vit a w/ ferrous fumarate-folic acid-dha*	3	
PRENATE DHA 18-0.6-0.4-300 MG CAP *prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha*	3	GL Female
PRENATE ENHANCE 28-0.6-0.4-400 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
PRENATE ESSENTIAL 18-0.6-0.4-300 MG CAP *prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha*	3	GL Female
PRENATE MINI 18-0.6-0.4-350 MG CAP *prenatal w/o vit a w/ fe carbonyl-fe asp glyc-methfol-fa-dha*	3	GL Female
PRENATE PIXIE 10-0.6-0.4-200 MG CAP *prenatal w/o a w/ fe asparto glyc-l methylfolate-fa-dha*	3	
PRENATE RESTORE 27-0.6-0.4-400 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
PROVIDA DHA 16-16-1.25-110 MG CAP *prenatal without a w/fe fum-fe polysacch complex-fa-dha*	3	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
R-NATAL OB 20-1-320 MG CAP *prenatal w/o vit a w/ fe carbonyl-folic acid-dha*	3	GL Female
SELECT-OB+DHA 29-1 & 250 MG MISC *prenatal mv & min w/fe polysaccharide complex-fa-dha*	3	GL Female
TARON-PREX 30-1.2-265 MG CAP *prenatal w/o vit a w/ fe fumarate-dss-fa-dha*	3	
TL-SELECT 29-1.25-325 MG CAP *prenatal w/o vit a w/ fe fumarate-dss-fa-dha*	3	
TRISTART DHA 31-0.6-0.4-200 MG CAP *prenatal without a w/ fe carbonyl-l methylfolate-fa-dha*	3	
TRISTART ONE 35-1-215 MG CAP *prenatal without a w/ fe carbonyl-l methylfolate-fa-dha*	3	
VIRT-PN DHA 27-0.6-0.4-300 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
VITAFOL FE+ 90-0.6-0.4-200 MG CAP *prenatal vit w/ fe polysacch complex-l methylfolate-fa-dha*	3	
VITAFOL FE+ 90-1-200 & 50 MG CAP THPK *prenatal vit w/ fe polysacch complex-l methylfol-fa-dha-dss*	3	
VITAFOL ULTRA 29-0.6-0.4-200 MG CAP *prenatal vit w/ fe polysacch complex-l methylfolate-fa-dha*	3	GL Female
VITAFOL-OB+DHA 65-1 & 250 MG MISC *prenatal mv & min w/fe fumarate-fa-dha*	3	GL Female
VITAFOL-ONE 29-1-200 MG CAP *prenatal mv & min w/fe polysaccharide complex-fa-dha*	3	GL Female
VITAMEDMD ONE RX/QUATREFOLIC 30-0.6-0.4-200 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
VITATRUE 30-1.4 & 300 MG MISC *prenatal without a w/ fe amino acid chelate-fa-dha*	3	GL Female
ZATEAN-PN DHA 27-0.6-0.4-300 MG CAP *prenatal without a w/ fe fumarate-l methylfolate-fa-dha*	3	GL Female
PRENATAL MV & MINERALS W/FA WITHOUT IRON		
PRENATE 0.6-0.4 MG CHEW TAB *prenatal multivitamins & minerals w/ l-methylfolate-fa*	3	GL Female
PRENATAL VITAMINS		
PREMESISRX 1 MG TAB *prenatal w/ calcium-vit b6-vit b12-folic acid-ginger*	3	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENA1 1.4 MG CHEW TAB *prenatal w/ vit b2-b6-b12-cholecalciferol-folic acid*	3	GL Female
PRENATE AM 1 MG TAB *prenatal w/ calcium-vit b6-vit b12-folic acid-ginger*	3	GL Female
VITAFOL STRIPS 1 MG FILM *prenatal w/ vit b6-b12-cholecalciferol-folic acid*	3	
VITAMEDMD REDICHEW RX 1.4 MG CHEW TAB *prenatal w/ vit b2-b6-b12-cholecalciferol-folic acid*	3	GL Female
MUSCULOSKELETAL THERAPY AGENTS		
ARTICULAR CARTILAGE REPAIR THERAPY		
CARTICEL IMPLANT *autologous cultured chondrocytes*	3	
MACI SHEET *autologous cultured chondrocytes on collagen membrane*	3	
CENTRAL MUSCLE RELAXANTS		
baclofen 10 mg tab	1	
baclofen 10 mg/20ml solution	1	
baclofen 20 mg tab	1	
baclofen 20000 mcg/20ml solution	1	
baclofen 40 mg/20ml solution	1	
baclofen 5 mg tab	3	
CHLORZOXAZONE 250 MG TAB *chlorzoxazone*	3	
chlorzoxazone 375 mg tab	1	
chlorzoxazone 500 mg tab	1	
chlorzoxazone 750 mg tab	1	
cyclobenzaprine hcl 10 mg tab	1	
cyclobenzaprine hcl 5 mg tab	1	
cyclobenzaprine hcl 7.5 mg tab	1	
cyclobenzaprine hcl er 15 mg cap er 24h	1	
cyclobenzaprine hcl er 30 mg cap er 24h	1	
GABLOFEN 10000 MCG/20ML SOLN PRSYR *baclofen*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GABLOFEN 10000 MCG/20ML SOLUTION *baclofen*	3	
GABLOFEN 20000 MCG/20ML SOLN PRSYR *baclofen*	3	
GABLOFEN 20000 MCG/20ML SOLUTION *baclofen*	3	
GABLOFEN 40000 MCG/20ML SOLN PRSYR *baclofen*	3	
GABLOFEN 40000 MCG/20ML SOLUTION *baclofen*	3	
GABLOFEN 50 MCG/ML SOLN PRSYR *baclofen*	3	
LIORESAL 0.05 MG/ML SOLUTION *baclofen*	3	
LIORESAL 10 MG/20ML SOLUTION *baclofen*	3	
LIORESAL 10 MG/5ML SOLUTION *baclofen*	3	
LIORESAL 40 MG/20ML SOLUTION *baclofen*	3	
lorzone 375 mg tab	1	
lorzone 750 mg tab	1	
metaxall 800 mg tab	1	
METAXALONE 400 MG TAB *metaxalone*	3	
metaxalone 400 mg tab	1	
metaxalone 800 mg tab	1	
methocarbamol 1000 mg/10ml solution	1	
methocarbamol 500 mg tab	1	
methocarbamol 750 mg tab	1	
orphenadrine citrate 30 mg/ml solution	1	
orphenadrine citrate er 100 mg tab er 12h	1	
OZOBAX 1 MG/ML SOLUTION *baclofen*	3	QL 2400 / 30 DAYS PA
ROBAXIN 1000 MG/10ML SOLUTION *methocarbamol*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tizanidine hcl 2 mg cap	1	
tizanidine hcl 2 mg tab	1	
tizanidine hcl 4 mg cap	1	
tizanidine hcl 4 mg tab	1	
tizanidine hcl 6 mg cap	1	
DIRECT MUSCLE RELAXANTS		
DANTRIUM 20 MG RECON SOLN *dantrolene sodium*	3	
dantrolene sodium 100 mg cap	1	
dantrolene sodium 20 mg recon soln	1	
dantrolene sodium 25 mg cap	1	
dantrolene sodium 50 mg cap	1	
revonto 20 mg recon soln	1	
RYANODEX 250 MG RECON SUSP *dantrolene sodium*	3	
MUSCLE RELAXANT COMBINATIONS		
NORGESIC FORTE 50-770-60 MG TAB *orphenadrine w/ aspirin & caff*	3	
orphenadrine-asa-caffeine 50-770-60 mg tab	1	
ORPHENADRINE-ASPIRIN-CAFFEINE 50-770-60 MG TAB *orphenadrine w/ aspirin & caff*	3	
orphengesic forte 50-770-60 mg tab	1	
ORPHENGESIC FORTE 770-60-50 MG TAB *orphenadrine w/ aspirin & caff*	3	
VISCOSUPPLEMENTS		
DUROLANE 60 MG/3ML PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
EUFLEXXA 20 MG/2ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
GELSYN-3 16.8 MG/2ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
HYALGAN 20 MG/2ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
HYALGAN 20 MG/2ML SOLUTION *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYMOVIS 24 MG/3ML SOLN PRSYR *hyaluronan*	3	S Specialty Drug
MONOVISC 88 MG/4ML SOLN PRSYR *hyaluronan*	3	S Specialty Drug
ORTHOVISC 30 MG/2ML SOLN PRSYR *hyaluronan*	3	S Specialty Drug
SODIUM HYALURONATE 20 MG/2ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	1	S Specialty Drug
SUPARTZ FX 25 MG/2.5ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
SYNVISC 16 MG/2ML SOLN PRSYR *hylan*	3	S Specialty Drug
SYNVISC ONE 48 MG/6ML SOLN PRSYR *hylan*	3	S Specialty Drug
TRILURON 20 MG/2ML SOLN PRSYR *sodium hyaluronate (viscosupplement)*	3	S Specialty Drug
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENTS - MISC.		
ALZAIR ALLERGY NASAL SPRAY POWDER *hypromellose (nasal)*	3	
NASAL ANESTHETICS		
COCAINE HCL 40 MG/ML SOLUTION *cocaine hcl (nasal anesthetic)*	1	
GOPRELTO 40 MG/ML SOLUTION *cocaine hcl (nasal anesthetic)*	3	
NUMBRINO 40 MG/ML SOLUTION *cocaine hcl (nasal anesthetic)*	3	
NASAL ANTIBIOTICS		
BACTROBAN NASAL 2 % OINTMENT *mupirocin calcium*	3	
NASAL ANTICHOLINERGICS		
ipratropium bromide 0.03 % solution	1	QL 60 / 30 DAYS
ipratropium bromide 0.06 % solution	1	QL 45 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NASAL ANTIHISTAMINES		
azelastine hcl 0.1 % solution	1	QL 60 / 30 DAYS
azelastine hcl 0.15 % solution	1	QL 60 / 30 DAYS
azelastine hcl 137 mcg/spray solution	1	QL 60 / 30 DAYS
olopatadine hcl 0.6 % solution	1	QL 30.5 / 30 DAYS
NASAL STEROIDS		
BECONASE AQ 42 MCG/SPRAY SUSPENSION *beclomethasone diprop monohyd*	3	QL 50 / 30 DAYS
FLUNISOLIDE 25 MCG/ACT (0.025%) SOLUTION *flunisolide (nasal)*	3	QL 75 / 30 DAYS
fluticasone propionate 50 mcg/act suspension	1	QL 16 / 30 DAYS
mometasone furoate 50 mcg/act suspension	1	QL 34 / 30 DAYS
OMNARIS 50 MCG/ACT SUSPENSION *ciclesonide (nasal)*	3	QL 12.5 / 30 DAYS
PROPEL 370 MCG IMPLANT *mometasone furoate (nasal)*	3	
PROPEL MINI 370 MCG IMPLANT *mometasone furoate (nasal)*	3	
QNASL 80 MCG/ACT AERO SOLN *beclomethasone dipropionate (nasal)*	3	QL 10.6 / 30 DAYS
QNASL CHILDRENS 40 MCG/ACT AERO SOLN *beclomethasone dipropionate (nasal)*	3	QL 6.8 / 30 DAYS
SINUVA 1350 MCG IMPLANT *mometasone furoate (nasal)*	3	
triamcinolone acetonide 55 mcg/act aerosol	1	QL 16.9 / 30 DAYS
XHANCE 93 MCG/ACT EXHU *fluticasone propionate (nasal)*	3	QL 32 / 30 DAYS
ZETONNA 37 MCG/ACT AERO SOLN *ciclesonide (nasal)*	3	QL 6.1 / 30 DAYS
NEUROMUSCULAR AGENTS		
ALS AGENTS - MISCELLANEOUS		
RADICAVA 30 MG/100ML SOLUTION *edaravone*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENZATHIAZOLES		
riluzole 50 mg tab	1	QL 60 / 30 DAYS S Specialty Drug
TIGLUTIK 50 MG/10ML SUSPENSION *riluzole*	3	QL 600 / 30 DAYS PA S Specialty Drug
DEPOLARIZING MUSCLE RELAXANTS		
ANECTINE 20 MG/ML SOLUTION *succinylcholine chloride*	3	
QUELICIN 20 MG/ML SOLUTION *succinylcholine chloride*	3	
succinylcholine chloride 20 mg/ml solution	1	
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX 100 UNIT RECON SOLN *onabotulinumtoxina*	3	S Specialty Drug
BOTOX 200 UNIT RECON SOLN *onabotulinumtoxina*	3	S Specialty Drug
DYSPORT 300 UNIT RECON SOLN *abobotulinumtoxina*	3	S Specialty Drug
DYSPORT 500 UNIT RECON SOLN *abobotulinumtoxina*	3	S Specialty Drug
MYOBLOC 10000 UNIT/2ML SOLUTION *rimabotulinumtoxinb*	3	S Specialty Drug
MYOBLOC 2500 UNIT/0.5ML SOLUTION *rimabotulinumtoxinb*	3	S Specialty Drug
MYOBLOC 5000 UNIT/ML SOLUTION *rimabotulinumtoxinb*	3	S Specialty Drug
XEOMIN 100 UNIT RECON SOLN *incobotulinumtoxina*	3	S Specialty Drug
XEOMIN 200 UNIT RECON SOLN *incobotulinumtoxina*	3	S Specialty Drug
XEOMIN 50 UNIT RECON SOLN *incobotulinumtoxina*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NONDEPOLARIZING MUSCLE RELAXANTS		
atracurium besylate 100 mg/10ml solution	1	
atracurium besylate 50 mg/5ml solution	1	
cisatracurium besylate (pf) 10 mg/5ml solution	1	
cisatracurium besylate (pf) 200 mg/20ml solution	1	
cisatracurium besylate 20 mg/10ml solution	1	
NIMBEX 10 MG/5ML SOLUTION *cisatracurium besylate*	3	
NIMBEX 20 MG/10ML SOLUTION *cisatracurium besylate*	3	
NIMBEX 200 MG/20ML SOLUTION *cisatracurium besylate*	3	
PANCURONIUM BROMIDE 1 MG/ML SOLUTION *pancuronium bromide*	1	
rocuronium bromide 100 mg/10ml solution	1	
rocuronium bromide 50 mg/5ml solution	1	
vecuronium bromide 10 mg recon soln	1	
vecuronium bromide 20 mg recon soln	1	
SPINAL MUSCULAR ATROPHY-ANTISENSE OLIGONUCLEOTIDES		
SPINRAZA 12 MG/5ML SOLUTION *nusinersen*	3	S Specialty Drug
SPINAL MUSCULAR ATROPHY-GENE THERAPY AGENTS		
ZOLGENSMA 10.1-10.5 KG 7X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 10.6-11.0 KG 2X5.5ML & 6X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 11.1-11.5 KG 1X5.5ML & 7X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 11.6-12.0 KG 8X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 12.1-12.5 KG 2X5.5ML & 7X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 12.6-13.0 KG 1X5.5ML & 8X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 13.1-13.5 KG 9X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLGENSMA 2.6-3.0 KG 2X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 3.1-3.5 KG 2X5.5ML & 1X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 3.6-4.0 KG 1X5.5ML & 2X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 4.1-4.5 KG 3X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 4.6-5.0 KG 2X5.5ML & 2X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 5.1-5.5 KG 1X5.5ML & 3X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 5.6-6.0 KG 4X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 6.1-6.5 KG 2X5.5ML & 3X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 6.6-7.0 KG 1X5.5ML & 4X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 7.1-7.5 KG 5X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 7.6-8.0 KG 2X5.5ML & 4X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 8.1-8.5 KG 1X5.5ML & 5X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 8.6-9.0 KG 6X8.3 ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 9.1-9.5 KG 2X5.5ML & 5X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
ZOLGENSMA 9.6-10.0 KG 1X5.5ML & 6X8.3ML KIT *onasemnogene abeparvovec-xioi*	3	S Specialty Drug
SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS		
EVRYSDI 0.75 MG/ML RECON SOLN *risdiplam*	3	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUTRIENTS		
AMINO ACID MIXTURES		
AMINOSYN 10 % SOLUTION *amino acid infusion*	3	
AMINOSYN 8.5 % SOLUTION *amino acid infusion*	3	
AMINOSYN II 10 % SOLUTION *amino acid infusion*	3	
AMINOSYN II 15 % SOLUTION *amino acid infusion*	3	
AMINOSYN II 8.5 % SOLUTION *amino acid infusion*	3	
aminosyn ii/electrolytes 8.5 % solution	1	
AMINOSYN M 3.5 % SOLUTION *amino acid electrolyte infusion*	3	
AMINOSYN-HBC 7 % SOLUTION *amino acid infusion*	3	
AMINOSYN-PF 10 % SOLUTION *amino acid infusion*	3	
AMINOSYN-PF 7 % SOLUTION *amino acid infusion*	3	
AMINOSYN-RF 5.2 % SOLUTION *amino acid infusion*	3	
AMINOSYN/ELECTROLYTES 7 % SOLUTION *amino acid electrolyte infusion*	3	
AMINOSYN/ELECTROLYTES 8.5 % SOLUTION *amino acid electrolyte infusion*	3	
CLINIMIX E/DEXTROSE (2.75/10) 2.75 % SOLUTION *amino acid electrolyte w/ calcium infusion in d10w*	3	
CLINIMIX E/DEXTROSE (2.75/5) 2.75 % SOLUTION *amino acid electrolyte w/ calcium infusion in d5w*	3	
CLINIMIX E/DEXTROSE (4.25/10) 4.25 % SOLUTION *amino acid electrolyte w/ calcium infusion in d10w*	3	
CLINIMIX E/DEXTROSE (4.25/25) 4.25 % SOLUTION *amino acid electrolyte w/ calcium infusion in d25w*	3	
CLINIMIX E/DEXTROSE (4.25/5) 4.25 % SOLUTION *amino acid electrolyte w/ calcium infusion in d5w*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLINIMIX E/DEXTROSE (5/15) 5 % SOLUTION *amino acid electrolyte w/ calcium infusion in d15w*	3	
CLINIMIX E/DEXTROSE (5/20) 5 % SOLUTION *amino acid electrolyte w/ calcium infusion in d20w*	3	
CLINIMIX E/DEXTROSE (5/25) 5 % SOLUTION *amino acid electrolyte w/ calcium infusion in d25w*	3	
CLINIMIX/DEXTROSE (2.75/5) 2.75 % SOLUTION *amino acid infusion in d5w*	3	
CLINIMIX/DEXTROSE (4.25/10) 4.25 % SOLUTION *amino acid infusion in d10w*	3	
CLINIMIX/DEXTROSE (4.25/20) 4.25 % SOLUTION *amino acid infusion in d20w*	3	
CLINIMIX/DEXTROSE (4.25/25) 4.25 % SOLUTION *amino acid infusion in d25w*	3	
CLINIMIX/DEXTROSE (4.25/5) 4.25 % SOLUTION *amino acid infusion in d5w*	3	
CLINIMIX/DEXTROSE (5/15) 5 % SOLUTION *amino acid infusion in d15w*	3	
CLINIMIX/DEXTROSE (5/20) 5 % SOLUTION *amino acid infusion in d20w*	3	
CLINIMIX/DEXTROSE (5/25) 5 % SOLUTION *amino acid infusion in d25w*	3	
clinisol sf 15 % solution	1	
FREAMINE HBC 6.9 % SOLUTION *amino acid infusion*	3	
FREAMINE III 10 % SOLUTION *amino acid infusion*	3	
HEPATAMINE 8 % SOLUTION *amino acid infusion*	3	
NEPHRAMINE 5.4 % SOLUTION *amino acid infusion*	3	
plenamine 15 % solution	1	
PREMASOL 10 % SOLUTION *amino acid infusion*	3	
premasol 6 % solution	1	
PROCALAMINE 3 % SOLUTION *amino acid electrolyte infusion*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROSOL 20 % SOLUTION *amino acid infusion*	3	
TRAVASOL 10 % SOLUTION *amino acid infusion*	3	
TROPHAMINE 10 % SOLUTION *amino acid infusion*	3	
TROPHAMINE 6 % SOLUTION *amino acid infusion*	3	
AMINO ACIDS-SINGLE		
ELCYS 50 MG/ML SOLUTION *cysteine hcl*	3	
CARBOHYDRATES		
dextrose 10 % solution	1	
DEXTROSE 20 % SOLUTION *dextrose*	1	
DEXTROSE 250 MG/ML SOLUTION *dextrose*	1	
DEXTROSE 30 % SOLUTION *dextrose*	1	
DEXTROSE 40 % SOLUTION *dextrose*	1	
dextrose 5 % solution	1	
dextrose 50 % solution	1	
dextrose 70 % solution	1	
LIPIDS		
CLINOLIPID 20 % EMULSION *fat emulsion plant based*	3	
DOJOLVI 100 % LIQUID *triheptanoin*	3	PA S Specialty Drug
INTRALIPID 20 % EMULSION *fat emulsion plant based*	3	
INTRALIPID 30 % EMULSION *fat emulsion plant based*	3	
NUTRILIPID 20 % EMULSION *fat emulsion plant based*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMEGAVEN 10 GM/100ML EMULSION *fat emulsion fish oil triglyceride based*	3	
OMEGAVEN 5 GM/50ML EMULSION *fat emulsion fish oil triglyceride based*	3	
SMOFLIPID 20 % EMULSION *fat emulsion fish oil and plant based*	3	
PROTEIN-CARBOHYDRATE-LIPID WITH ELECTROLYTE COMBINATIONS		
KABIVEN 3.3-9.8-3.9-0.7 % EMULSION *amino acids-dextrose-lipids with electrolytes*	3	
PERIKABIVEN 2.4-6.8-3.5-0.5 % EMULSION *amino acids-dextrose-lipids with electrolytes*	3	
OPHTHALMIC AGENTS		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
SIMBRINZA 1-0.2 % SUSPENSION *brinzolamide-brimonidine tartrate*	2	QL 12 / 30 DAYS
BETA-BLOCKERS - OPHTHALMIC		
betaxolol hcl 0.5 % solution	1	QL 15 / 28 DAYS
BETIMOL 0.25 % SOLUTION *timolol*	3	QL 8 / 28 DAYS
BETIMOL 0.5 % SOLUTION *timolol*	3	QL 10 / 30 DAYS
BETOPTIC-S 0.25 % SUSPENSION *betaxolol hcl (ophth)*	3	QL 15 / 28 DAYS
CARTEOLOL HCL 1 % SOLUTION *carteolol hcl (ophth)*	3	QL 10 / 30 DAYS
LEVOBUNOLOL HCL 0.5 % SOLUTION *levobunolol hcl*	3	QL 12 / 30 DAYS
levobunolol hcl 0.5 % solution	1	QL 12 / 30 DAYS
METIPRANOLOL 0.3 % SOLUTION *metipranolol*	3	QL 10 / 30 DAYS
TIMOLOL MALEATE 0.25 % GEL F SOLN *timolol maleate (ophth)*	3	QL 8 / 28 DAYS
timolol maleate 0.25 % solution	1	QL 8 / 28 DAYS
timolol maleate 0.5 % (daily) solution	1	QL 10 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIMOLOL MALEATE 0.5 % GEL F SOLN *timolol maleate (ophth)*	3	QL 8 / 28 DAYS
timolol maleate 0.5 % solution	1	QL 10 / 30 DAYS
TIMOPTIC OCUDOSE 0.25 % SOLUTION *timolol maleate (ophth)*	3	QL 60 / 30 DAYS
TIMOPTIC OCUDOSE 0.5 % SOLUTION *timolol maleate (ophth)*	3	QL 60 / 30 DAYS
TIMOPTIC-XE 0.25 % GEL F SOLN *timolol maleate (ophth)*	3	QL 8 / 28 DAYS
TIMOPTIC-XE 0.5 % GEL F SOLN *timolol maleate (ophth)*	3	QL 8 / 28 DAYS
BETA-BLOCKERS - OPHTHALMIC COMBINATIONS		
COMBIGAN 0.2-0.5 % SOLUTION *brimonidine tartrate-timolol maleate*	3	QL 10 / 30 DAYS
dorzolamide hcl-timolol mal 22.3-6.8 mg/ml solution	1	QL 10 / 30 DAYS
dorzolamide hcl-timolol mal pf 2-0.5 % solution	1	QL 60 / 30 DAYS
CYCLOPLEGIC MYDRIATIC COMBINATIONS		
CYCLOMYDRIL 0.2-1 % SOLUTION *cyclopentolate w/ phenylephrine*	3	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 1 % SOLUTION *atropine sulfate (ophthalmic)*	3	
cyclopentolate hcl 0.5 % solution	1	
cyclopentolate hcl 1 % solution	1	
cyclopentolate hcl 2 % solution	1	
ISOPTO ATROPINE 1 % SOLUTION *atropine sulfate (ophthalmic)*	3	
MYDRIACYL 1 % SOLUTION *tropicamide*	3	
phenylephrine hcl 10 % solution	1	
phenylephrine hcl 2.5 % solution	1	
tropicamide 0.5 % solution	1	
tropicamide 1 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG		
XIIDRA 5 % SOLUTION *lifitegrast*	2	QL 60 / 30 DAYS AL1 At least 17 yrs old
MIOTICS - DIRECT ACTING		
MIOCHOL-E 20 MG RECON SOLN *acetylcholine chloride*	3	
MIOSTAT 0.01 % SOLUTION *carbachol (ophth)*	3	
pilocarpine hcl 1 % solution	1	QL 15 / 28 DAYS
pilocarpine hcl 2 % solution	1	QL 15 / 28 DAYS
pilocarpine hcl 4 % solution	1	QL 15 / 28 DAYS
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS		
ak-poly-bac 500-10000 unit/gm ointment	1	QL 13 / 30 DAYS
bacitracin-polymyxin b 500-10000 unit/gm ointment	1	QL 13 / 30 DAYS
neo-polycin 3.5-400-10000 ointment	1	QL 3.5 / 28 DAYS
neomycin-bacitracin zn-polymyx 3.5-400-10000 ointment	1	QL 3.5 / 28 DAYS
neomycin-bacitracin zn-polymyx 5-400-10000 ointment	1	QL 3.5 / 28 DAYS
NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 SOLUTION *neomycin-polymyxin-gramicidin*	3	QL 45 / 30 DAYS
polycin 500-10000 unit/gm ointment	1	QL 13 / 30 DAYS
polymyxin b-trimethoprim 10000-0.1 unit/ml-% solution	1	QL 45 / 30 DAYS
OPHTHALMIC ANTIALLERGIC		
ALOCRIL 2 % SOLUTION *nedocromil sodium (ophth)*	3	QL 5 / Rx
ALOMIDE 0.1 % SOLUTION *lodoxamide tromethamine*	3	QL 10 / Rx
azelastine hcl 0.05 % solution	1	QL 8 / 30 DAYS
BEPREVE 1.5 % SOLUTION *bepotastine besilate*	3	QL 8 / 28 DAYS
cromolyn sodium 4 % solution	1	QL 10 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMADINE 0.05 % SOLUTION *emedastine difumarate*	3	QL 5 / Rx
epinastine hcl 0.05 % solution	1	QL 8 / 28 DAYS
LASTACAFT 0.25 % SOLUTION *alcaftadine*	3	QL 3 / 30 DAYS
olopatadine hcl 0.1 % solution	1	QL 8 / 28 DAYS
olopatadine hcl 0.2 % solution	1	QL 8 / 28 DAYS
PAZEO 0.7 % SOLUTION *olopatadine hcl*	2	QL 8 / 28 DAYS
ZERVIATE 0.24 % SOLUTION *cetirizine hcl (ophth)*	3	
OPHTHALMIC ANTIBIOTICS		
BACITRACIN 500 UNIT/GM OINTMENT *bacitracin (ophthalmic)*	2	QL 13 / 30 DAYS
BESIVANCE 0.6 % SUSPENSION *besifloxacin hcl*	2	QL 23 / 30 DAYS
ciprofloxacin hcl 0.3 % solution	1	QL 23 / 30 DAYS
erythromycin 5 mg/gm ointment	1	QL 15 / 28 DAYS ACA Affordable Care Act
gatifloxacin 0.5 % solution	1	QL 10.8 / 30 DAYS
GENTAK 0.3 % OINTMENT *gentamicin sulfate (ophth)*	3	QL 15 / 28 DAYS
gentamicin sulfate 0.3 % solution	1	QL 65 / 30 DAYS
levofloxacin 0.5 % solution	1	QL 23 / 30 DAYS
moxifloxacin hcl (2x day) 0.5 % solution	1	QL 13 / 30 DAYS
moxifloxacin hcl 0.5 % solution	1	QL 13 / 30 DAYS
ofloxacin 0.3 % solution	1	QL 45 / 30 DAYS
tobramycin 0.3 % solution	1	QL 65 / 30 DAYS
OPHTHALMIC ANTIFUNGAL		
NATACYN 5 % SUSPENSION *natamycin*	2	QL 23 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC ANTIVIRALS		
TRIFLURIDINE 1 % SOLUTION *trifluridine*	2	
OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS		
AZOPT 1 % SUSPENSION *brinzolamide*	2	QL 10 / 30 DAYS
dorzolamide hcl 2 % solution	1	QL 12 / 30 DAYS
OPHTHALMIC DIAGNOSTIC PRODUCTS		
ak-fluor 10 % solution	1	
AK-FLUOR 25 % SOLUTION *fluorescein sodium injection*	3	
altafluor 0.25-0.4 % solution	1	
altafluor benox 0.25-0.4 % solution	1	
FLUORESCITE 10 % SOLUTION *fluorescein sodium injection*	3	
PAREMYD 1-0.25 % SOLUTION *hydroxyamphetamine-tropicamide*	3	
OPHTHALMIC ENZYMES		
JETREA 0.375 MG/0.3ML SOLUTION *ocriplasmin*	3	S Specialty Drug
OPHTHALMIC GENE THERAPY		
LUXTURNA 5000000000000 VG/ML SUSPENSION *voretigene neparvovec-rzyl*	3	S Specialty Drug
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS 0.05 % EMULSION *cyclosporine (ophth)*	2	QL 60 / 30 DAYS
RESTASIS MULTIDOSE 0.05 % EMULSION *cyclosporine (ophth)*	2	QL 1 / 30 DAYS
OPHTHALMIC IRRIGATION SOLUTIONS		
balanced salt solution	1	
BSS SOLUTION *ophthalmic irrigation solution - intraocular*	3	
BSS PLUS SOLUTION *ophthalmic irrigation solution - intraocular*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC KINASE INHIBITORS - COMBINATIONS		
ROCKLATAN 0.02-0.005 % SOLUTION *netarsudil dimesylate-latanoprost*	3	QL 2.5 / 30 DAYS ST
OPHTHALMIC LOCAL ANESTHETICS		
AKTEN 3.5 % GEL *lidocaine hcl (ophth)*	3	
proparacaine hcl 0.5 % solution	1	
tetracaine hcl 0.5 % solution	1	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002 % SOLUTION *cenegermin-bkbj*	3	QL 56 / 56 DAYS PA S Specialty Drug
OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
ACUVAIL 0.45 % SOLUTION *ketorolac tromethamine (ophth)*	3	QL 30 / 30 DAYS
bromfenac sodium (once-daily) 0.09 % solution	1	QL 8 / Rx
BROMSITE 0.075 % SOLUTION *bromfenac sodium (ophth)*	3	
diclofenac sodium 0.1 % solution	1	QL 5 / Rx
FLURBIPROFEN SODIUM 0.03 % SOLUTION *flurbiprofen sodium*	3	QL 3 / Rx
flurbiprofen sodium 0.03 % solution	1	QL 3 / Rx
ILEVRO 0.3 % SUSPENSION *nepafenac*	3	
ketorolac tromethamine 0.4 % solution	1	QL 5 / Rx
ketorolac tromethamine 0.5 % solution	1	QL 15 / 30 DAYS
NEVANAC 0.1 % SUSPENSION *nepafenac*	3	
PROLENSA 0.07 % SOLUTION *bromfenac sodium (ophth)*	3	QL 3 / Rx

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE 15 MG RECON SOLN *verteporfin*	3	S Specialty Drug
OPHTHALMIC PHOTOENHANCER COMBINATIONS		
PHOTREXA VISCOUS 0.146-20 % SOLN PRSYR *riboflavin 5-phosphate sodium-dextran*	3	
PHOTREXA-PHOTREXA VISCOUS KIT 0.146 &0.146-20 % SOLN PRSYR *riboflavin5-phos sod & riboflavin 5-phosphate sodium-dextran*	3	
OPHTHALMIC RHO KINASE INHIBITORS		
RHOPRESSA 0.02 % SOLUTION *netarsudil dimesylate*	3	QL 2.5 / 30 DAYS ST
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS		
apraclonidine hcl 0.5 % solution	1	QL 24 / 30 DAYS
brimonidine tartrate 0.15 % solution	1	QL 12 / 30 DAYS
brimonidine tartrate 0.2 % solution	1	QL 12 / 30 DAYS
OPHTHALMIC STEROID COMBINATIONS		
bacitra-neomycin-polymyxin-hc 1 % ointment	1	QL 4 / Rx
BLEPHAMIDE 10-0.2 % SUSPENSION *sulfacetamide sod-prednisolone*	3	QL 5 / Rx
BLEPHAMIDE S.O.P. 10-0.2 % OINTMENT *sulfacetamide sod-prednisolone*	3	QL 4 / Rx
neo-polycin hc 1 % ointment	1	QL 4 / Rx
neomycin-polymyxin-dexameth 3.5-10000-0.1 ointment	1	QL 4 / Rx
neomycin-polymyxin-dexameth 3.5-10000-0.1 suspension	1	QL 5 / Rx
NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION *neomycin-polymyxin-hc (ophth)*	3	QL 10 / Rx
PRED-G 0.3-1 % SUSPENSION *gentamicin-prednisolone acetate*	3	QL 5 / Rx
PRED-G S.O.P. 0.3-0.6 % OINTMENT *gentamicin-prednisolone acetate*	3	QL 4 / Rx
sulfacetamide-prednisolone 10-0.23 % solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION *sulfacetamide sod-prednisolone*	3	QL 5 / Rx
TOBRADEX ST 0.3-0.05 % SUSPENSION *tobramycin-dexamethasone*	3	QL 5 / Rx
tobramycin-dexamethasone 0.3-0.1 % suspension	1	QL 5 / Rx
ZYLET 0.5-0.3 % SUSPENSION *loteprednol etabonate-tobramycin*	3	QL 5 / Rx
OPHTHALMIC STEROIDS		
ALREX 0.2 % SUSPENSION *loteprednol etabonate*	2	QL 15 / 30 DAYS
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION *dexamethasone sodium phosphate (ophth)*	2	QL 10 / Rx
DEXTENZA 0.4 MG INSERT *dexamethasone (ophth)*	3	
DEXYCU 9 % SUSPENSION *dexamethasone (ophth)*	3	
FLAREX 0.1 % SUSPENSION *fluorometholone acetate*	3	QL 10 / Rx
fluorometholone 0.1 % suspension	1	QL 10 / Rx
ILUVIEN 0.19 MG IMPLANT *fluocinolone acetonide (ophth)*	3	QL 1 / 365 DAYS S Specialty Drug
LOTEMAX 0.5 % GEL *loteprednol etabonate*	2	QL 10 / Rx
LOTEMAX 0.5 % OINTMENT *loteprednol etabonate*	2	QL 4 / Rx
LOTEMAX SM 0.38 % GEL *loteprednol etabonate*	2	QL 10 / Rx
loteprednol etabonate 0.5 % suspension	1	QL 21 / Rx
MAXIDEX 0.1 % SUSPENSION *dexamethasone (ophth)*	3	QL 10 / Rx
OZURDEX 0.7 MG IMPLANT *dexamethasone (ophth)*	3	QL 1.2 / 30 DAYS
PREDNISOLONE ACETATE 1 % SUSPENSION *prednisolone acetate (ophth)*	2	QL 21 / Rx
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION *prednisolone sodium phosphate (ophth)*	3	QL 20 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETISERT 0.59 MG IMPLANT *fluocinolone acetonide (ophth)*	3	QL 1 / 365 DAYS
TRIESENCE 40 MG/ML SUSPENSION *triamcinolone acetonide (ophth)*	3	QL 30 / 30 DAYS
YUTIQ 0.18 MG IMPLANT *fluocinolone acetonide (ophth)*	3	
OPHTHALMIC SULFONAMIDES		
SULFACETAMIDE SODIUM 10 % OINTMENT *sulfacetamide sodium (ophth)*	3	QL 4 / Rx
sulfacetamide sodium 10 % solution	1	QL 5 / Rx
OPHTHALMIC SURGICAL AIDS		
MEMBRANEBLUE 0.15 % SOLUTION *trypan blue*	3	
ocucoat viscoadherent 2 % solution	1	
TISSUEBLUE 0.025 % SOLN PRSYR *brilliant blue g*	3	
VISIONBLUE 0.06 % SOLUTION *trypan blue*	3	
OPHTHALMIC SURGICAL AIDS - COMBINATIONS		
OMIDRIA 1-0.3 % SOLUTION *phenylephrine-ketorolac*	3	
OPHTHALMICS - CYSTINOSIS AGENTS		
CYSTARAN 0.44 % SOLUTION *cysteamine hcl*	3	QL 30 / 30 DAYS S Specialty Drug
PROSTAGLANDINS - OPHTHALMIC		
latanoprost 0.005 % solution	1	QL 2.5 / 30 DAYS
LUMIGAN 0.01 % SOLUTION *bimatoprost*	2	QL 2.5 / 30 DAYS
travoprost (bak free) 0.004 % solution	1	QL 2.5 / 30 DAYS
VYZULTA 0.024 % SOLUTION *latanoprostene bunod*	3	QL 5 / 30 DAYS
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS		
BEOVU 6 MG/0.05ML SOLUTION *brolucizumab-dbll*	3	QL 1 / Rx S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EYLEA 2 MG/0.05ML SOLN PRSYR *aflibercept*	3	QL 1.2 / 30 DAYS S Specialty Drug
EYLEA 2 MG/0.05ML SOLUTION *aflibercept*	3	QL 1.2 / 30 DAYS S Specialty Drug
LUCENTIS 0.3 MG/0.05ML SOLN PRSYR *ranibizumab*	3	QL 1.2 / 30 DAYS S Specialty Drug
LUCENTIS 0.3 MG/0.05ML SOLUTION *ranibizumab*	3	QL 1.2 / 30 DAYS S Specialty Drug
LUCENTIS 0.5 MG/0.05ML SOLN PRSYR *ranibizumab*	3	QL 1.2 / 30 DAYS S Specialty Drug
LUCENTIS 0.5 MG/0.05ML SOLUTION *ranibizumab*	3	QL 1.2 / 30 DAYS S Specialty Drug
MACUGEN 0.3 MG SOLUTION *pegaptanib sodium*	3	QL 0.33 / 30 DAYS S Specialty Drug
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
acetic acid 2 % solution	1	
OTIC ANTI-INFECTIVES		
CETRAXAL 0.2 % SOLUTION *ciprofloxacin hcl (otic)*	3	QL 17 / 30 DAYS
CIPROFLOXACIN HCL 0.2 % SOLUTION *ciprofloxacin hcl (otic)*	3	QL 17 / 30 DAYS
ofloxacin 0.3 % solution	1	QL 10 / 30 DAYS
OTIPRIO 6 % SUSPENSION *ciprofloxacin (otic)*	3	
OTIC STEROID-ANTI-INFECTIVE COMBINATIONS		
CIPRODEX 0.3-0.1 % SUSPENSION *ciprofloxacin-dexamethasone*	2	QL 8 / 30 DAYS
ciprofloxacin-dexamethasone 0.3-0.1 % suspension	1	
CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % SOLUTION *ciprofloxacin-fluocinolone acetonide*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COLY-MYCIN S 3.3-3-10-0.5 MG/ML SUSPENSION *neomycin-colistin-hc-thonzonium*	3	QL 10 / Rx
CORTISPORIN-TC 3.3-3-10-0.5 MG/ML SUSPENSION *neomycin-colistin-hc-thonzonium*	3	
neomycin-polymyxin-hc 1 % solution	1	QL 10 / Rx
neomycin-polymyxin-hc 3.5-10000-1 solution	1	QL 10 / Rx
neomycin-polymyxin-hc 3.5-10000-1 suspension	1	QL 10 / Rx
OTOVEL 0.3-0.025 % SOLUTION *ciprofloxacin-fluocinolone acetonide*	3	
OTIC STEROIDS		
flac 0.01 % oil	1	
fluocinolone acetonide 0.01 % oil	1	
hydrocortisone-acetic acid 1-2 % solution	1	
OXYTOCICS		
ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS		
carboprost tromethamine 250 mcg/ml solution	1	
CERVIDIL 10 MG INSERT *dinoprostone*	3	GL Female
HEMABATE 250 MCG/ML SOLUTION *carboprost tromethamine*	3	
PREPIDIL 0.5 MG/3GM GEL *dinoprostone*	3	GL Female
PROSTIN E2 20 MG SUPPOS *dinoprostone*	3	GL Female
methergine 0.2 mg tab	1	QL 180 / 30 DAYS
methylergonovine maleate 0.2 mg tab	1	QL 180 / 30 DAYS
methylergonovine maleate 0.2 mg/ml solution	1	
oxytocin 10 unit/ml solution	1	
PITOCIN 10 UNIT/ML SOLUTION *oxytocin*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ANTITOXINS-ANTIVENINS		
ANASCORP RECON SOLN *centruroides (scorpion) immune f(ab')2 (equine)*	3	
ANAVIP RECON SOLN *crotalidae immune f(ab')2 (equine)*	3	
ANTIVENIN LATRODECTUS MACTANS KIT *antivenin latrodectus mactans*	1	
ANTIVENIN MICRURUS FULVIUS RECON SOLN *antivenin micrurus fulvius*	1	
CROFAB RECON SOLN *crotalidae polyvalent immune fab (ovine)*	3	
ANTIVIRAL MONOCLONAL ANTIBODIES		
SYNAGIS 100 MG/ML SOLUTION *palivizumab*	3	S Specialty Drug
SYNAGIS 50 MG/0.5ML SOLUTION *palivizumab*	3	S Specialty Drug
BACTERIAL MONOCLONAL ANTIBODIES		
ZINPLAVA 1000 MG/40ML SOLUTION *bezlotoxumab*	3	
IMMUNE SERUMS		
ASCENIV 5 GM/50ML SOLUTION *immune globulin (human)-slra*	3	S Specialty Drug
BIVIGAM 5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
CARIMUNE NF 12 GM RECON SOLN *immune globulin (human) iv*	3	S Specialty Drug
CARIMUNE NF 6 GM RECON SOLN *immune globulin (human) iv*	3	S Specialty Drug
CUTAQUIG 1 GM/6ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug
CUTAQUIG 1.65 GM/10ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug
CUTAQUIG 2 GM/12ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug
CUTAQUIG 3.3 GM/20ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CUTAQUIG 4 GM/24ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug
CUTAQUIG 8 GM/48ML SOLUTION *immune globulin (human)-hipp*	3	S Specialty Drug
CUVITRU 1 GM/5ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
CUVITRU 10 GM/50ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
CUVITRU 2 GM/10ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
CUVITRU 4 GM/20ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
CUVITRU 8 GM/40ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
CYTOGAM 50 MG/ML INJECTABLE *cytomegalovirus immune globulin (human)*	3	S Specialty Drug
FLEBOGAMMA DIF 0.5 GM/10ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 10 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 10 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 2.5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 20 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 20 GM/400ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 5 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
FLEBOGAMMA DIF 5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMASTAN INJECTABLE *immune globulin (human) im*	3	S Specialty Drug
GAMMAGARD 1 GM/10ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAGARD 10 GM/100ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMMAGARD 2.5 GM/25ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAGARD 20 GM/200ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAGARD 30 GM/300ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAGARD 5 GM/50ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAGARD S/D LESS IGA 10 GM RECON SOLN *immune globulin (human) iv*	3	S Specialty Drug
GAMMAGARD S/D LESS IGA 5 GM RECON SOLN *immune globulin (human) iv*	3	S Specialty Drug
GAMMAKED 1 GM/10ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAKED 10 GM/100ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAKED 20 GM/200ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAKED 5 GM/50ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMMAPLEX 10 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMMAPLEX 10 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMMAPLEX 20 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMMAPLEX 20 GM/400ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMMAPLEX 5 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMMAPLEX 5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
GAMUNEX-C 1 GM/10ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMUNEX-C 10 GM/100ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMUNEX-C 2.5 GM/25ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMUNEX-C 20 GM/200ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMUNEX-C 40 GM/400ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
GAMUNEX-C 5 GM/50ML SOLUTION *immune globulin (human) iv or subcutaneous*	3	S Specialty Drug
HEPAGAM B SOLUTION *hepatitis b immune globulin (human)*	3	S Specialty Drug
HIZENTRA 1 GM/5ML SOLN PRSYR *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 1 GM/5ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 10 GM/50ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 2 GM/10ML SOLN PRSYR *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 2 GM/10ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 4 GM/20ML SOLN PRSYR *immune globulin (human) subcutaneous*	3	S Specialty Drug
HIZENTRA 4 GM/20ML SOLUTION *immune globulin (human) subcutaneous*	3	S Specialty Drug
HYPERHEP B S/D SOLUTION *hepatitis b immune globulin (human)*	3	S Specialty Drug
HYPERRAB 1500 UNIT/5ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
HYPERRAB 300 UNIT/ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
HYPERRAB 900 UNIT/3ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
HYPERRAB S/D 1500 UNIT/10ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
HYPERRAB S/D 300 UNIT/2ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
HYPERRHO S/D 1500 UNIT SOLN PRSYR *rho d immune globulin (human)*	3	S Specialty Drug
HYPERRHO S/D 250 UNIT SOLN PRSYR *rho d immune globulin (human)*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPERTET S/D 250 UNIT/ML INJECTABLE *tetanus immune globulin (human)*	3	S Specialty Drug
IMOGAM RABIES-HT 1500 UNIT/10ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
IMOGAM RABIES-HT 300 UNIT/2ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
KEDRAB 1500 UNIT/10ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
KEDRAB 300 UNIT/2ML SOLUTION *rabies immune globulin (human)*	3	S Specialty Drug
MICRHOGAM ULTRA-FILTERED PLUS 250 UNIT SOLN PRSYR *rho d immune globulin (human)*	3	S Specialty Drug
NABI-HB SOLUTION *hepatitis b immune globulin (human)*	3	S Specialty Drug
OCTAGAM 1 GM/20ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 10 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 10 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 2 GM/20ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 2.5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 20 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 25 GM/500ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 30 GM/300ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 5 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
OCTAGAM 5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
PANZYGA 1 GM/10ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug
PANZYGA 10 GM/100ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PANZYGA 2.5 GM/25ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug
PANZYGA 20 GM/200ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug
PANZYGA 30 GM/300ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug
PANZYGA 5 GM/50ML SOLUTION *immune globulin (human)-ifas*	3	S Specialty Drug
PRIVIGEN 10 GM/100ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
PRIVIGEN 20 GM/200ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
PRIVIGEN 40 GM/400ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
PRIVIGEN 5 GM/50ML SOLUTION *immune globulin (human) iv*	3	S Specialty Drug
RHOGAM ULTRA-FILTERED PLUS 1500 UNIT SOLN PRSYR *rho d immune globulin (human)*	3	S Specialty Drug
RHOPHYLAC 1500 UNIT/2ML SOLN PRSYR *rho d immune globulin (human)*	3	S Specialty Drug
VARIZIG 125 UNIT/1.2ML SOLUTION *varicella-zoster immune globulin (human)*	3	S Specialty Drug
WINRHO SDF 1500 UNIT/1.3ML SOLUTION *rho d immune globulin (human)*	3	S Specialty Drug
WINRHO SDF 15000 UNIT/13ML SOLUTION *rho d immune globulin (human)*	3	S Specialty Drug
WINRHO SDF 2500 UNIT/2.2ML SOLUTION *rho d immune globulin (human)*	3	S Specialty Drug
WINRHO SDF 5000 UNIT/4.4ML SOLUTION *rho d immune globulin (human)*	3	S Specialty Drug
XEMBIFY 1 GM/5ML SOLUTION *immune globulin (human)-klhw*	3	S Specialty Drug
XEMBIFY 10 GM/50ML SOLUTION *immune globulin (human)-klhw*	3	S Specialty Drug
XEMBIFY 2 GM/10ML SOLUTION *immune globulin (human)-klhw*	3	S Specialty Drug
XEMBIFY 4 GM/20ML SOLUTION *immune globulin (human)-klhw*	3	S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA 10 GM/100ML KIT *immune globulin (human)-hyaluronidase (human recombinant)*	3	S Specialty Drug
HYQVIA 2.5 GM/25ML KIT *immune globulin (human)-hyaluronidase (human recombinant)*	3	S Specialty Drug
HYQVIA 20 GM/200ML KIT *immune globulin (human)-hyaluronidase (human recombinant)*	3	S Specialty Drug
HYQVIA 30 GM/300ML KIT *immune globulin (human)-hyaluronidase (human recombinant)*	3	S Specialty Drug
HYQVIA 5 GM/50ML KIT *immune globulin (human)-hyaluronidase (human recombinant)*	3	S Specialty Drug
PENICILLINS		
AMINOPENICILLINS		
AMOXICILLIN 125 MG CHEW TAB *amoxicillin*	3	
amoxicillin 125 mg/5ml recon susp	1	
amoxicillin 200 mg/5ml recon susp	1	
amoxicillin 250 mg cap	1	
AMOXICILLIN 250 MG CHEW TAB *amoxicillin*	3	
amoxicillin 250 mg/5ml recon susp	1	
amoxicillin 400 mg/5ml recon susp	1	
amoxicillin 500 mg cap	1	
amoxicillin 500 mg tab	1	
amoxicillin 875 mg tab	1	
AMPICILLIN 500 MG CAP *ampicillin*	3	
AMPICILLIN SODIUM 1 GM RECON SOLN *ampicillin sodium*	1	
ampicillin sodium 1 gm recon soln	1	
ampicillin sodium 10 gm recon soln	1	
AMPICILLIN SODIUM 125 MG RECON SOLN *ampicillin sodium*	1	
ampicillin sodium 2 gm recon soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ampicillin sodium 2 gm recon soln	1	
ampicillin sodium 250 mg recon soln	1	
ampicillin sodium 500 mg recon soln	1	
MOXATAG 775 MG TAB ER 24H *amoxicillin*	3	
NATURAL PENICILLINS		
BICILLIN L-A 1200000 UNIT/2ML SUSPENSION *penicillin g benzathine*	3	
BICILLIN L-A 2400000 UNIT/4ML SUSPENSION *penicillin g benzathine*	3	
BICILLIN L-A 600000 UNIT/ML SUSPENSION *penicillin g benzathine*	3	
PENICILLIN G POT IN DEXTROSE 20000 UNIT/ML SOLUTION *penicillin g pot in dextrose*	1	
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML SOLUTION *penicillin g pot in dextrose*	1	
PENICILLIN G POT IN DEXTROSE 60000 UNIT/ML SOLUTION *penicillin g pot in dextrose*	1	
penicillin g potassium 20000000 unit recon soln	1	
penicillin g potassium 5000000 unit recon soln	1	
PENICILLIN G PROCAINE 600000 UNIT/ML SUSPENSION *penicillin g procaine*	1	
PENICILLIN G SODIUM 5000000 UNIT RECON SOLN *penicillin g sodium*	1	
PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN *penicillin v potassium*	3	
penicillin v potassium 250 mg tab	1	
PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN *penicillin v potassium*	3	
penicillin v potassium 500 mg tab	1	
PFIZERPEN 20000000 UNIT RECON SOLN *penicillin g potassium*	3	
PFIZERPEN 5000000 UNIT RECON SOLN *penicillin g potassium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENICILLIN COMBINATIONS		
AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB *amoxicillin & pot clavulanate*	3	
amoxicillin-pot clavulanate 200-28.5 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 250-125 mg tab	1	
amoxicillin-pot clavulanate 250-62.5 mg/5ml recon susp	1	
AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB *amoxicillin & pot clavulanate*	3	
amoxicillin-pot clavulanate 400-57 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 500-125 mg tab	1	
amoxicillin-pot clavulanate 600-42.9 mg/5ml recon susp	1	
amoxicillin-pot clavulanate 875-125 mg tab	1	
amoxicillin-pot clavulanate er 1000-62.5 mg tab er 12h	1	
AMOXICILLIN-POT CLAVULANATE ER 1000-62.5 MG TAB ER 12H *amoxicillin & pot clavulanate*	3	
ampicillin-sulbactam sodium 1.5 (1-0.5) gm recon soln	1	
ampicillin-sulbactam sodium 15 (10-5) gm recon soln	1	
ampicillin-sulbactam sodium 3 (2-1) gm recon soln	1	
AMPICILLIN-SULBACTAM SODIUM 3 (2-1) GM RECON SOLN *ampicillin & sulbactam sodium*	1	
AUGMENTIN 125-31.25 MG/5ML RECON SUSP *amoxicillin & pot clavulanate*	3	
BICILLIN C-R 1200000 UNIT/2ML SUSPENSION *penicillin g benzathine & procaine*	3	
BICILLIN C-R 900/300 900000-300000 UNIT/2ML SUSPENSION *penicillin g benzathine & procaine*	3	
piperacillin sod-tazobactam so 13.5 (12-1.5) gm recon soln	1	
piperacillin sod-tazobactam so 2.25 (2-0.25) gm recon soln	1	
piperacillin sod-tazobactam so 3.375 (3-0.375) gm recon soln	1	
piperacillin sod-tazobactam so 4.5 (4-0.5) gm recon soln	1	
piperacillin sod-tazobactam so 40.5 (36-4.5) gm recon soln	1	
UNASYN 1.5 (1-0.5) GM RECON SOLN *ampicillin & sulbactam sodium*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNASYN 15 (10-5) GM RECON SOLN *ampicillin & sulbactam sodium*	3	
UNASYN 3 (2-1) GM RECON SOLN *ampicillin & sulbactam sodium*	3	
ZOSYN 2-0.25 GM/50ML SOLUTION *piperacillin sodium-tazobactam sodium in dextrose*	3	
ZOSYN 2.25 (2-0.25) GM RECON SOLN *piperacillin sodium-tazobactam sodium*	3	
ZOSYN 3-0.375 GM/50ML SOLUTION *piperacillin sodium-tazobactam sodium in dextrose*	3	
ZOSYN 3.375 (3-0.375) GM RECON SOLN *piperacillin sodium-tazobactam sodium*	3	
ZOSYN 4-0.5 GM/100ML SOLUTION *piperacillin sodium-tazobactam sodium in dextrose*	3	
ZOSYN 4.5 (4-0.5) GM RECON SOLN *piperacillin sodium-tazobactam sodium*	3	
ZOSYN 40.5 (36-4.5) GM RECON SOLN *piperacillin sodium-tazobactam sodium*	3	
PENICILLINASE-RESISTANT PENICILLINS		
dicloxacillin sodium 250 mg cap	1	
dicloxacillin sodium 500 mg cap	1	
NAFCILLIN SODIUM 1 GM RECON SOLN *nafcillin sodium*	1	
nafcillin sodium 1 gm recon soln	1	
NAFCILLIN SODIUM 10 GM RECON SOLN *nafcillin sodium*	1	
nafcillin sodium 10 gm recon soln	1	
NAFCILLIN SODIUM 2 GM RECON SOLN *nafcillin sodium*	1	
nafcillin sodium 2 gm recon soln	1	
NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML SOLUTION *nafcillin sodium in dextrose*	1	
NAFCILLIN SODIUM IN DEXTROSE 2 GM/100ML SOLUTION *nafcillin sodium in dextrose*	1	
oxacillin sodium 1 gm recon soln	1	
oxacillin sodium 10 gm recon soln	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxacillin sodium 2 gm recon soln	1	
OXACILLIN SODIUM IN DEXTROSE 1 GM/50ML SOLUTION *oxacillin sodium in dextrose*	1	
OXACILLIN SODIUM IN DEXTROSE 2 GM/50ML SOLUTION *oxacillin sodium in dextrose*	1	
PHARMACEUTICAL ADJUVANTS		
PARENTERAL VEHICLES		
BACTERIOSTATIC WATER(BENZ ALC) SOLUTION *water for inject, bacteriostatic benzyl alcohol*	1	
DILUENT FOR LEFAMULIN 0.9 % SOLUTION *citrate buffered sodium chloride*	1	
DILUENT FOR TREPROSTINIL SOLUTION *glycine diluent*	1	
saline bacteriostatic 0.9 % solution	1	
SALINE-PHENOL 0.4-0.9 % SOLUTION *saline w/ phenol*	1	
sodium chloride bacteriostatic 0.9 % solution	1	
STERILE DILUENT FLOLAN PH 12 SOLUTION *glycine diluent*	3	
STERILE DILUENT FOR FLOLAN SOLUTION *glycine diluent*	3	
sterile diluent/epoprostenol solution	1	
sterile water for injection solution	1	
sterile water for injection solution	1	
PROGESTINS		
hydroxyprogesterone caproate 250 mg/ml oil	1	GL Female S Specialty Drug
MAKENA 250 MG/ML OIL *hydroxyprogesterone caproate*	3	GL Female S Specialty Drug
MAKENA 275 MG/1.1ML SOLN A-INJ *hydroxyprogesterone caproate*	3	GL Female S Specialty Drug
medroxyprogesterone acetate 10 mg tab	1	GL Female
medroxyprogesterone acetate 2.5 mg tab	1	GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
medroxyprogesterone acetate 5 mg tab	1	GL Female
megestrol acetate 625 mg/5ml suspension	1	
norethindrone acetate 5 mg tab	1	GL Female
progesterone 50 mg/ml oil	1	GL Female
progesterone micronized 100 mg cap	1	GL Female
progesterone micronized 200 mg cap	1	GL Female
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR OPIOID WITHDRAWAL		
LUCEMYRA 0.18 MG TAB *lofexidine hcl*	3	QL 228 / 180 DAYS PA
ALCOHOL DETERRENTS		
acamprosate calcium 333 mg tab dr	1	
disulfiram 250 mg tab	1	
disulfiram 500 mg tab	1	
ANTI-CATAPLECTIC AGENTS		
XYREM 500 MG/ML SOLUTION *sodium oxybate*	3	QL 540 / 30 DAYS PA S Specialty Drug
ANTIDEMENTIA AGENT COMBINATIONS		
NAMZARIC 14-10 MG CAP ER 24H *memantine hcl-donepezil hcl*	3	AL1 At least 40 yrs old
NAMZARIC 21-10 MG CAP ER 24H *memantine hcl-donepezil hcl*	3	AL1 At least 40 yrs old
NAMZARIC 28-10 MG CAP ER 24H *memantine hcl-donepezil hcl*	3	AL1 At least 40 yrs old
NAMZARIC 7 & 14 & 21 &28 -10 MG CP24 THPK *memantine hcl-donepezil hcl*	3	AL1 At least 40 yrs old
NAMZARIC 7-10 MG CAP ER 24H *memantine hcl-donepezil hcl*	3	AL1 At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTISENSE OLIGONUCLEOTIDE (ASO) INHIBITOR AGENTS		
TEGSEDI 284 MG/1.5ML SOLN PRSYR *inotersen sodium*	3	QL 6 / 28 DAYS PA S Specialty Drug
BENZODIAZEPINES & TRICYCLIC AGENTS		
CHLORDIAZEPOXIDE-AMITRIPTYLINE 10-25 MG TAB *chlordiazepoxide-amitriptyline*	3	
CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TAB *chlordiazepoxide-amitriptyline*	3	
CHOLINOMIMETICS - ACHE INHIBITORS		
donepezil hcl 10 mg tab	1	AL1 At least 40 yrs old
donepezil hcl 10 mg tab disp	1	AL1 At least 40 yrs old
donepezil hcl 23 mg tab	1	AL1 At least 40 yrs old
donepezil hcl 5 mg tab	1	AL1 At least 40 yrs old
donepezil hcl 5 mg tab disp	1	AL1 At least 40 yrs old
galantamine hydrobromide 12 mg tab	1	AL1 At least 40 yrs old
galantamine hydrobromide 4 mg tab	1	AL1 At least 40 yrs old
GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION *galantamine hydrobromide*	3	AL1 At least 40 yrs old
galantamine hydrobromide 8 mg tab	1	AL1 At least 40 yrs old
galantamine hydrobromide er 16 mg cap er 24h	1	AL1 At least 40 yrs old
galantamine hydrobromide er 24 mg cap er 24h	1	AL1 At least 40 yrs old
galantamine hydrobromide er 8 mg cap er 24h	1	AL1 At least 40 yrs old
rivastigmine 13.3 mg/24hr patch 24hr	1	AL1 At least 40 yrs old
rivastigmine 4.6 mg/24hr patch 24hr	1	AL1 At least 40 yrs old
rivastigmine 9.5 mg/24hr patch 24hr	1	AL1 At least 40 yrs old
rivastigmine tartrate 1.5 mg cap	1	AL1 At least 40 yrs old
rivastigmine tartrate 3 mg cap	1	AL1 At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
rivastigmine tartrate 4.5 mg cap	1	AL1 At least 40 yrs old
rivastigmine tartrate 6 mg cap	1	AL1 At least 40 yrs old
FIBROMYALGIA AGENT - SNRIS		
SAVELLA 100 MG TAB *milnacipran hcl*	3	QL 60 / 30 DAYS
SAVELLA 12.5 MG TAB *milnacipran hcl*	3	QL 60 / 30 DAYS
SAVELLA 25 MG TAB *milnacipran hcl*	3	QL 60 / 30 DAYS
SAVELLA 50 MG TAB *milnacipran hcl*	3	QL 60 / 30 DAYS
SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC *milnacipran hcl*	3	QL 55 / 180 DAYS
MELANOCORTIN RECEPTOR AGONISTS		
VYLEESI 1.75 MG/0.3ML SOLN A-INJ *bremelanotide acetate*	3	QL 1.8 / 30 DAYS PA GL Female S Specialty Drug
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12 MG TAB *deutetrabenazine*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
AUSTEDO 6 MG TAB *deutetrabenazine*	3	QL 60 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
AUSTEDO 9 MG TAB *deutetrabenazine*	3	QL 120 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INGREZZA 40 MG CAP *valbenazine tosylate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
INGREZZA 80 MG CAP *valbenazine tosylate*	3	QL 30 / 30 DAYS PA AL1 At least 18 yrs old S Specialty Drug
tetrabenazine 12.5 mg tab	1	QL 240 / 30 DAYS PA S Specialty Drug
tetrabenazine 25 mg tab	1	QL 120 / 30 DAYS PA S Specialty Drug
MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS		
AUBAGIO 14 MG TAB *teriflunomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
AUBAGIO 7 MG TAB *teriflunomide*	2	QL 30 / 30 DAYS PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS		
COPAXONE 20 MG/ML SOLN PRSYR *glatiramer acetate*	2	QL 30 / 30 DAYS PA S Specialty Drug
COPAXONE 40 MG/ML SOLN PRSYR *glatiramer acetate*	2	QL 12 / 28 DAYS PA S Specialty Drug
glatiramer acetate 20 mg/ml soln prsyr	1	QL 30 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glatiramer acetate 40 mg/ml soln prsyr	1	QL 12 / 28 DAYS PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES		
MAVENCLAD (10 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 20 / 301 DAYS PA S Specialty Drug
MAVENCLAD (4 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 8 / 301 DAYS PA S Specialty Drug
MAVENCLAD (5 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 10 / 301 DAYS PA S Specialty Drug
MAVENCLAD (6 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 12 / 301 DAYS PA S Specialty Drug
MAVENCLAD (7 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 14 / 301 DAYS PA S Specialty Drug
MAVENCLAD (8 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 8 / 301 DAYS PA S Specialty Drug
MAVENCLAD (9 TABS) 10 MG TAB THPK *cladribine (multiple sclerosis)*	2	QL 9 / 301 DAYS PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - INTERFERONS		
AVONEX 30 MCG KIT *interferon beta-1a*	2	QL 4 / 28 DAYS PA S Specialty Drug
AVONEX PEN 30 MCG/0.5ML AUT-IJ KIT *interferon beta-1a*	2	QL 4 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVONEX PREFILLED 30 MCG/0.5ML PREF SY KT *interferon beta-1a*	2	QL 4 / 28 DAYS PA S Specialty Drug
BETASERON 0.3 MG KIT *interferon beta-1b*	2	QL 14 / 28 DAYS PA S Specialty Drug
PLEGRIDY 125 MCG/0.5ML SOLN PEN *peginterferon beta-1a*	2	QL 1 / 28 DAYS PA S Specialty Drug
PLEGRIDY 125 MCG/0.5ML SOLN PRSYR *peginterferon beta-1a*	2	QL 1 / 28 DAYS PA S Specialty Drug
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PEN *peginterferon beta-1a*	2	QL 1 / 180 DAYS PA S Specialty Drug
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PRSYR *peginterferon beta-1a*	2	QL 1 / 180 DAYS PA S Specialty Drug
REBIF 22 MCG/0.5ML SOLN PRSYR *interferon beta-1a*	2	QL 6 / 28 DAYS PA S Specialty Drug
REBIF 44 MCG/0.5ML SOLN PRSYR *interferon beta-1a*	2	QL 6 / 28 DAYS PA S Specialty Drug
REBIF REBIDOSE 22 MCG/0.5ML SOLN A-INJ *interferon beta-1a*	2	QL 6 / 28 DAYS PA S Specialty Drug
REBIF REBIDOSE 44 MCG/0.5ML SOLN A-INJ *interferon beta-1a*	2	QL 6 / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REBIF REBIDOSE TITRATION PACK 6X8.8 & 6X22 MCG SOLN A-INJ *interferon beta-1a*	2	QL 4 / 180 DAYS PA S Specialty Drug
REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR *interferon beta-1a*	2	QL 4.2 / 180 DAYS PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES		
LEMTRADA 12 MG/1.2ML SOLUTION *alemtuzumab (ms)*	3	S Specialty Drug
OCREVUS 300 MG/10ML SOLUTION *ocrelizumab*	3	S Specialty Drug
TYSABRI 300 MG/15ML CONC *natalizumab*	3	QL 1 / 28 DAYS S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS		
dimethyl fumarate 120 mg cap dr	1	PA S Specialty Drug
dimethyl fumarate 240 mg cap dr	1	PA S Specialty Drug
MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS		
dalfampridine er 10 mg tab er 12h	1	QL 60 / 30 DAYS PA S Specialty Drug
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS		
memantine hcl 10 mg tab	1	QL 60 / 30 DAYS AL1 At least 40 yrs old
memantine hcl 10 mg/5ml solution	1	AL1 At least 40 yrs old
memantine hcl 2 mg/ml solution	1	QL 360 / 30 DAYS AL1 At least 40 yrs old
memantine hcl 28 x 5 mg & 21 x 10 mg tab	1	AL1 At least 40 yrs old
memantine hcl 5 mg tab	1	QL 90 / 30 DAYS AL1 At least 40 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
memantine hcl er 14 mg cap er 24h	1	AL1 At least 40 yrs old
memantine hcl er 21 mg cap er 24h	1	AL1 At least 40 yrs old
memantine hcl er 28 mg cap er 24h	1	AL1 At least 40 yrs old
memantine hcl er 7 mg cap er 24h	1	AL1 At least 40 yrs old
NAMENDA XR TITRATION PACK 7 & 14 & 21 &28 MG CAP ER 24H *memantine hcl*	3	AL1 At least 40 yrs old
PHENOTHIAZINES & TRICYCLIC AGENTS		
PERPHENAZINE-AMITRIPTYLINE 2-10 MG TAB *perphenazine-amitriptyline*	3	
PERPHENAZINE-AMITRIPTYLINE 2-25 MG TAB *perphenazine-amitriptyline*	3	
PERPHENAZINE-AMITRIPTYLINE 4-10 MG TAB *perphenazine-amitriptyline*	3	
PERPHENAZINE-AMITRIPTYLINE 4-25 MG TAB *perphenazine-amitriptyline*	3	
PERPHENAZINE-AMITRIPTYLINE 4-50 MG TAB *perphenazine-amitriptyline*	3	
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
GRALISE 300 MG TAB *gabapentin (once-daily)*	3	QL 30 / 30 DAYS ST
GRALISE 600 MG TAB *gabapentin (once-daily)*	3	QL 90 / 30 DAYS ST
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS		
FLUOXETINE HCL (PMDD) 10 MG CAP *fluoxetine hcl (pmdd)*	3	
fluoxetine hcl (pmdd) 10 mg tab	1	
FLUOXETINE HCL (PMDD) 20 MG CAP *fluoxetine hcl (pmdd)*	3	
fluoxetine hcl (pmdd) 20 mg tab	1	
PSEUDOBULBAR AFFECT AGENT COMBINATIONS		
NUEDEXTA 20-10 MG CAP *dextromethorphan hbr-quinidine sulfate*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PIMOZIDE 1 MG TAB *pimozide*	3	
PIMOZIDE 2 MG TAB *pimozide*	3	
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT 300 MG TAB ER *gabapentin enacarbil*	3	QL 60 / 30 DAYS ST
HORIZANT 600 MG TAB ER *gabapentin enacarbil*	3	QL 60 / 30 DAYS ST
SEROTONIN 1A RECEPT AGONIST/SEROTONIN 2A RECEPT ANTAG		
ADDYI 100 MG TAB *flibanserin*	3	QL 30 / 30 DAYS PA GL Female AL1 18 to 60 yrs old
SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS		
ONPATTRO 10 MG/5ML SOLUTION *patisiran sodium*	3	S Specialty Drug
SMOKING DETERRENTS		
bupropion hcl er (smoking det) 150 mg tab er 12h	1	QL 60 / 30 DAYS ACA Affordable Care Act
CHANTIX 0.5 MG TAB *varenicline tartrate*	2	QL 60 / 30 DAYS ACA Affordable Care Act
CHANTIX 1 MG TAB *varenicline tartrate*	2	QL 60 / 30 DAYS ACA Affordable Care Act
CHANTIX CONTINUING MONTH PAK 1 MG TAB *varenicline tartrate*	2	QL 60 / 30 DAYS ACA Affordable Care Act
CHANTIX STARTING MONTH PAK 0.5 MG X 11 & 1 MG X 42 TAB *varenicline tartrate*	2	ACA Affordable Care Act
cvs nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cvs nicotine 2 mg gum	1	ACA Affordable Care Act
cvs nicotine 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
cvs nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
cvs nicotine 4 mg gum	1	ACA Affordable Care Act
cvs nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
cvs nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
cvs nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
cvs nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
cvs nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
eq nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
eq nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
eq nicotine 4 mg gum	1	ACA Affordable Care Act
eq nicotine 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
eq nicotine 7 mg/24hr patch 24hr	1	ACA Affordable Care Act
eq nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
eq nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eq nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
eq nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
eq nicotine step 3 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
eql nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
eql nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
eql nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
eql nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
gnp nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
gnp nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
gnp nicotine mini 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
gnp nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
gnp nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
gnp nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
gnp nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
goodsense nicotine 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
goodsense nicotine 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
goodsense nicotine 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
goodsense nicotine 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
hm nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
hm nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
hm nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
hm nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
hm nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
hm nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
hm nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
kls quit2 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
kls quit2 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
kls quit4 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
kls quit4 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicorelief 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
NICOTINE 21-14-7 MG/24HR KIT *nicotine*	2	QL 30 / 30 DAYS ACA Affordable Care Act
nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
nicotine mini 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine mini 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
nicotine step 1 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
nicotine step 2 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
nicotine step 3 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
NICOTROL 10 MG INHALER *nicotine*	2	QL 480 / 30 DAYS ACA Affordable Care Act
NICOTROL NS 10 MG/ML SOLUTION *nicotine*	2	QL 600 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
px stop smoking aid 2 mg gum	1	ACA Affordable Care Act
px stop smoking aid 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
px stop smoking aid 4 mg gum	1	ACA Affordable Care Act
px stop smoking aid 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra mini nicotine 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra mini nicotine 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine 14 mg/24hr patch 24hr	1	ACA Affordable Care Act
ra nicotine 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
ra nicotine 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine 7 mg/24hr patch 24hr	1	ACA Affordable Care Act
ra nicotine gum 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine gum 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine polacrilex 2 mg gum	1	ACA Affordable Care Act
ra nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
ra nicotine polacrilex 4 mg gum	1	ACA Affordable Care Act
ra nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sm nicotine 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
sm nicotine 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
sm nicotine 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
sm nicotine 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
sm nicotine 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
sm nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
sm nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
sm nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
sr nicotine 2 mg gum	1	ACA Affordable Care Act
tgt nicotine 2 mg gum	1	ACA Affordable Care Act
tgt nicotine 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
tgt nicotine polacrilex 2 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
tgt nicotine polacrilex 2 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
tgt nicotine polacrilex 4 mg gum	1	QL 720 / 30 DAYS ACA Affordable Care Act
tgt nicotine polacrilex 4 mg lozenge	1	QL 720 / 30 DAYS ACA Affordable Care Act
tgt nicotine step one 21 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tgt nicotine step three 7 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
tgt nicotine step two 14 mg/24hr patch 24hr	1	QL 30 / 30 DAYS ACA Affordable Care Act
thrive 2 mg gum	1	ACA Affordable Care Act
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS		
GILENYA 0.5 MG CAP *fingolimod hcl*	2	QL 30 / 30 DAYS PA S Specialty Drug
MAYZENT 0.25 MG TAB *siponimod fumarate*	2	QL 120 / 30 DAYS PA S Specialty Drug
MAYZENT 2 MG TAB *siponimod fumarate*	2	QL 30 / 30 DAYS PA S Specialty Drug
ZEPOSIA 0.92 MG CAP *ozanimod hcl*	2	QL 30 / 30 DAYS PA S Specialty Drug
ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK *ozanimod hcl*	2	QL 7 / 180 DAYS PA S Specialty Drug
ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK *ozanimod hcl*	2	QL 37 / 180 DAYS PA S Specialty Drug
THIENBENZODIAZEPINES & SSRIS		
olanzapine-fluoxetine hcl 12-25 mg cap	1	AL1 At least 10 yrs old
olanzapine-fluoxetine hcl 12-50 mg cap	1	AL1 At least 10 yrs old
olanzapine-fluoxetine hcl 3-25 mg cap	1	AL1 At least 10 yrs old
olanzapine-fluoxetine hcl 6-25 mg cap	1	AL1 At least 10 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olanzapine-fluoxetine hcl 6-50 mg cap	1	AL1 At least 10 yrs old
VASOMOTOR SYMPTOM AGENTS - SSRIS		
paroxetine mesylate 7.5 mg cap	1	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST NP 1000 MG RECON SOLN *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
ARALAST NP 500 MG RECON SOLN *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
GLASSIA 1000 MG/50ML SOLUTION *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
PROLASTIN-C 1000 MG RECON SOLN *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
PROLASTIN-C 1000 MG/20ML SOLUTION *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
ZEMAIRA 1000 MG RECON SOLN *alpha1-proteinase inhibitor (human)*	3	S Specialty Drug
CFTR POTENTIATORS		
KALYDECO 150 MG TAB *ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
KALYDECO 25 MG PACKET *ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
KALYDECO 50 MG PACKET *ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
KALYDECO 75 MG PACKET *ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
CYSTIC FIBROSIS AGENT - COMBINATIONS		
ORKAMBI 100-125 MG PACKET *lumacaftor-ivacaftor*	3	QL 60 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORKAMBI 100-125 MG TAB *lumacaftor-ivacaftor*	3	QL 120 / 30 DAYS PA S Specialty Drug
ORKAMBI 150-188 MG PACKET *lumacaftor-ivacaftor*	3	QL 60 / 30 DAYS PA S Specialty Drug
ORKAMBI 200-125 MG TAB *lumacaftor-ivacaftor*	3	QL 120 / 30 DAYS PA S Specialty Drug
SYMDEKO 100-150 & 150 MG TAB THPK *tezacaftor-ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
SYMDEKO 50-75 & 75 MG TAB THPK *tezacaftor-ivacaftor*	2	QL 60 / 30 DAYS PA S Specialty Drug
TRIKAFTA 100-50-75 & 150 MG TAB THPK *elexacaftor-tezacaftor-ivacaftor*	2	QL 90 / 30 DAYS PA S Specialty Drug
HYDROLYTIC ENZYMES		
PULMOZYME 1 MG/ML SOLUTION *dornase alfa*	2	QL 150 / 30 DAYS S Specialty Drug
PLEURAL SCLEROSING AGENTS		
SCLEROSOL INTRAPLEURAL 4 GM AERO POWD *talc (intrapleural)*	3	
STERILE TALC POWDER 5 GM RECON SUSP *talc (intrapleural)*	3	
PULMONARY FIBROSIS AGENTS		
ESBRIET 267 MG CAP *pirfenidone*	3	QL 180 / 30 DAYS PA S Specialty Drug
ESBRIET 267 MG TAB *pirfenidone*	3	QL 180 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESBRIET 801 MG TAB *pirfenidone*	3	QL 90 / 30 DAYS PA S Specialty Drug
PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS		
OFEV 100 MG CAP *nintedanib esylate*	3	QL 60 / 30 DAYS PA S Specialty Drug
OFEV 150 MG CAP *nintedanib esylate*	3	QL 60 / 30 DAYS PA S Specialty Drug
CUROSURF 120 MG/1.5ML SUSPENSION *poractant alfa*	3	
CUROSURF 240 MG/3ML SUSPENSION *poractant alfa*	3	
INFASURF 35-0.9 MG/ML-% SUSPENSION *calfactant in nacl*	3	
SURVANTA 25-0.9 MG/ML-% SUSPENSION *beractant in nacl*	3	
SULFONAMIDES		
SULFADIAZINE 500 MG TAB *sulfadiazine*	2	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 100 MG RECON SOLN *omadacycline tosylate*	3	S Specialty Drug
NUZYRA 150 MG TAB *omadacycline tosylate*	3	S Specialty Drug
FLUOROCYCLINES		
XERAVA 50 MG RECON SOLN *eravacycline dihydrochloride*	3	
GLYCYLCYCLINES		
TIGECYCLINE 50 MG RECON SOLN *tigecycline*	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tigecycline 50 mg recon soln	1	
TYGACIL 50 MG RECON SOLN *tigecycline*	3	
avidoxy 100 mg tab	1	
demeclocycline hcl 150 mg tab	1	
demeclocycline hcl 300 mg tab	1	
doxy 100 100 mg recon soln	1	
doxycycline hyclate 100 mg cap	1	
doxycycline hyclate 100 mg recon soln	1	
doxycycline hyclate 100 mg tab	1	
doxycycline hyclate 150 mg tab	1	
doxycycline hyclate 20 mg tab	1	
doxycycline hyclate 50 mg cap	1	
doxycycline hyclate 75 mg tab	1	
doxycycline monohydrate 100 mg cap	1	
doxycycline monohydrate 100 mg tab	1	
doxycycline monohydrate 150 mg cap	1	QL 30 / Rx
doxycycline monohydrate 150 mg tab	1	
doxycycline monohydrate 25 mg/5ml recon susp	1	
doxycycline monohydrate 50 mg cap	1	
doxycycline monohydrate 50 mg tab	1	
doxycycline monohydrate 75 mg cap	1	
doxycycline monohydrate 75 mg tab	1	
MINOCIN 100 MG RECON SOLN *minocycline hcl*	3	
minocycline hcl 100 mg cap	1	
minocycline hcl 100 mg tab	1	
minocycline hcl 50 mg cap	1	
minocycline hcl 50 mg tab	1	
minocycline hcl 75 mg cap	1	
minocycline hcl 75 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
minocycline hcl er 105 mg tab er 24h	1	QL 30 / 30 DAYS
minocycline hcl er 115 mg tab er 24h	1	QL 30 / 30 DAYS
minocycline hcl er 55 mg tab er 24h	1	QL 30 / 30 DAYS
minocycline hcl er 65 mg tab er 24h	1	QL 30 / 30 DAYS
minocycline hcl er 80 mg tab er 24h	1	QL 30 / 30 DAYS
mondoxyne nl 100 mg cap	1	
mondoxyne nl 50 mg cap	1	
mondoxyne nl 75 mg cap	1	
morgidox 100 mg cap	1	
morgidox 50 mg cap	1	
okebo 75 mg cap	1	
tetracycline hcl 250 mg cap	1	
tetracycline hcl 500 mg cap	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
methimazole 10 mg tab	1	
methimazole 5 mg tab	1	
propylthiouracil 50 mg tab	1	
THYROID HORMONES		
ARMOUR THYROID 120 MG TAB *thyroid*	3	
ARMOUR THYROID 15 MG TAB *thyroid*	3	
ARMOUR THYROID 180 MG TAB *thyroid*	3	
ARMOUR THYROID 240 MG TAB *thyroid*	3	
ARMOUR THYROID 30 MG TAB *thyroid*	3	
ARMOUR THYROID 300 MG TAB *thyroid*	3	
ARMOUR THYROID 60 MG TAB *thyroid*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARMOUR THYROID 90 MG TAB *thyroid*	3	
euthyrox 100 mcg tab	1	
euthyrox 112 mcg tab	1	
euthyrox 125 mcg tab	1	
euthyrox 137 mcg tab	1	
euthyrox 150 mcg tab	1	
euthyrox 175 mcg tab	1	
euthyrox 200 mcg tab	1	
euthyrox 25 mcg tab	1	
euthyrox 50 mcg tab	1	
euthyrox 75 mcg tab	1	
euthyrox 88 mcg tab	1	
levo-t 100 mcg tab	1	
levo-t 112 mcg tab	1	
levo-t 125 mcg tab	1	
levo-t 137 mcg tab	1	
levo-t 150 mcg tab	1	
levo-t 175 mcg tab	1	
levo-t 200 mcg tab	1	
levo-t 25 mcg tab	1	
levo-t 300 mcg tab	1	
levo-t 50 mcg tab	1	
levo-t 75 mcg tab	1	
levo-t 88 mcg tab	1	
LEVOTHYROXINE SODIUM 100 MCG RECON SOLN *levothyroxine sodium*	1	
levothyroxine sodium 100 mcg recon soln	1	
levothyroxine sodium 100 mcg tab	1	
LEVOTHYROXINE SODIUM 100 MCG/5ML SOLUTION *levothyroxine sodium*	1	
levothyroxine sodium 112 mcg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium 125 mcg tab	1	
levothyroxine sodium 137 mcg tab	1	
levothyroxine sodium 150 mcg tab	1	
levothyroxine sodium 175 mcg tab	1	
LEVOTHYROXINE SODIUM 200 MCG RECON SOLN *levothyroxine sodium*	1	
levothyroxine sodium 200 mcg recon soln	1	
levothyroxine sodium 200 mcg tab	1	
LEVOTHYROXINE SODIUM 200 MCG/5ML SOLUTION *levothyroxine sodium*	1	
levothyroxine sodium 25 mcg tab	1	
levothyroxine sodium 300 mcg tab	1	
levothyroxine sodium 50 mcg tab	1	
LEVOTHYROXINE SODIUM 500 MCG RECON SOLN *levothyroxine sodium*	1	
levothyroxine sodium 500 mcg recon soln	1	
LEVOTHYROXINE SODIUM 500 MCG/5ML SOLUTION *levothyroxine sodium*	1	
levothyroxine sodium 75 mcg tab	1	
levothyroxine sodium 88 mcg tab	1	
levoxyl 100 mcg tab	1	
levoxyl 112 mcg tab	1	
levoxyl 125 mcg tab	1	
levoxyl 137 mcg tab	1	
levoxyl 150 mcg tab	1	
levoxyl 175 mcg tab	1	
levoxyl 200 mcg tab	1	
levoxyl 25 mcg tab	1	
levoxyl 50 mcg tab	1	
levoxyl 75 mcg tab	1	
levoxyl 88 mcg tab	1	
liothyronine sodium 10 mcg/ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
liothyronine sodium 25 mcg tab	1	
liothyronine sodium 5 mcg tab	1	
liothyronine sodium 50 mcg tab	1	
NATURE-THROID 113.75 MG TAB *thyroid*	3	
NATURE-THROID 130 MG TAB *thyroid*	3	
NATURE-THROID 146.25 MG TAB *thyroid*	3	
NATURE-THROID 16.25 MG TAB *thyroid*	3	
NATURE-THROID 162.5 MG TAB *thyroid*	3	
NATURE-THROID 195 MG TAB *thyroid*	3	
NATURE-THROID 260 MG TAB *thyroid*	3	
NATURE-THROID 32.5 MG TAB *thyroid*	3	
NATURE-THROID 325 MG TAB *thyroid*	3	
NATURE-THROID 48.75 MG TAB *thyroid*	3	
NATURE-THROID 65 MG TAB *thyroid*	3	
NATURE-THROID 81.25 MG TAB *thyroid*	3	
NATURE-THROID 97.5 MG TAB *thyroid*	3	
np thyroid 120 mg tab	1	
np thyroid 15 mg tab	1	
np thyroid 30 mg tab	1	
np thyroid 60 mg tab	1	
np thyroid 90 mg tab	1	
SYNTHROID 100 MCG TAB *levothyroxine sodium*	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNTHROID 112 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 125 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 137 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 150 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 175 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 200 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 25 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 300 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 50 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 75 MCG TAB *levothyroxine sodium*	2	
SYNTHROID 88 MCG TAB *levothyroxine sodium*	2	
thyroid 120 mg tab	1	
thyroid 15 mg tab	1	
thyroid 30 mg tab	1	
thyroid 60 mg tab	1	
thyroid 90 mg tab	1	
THYROLAR-1 60 (12.5-50) MG (MCG) TAB *liotrix (t3-t4)*	3	
THYROLAR-1/2 30 (6.25-25) MG (MCG) TAB *liotrix (t3-t4)*	3	
THYROLAR-1/4 15 (3.1-12.5) MG (MCG) TAB *liotrix (t3-t4)*	3	
THYROLAR-2 120 (25-100) MG (MCG) TAB *liotrix (t3-t4)*	3	
THYROLAR-3 180 (37.5-150) MG (MCG) TAB *liotrix (t3-t4)*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIROSINT 100 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 112 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 125 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 13 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 137 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 150 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 175 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 200 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 25 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 50 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 75 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT 88 MCG CAP *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 100 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 112 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 125 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 13 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 137 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 150 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 175 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIROSINT-SOL 200 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 25 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 50 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 75 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TIROSINT-SOL 88 MCG/ML SOLUTION *levothyroxine sodium*	3	QL 30 / 30 DAYS
TRIOSTAT 10 MCG/ML SOLUTION *liothyronine sodium*	3	
unithroid 100 mcg tab	1	
unithroid 112 mcg tab	1	
unithroid 125 mcg tab	1	
unithroid 137 mcg tab	1	
unithroid 150 mcg tab	1	
unithroid 175 mcg tab	1	
unithroid 200 mcg tab	1	
unithroid 25 mcg tab	1	
unithroid 300 mcg tab	1	
unithroid 50 mcg tab	1	
unithroid 75 mcg tab	1	
unithroid 88 mcg tab	1	
WESTHROID 130 MG TAB *thyroid*	3	
WESTHROID 195 MG TAB *thyroid*	3	
WESTHROID 32.5 MG TAB *thyroid*	3	
WESTHROID 65 MG TAB *thyroid*	3	
WESTHROID 97.5 MG TAB *thyroid*	3	
WP THYROID 113.75 MG TAB *thyroid*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WP THYROID 130 MG TAB *thyroid*	3	
WP THYROID 16.25 MG TAB *thyroid*	3	
WP THYROID 32.5 MG TAB *thyroid*	3	
WP THYROID 48.75 MG TAB *thyroid*	3	
WP THYROID 65 MG TAB *thyroid*	3	
WP THYROID 81.25 MG TAB *thyroid*	3	
WP THYROID 97.5 MG TAB *thyroid*	3	
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION *tetanus toxoid-diphtheria-acellular pertussis adsorb (tdap)*	2	ACA Affordable Care Act
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION *tetanus toxoid-diphtheria-acellular pertussis adsorb (tdap)*	2	ACA Affordable Care Act
DAPTACEL 23-15-5 SUSPENSION *diphtheria, acellular pertussis & tetanus toxoids*	2	ACA Affordable Care Act
DIPHTHERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION *diphtheria-tetanus toxoids (dt)*	2	ACA Affordable Care Act
INFANRIX 25-58-10 SUSPENSION *diphtheria, acellular pertussis & tetanus toxoids*	2	ACA Affordable Care Act
KINRIX SUSPENSION *diph-tetanus tox ad-acell pertussis & polio virus, ipv vac*	2	ACA Affordable Care Act
PEDIARIX SUSPENSION *diph-tetanus tox-acell pert-hepatitis b recomb-polio ipv vac*	2	ACA Affordable Care Act
PENTACEL RECON SUSP *diph-ac pert-tet tox ad-polio ipv-haemophil b poly vac*	2	ACA Affordable Care Act
QUADRACEL SUSPENSION *diph-tetanus tox ad-acell pertussis & polio virus, ipv vac*	2	ACA Affordable Care Act
TDVAX 2-2 LF/0.5ML SUSPENSION *tetanus-diphtheria toxoids (td)*	2	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TENIVAC 5-2 LFU INJECTABLE *tetanus-diphtheria toxoids (td)*	2	ACA Affordable Care Act
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
BENTYL 10 MG/ML SOLUTION *dicyclomine hcl*	3	
dicyclomine hcl 10 mg cap	1	
dicyclomine hcl 10 mg/5ml solution	1	
dicyclomine hcl 10 mg/ml solution	1	
dicyclomine hcl 20 mg tab	1	
BELLADONNA ALKALOIDS		
ATROPEN 0.25 MG/0.3ML SOLN A-INJ *atropine sulfate*	3	
ATROPEN 0.5 MG/0.7ML SOLN A-INJ *atropine sulfate*	3	
ATROPEN 1 MG/0.7ML SOLN A-INJ *atropine sulfate*	3	
ATROPEN 2 MG/0.7ML SOLN A-INJ *atropine sulfate*	3	
ATROPINE SULFATE 0.25 MG/5ML SOLN PRSYR *atropine sulfate*	1	
ATROPINE SULFATE 0.5 MG/5ML SOLN PRSYR *atropine sulfate*	1	
atropine sulfate 1 mg/10ml soln prsyr	1	
ATROPINE SULFATE 8 MG/20ML SOLUTION *atropine sulfate*	1	
H-2 ANTAGONISTS		
cimetidine 200 mg tab	1	
cimetidine 300 mg tab	1	
cimetidine 400 mg tab	1	
cimetidine 800 mg tab	1	
CIMETIDINE HCL 300 MG/5ML SOLUTION *cimetidine hcl*	3	
famotidine 20 mg tab	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
famotidine 20 mg/2ml solution	1	
famotidine 200 mg/20ml solution	1	
famotidine 40 mg tab	1	
famotidine 40 mg/4ml solution	1	
famotidine 40 mg/5ml recon susp	1	
FAMOTIDINE PREMIXED 20-0.9 MG/50ML-% SOLUTION *famotidine in nacl*	1	
NIZATIDINE 15 MG/ML SOLUTION *nizatidine*	3	
NIZATIDINE 150 MG CAP *nizatidine*	3	
nizatidine 150 mg cap	1	
NIZATIDINE 300 MG CAP *nizatidine*	1	
nizatidine 300 mg cap	1	
RANITIDINE HCL 1000 MG/40ML SOLUTION *ranitidine hcl*	1	
ranitidine hcl 15 mg/ml syrup	1	
ranitidine hcl 150 mg cap	1	
ranitidine hcl 150 mg tab	1	
ranitidine hcl 150 mg/10ml syrup	1	
ranitidine hcl 150 mg/6ml solution	1	
ranitidine hcl 300 mg cap	1	
ranitidine hcl 300 mg tab	1	
ranitidine hcl 50 mg/2ml solution	1	
ranitidine hcl 75 mg/5ml syrup	1	
ZANTAC 1000 MG/40ML SOLUTION *ranitidine hcl*	3	
ZANTAC 150 MG/6ML SOLUTION *ranitidine hcl*	3	
ZANTAC 50 MG/2ML SOLUTION *ranitidine hcl*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MISC. ANTI-ULCER		
sucralfate 1 gm tab	1	
sucralfate 1 gm/10ml suspension	1	
PROTON PUMP INHIBITOR-ANTACID COMBINATIONS		
omeppi 20-1100 mg cap	1	QL 30 / 30 DAYS
omeppi 40-1100 mg cap	1	QL 30 / 30 DAYS
omeprazole-sodium bicarbonate 20-1100 mg cap	1	QL 30 / 30 DAYS
omeprazole-sodium bicarbonate 20-1680 mg packet	1	QL 30 / 30 DAYS
omeprazole-sodium bicarbonate 40-1100 mg cap	1	QL 30 / 30 DAYS
omeprazole-sodium bicarbonate 40-1680 mg packet	1	QL 30 / 30 DAYS
PROTON PUMP INHIBITORS		
ACIPHEX SPRINKLE 10 MG CAP SPRINK *rabeprazole sodium*	3	QL 30 / 30 DAYS
ACIPHEX SPRINKLE 5 MG CAP SPRINK *rabeprazole sodium*	3	QL 30 / 30 DAYS
esomeprazole magnesium 10 mg packet	1	QL 30 / 30 DAYS
esomeprazole magnesium 20 mg cap dr	1	QL 30 / 30 DAYS
esomeprazole magnesium 20 mg packet	1	QL 30 / 30 DAYS
esomeprazole magnesium 40 mg cap dr	1	QL 30 / 30 DAYS
esomeprazole magnesium 40 mg packet	1	QL 30 / 30 DAYS
ESOMEPRAZOLE SODIUM 20 MG RECON SOLN *esomeprazole sodium*	1	
esomeprazole sodium 40 mg recon soln	1	
ESOMEPRAZOLE STRONTIUM 49.3 MG CAP DR *esomeprazole strontium*	3	QL 30 / 30 DAYS
lansoprazole 15 mg cap dr	1	QL 30 / 30 DAYS
lansoprazole 15 mg tab dr disp	1	QL 30 / 30 DAYS
lansoprazole 30 mg cap dr	1	QL 30 / 30 DAYS
lansoprazole 30 mg tab dr disp	1	QL 30 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEXIUM 2.5 MG PACKET *esomeprazole magnesium*	2	QL 30 / 30 DAYS
NEXIUM 5 MG PACKET *esomeprazole magnesium*	2	QL 30 / 30 DAYS
NEXIUM I.V. 40 MG RECON SOLN *esomeprazole sodium*	3	
omeprazole 10 mg cap dr	1	QL 30 / 30 DAYS
omeprazole 20 mg cap dr	1	QL 30 / 30 DAYS
omeprazole 40 mg cap dr	1	QL 30 / 30 DAYS
pantoprazole sodium 20 mg tab dr	1	QL 30 / 30 DAYS
pantoprazole sodium 40 mg packet	1	
pantoprazole sodium 40 mg recon soln	1	
pantoprazole sodium 40 mg tab dr	1	QL 30 / 30 DAYS
PRILOSEC 10 MG PACKET *omeprazole magnesium*	3	QL 30 / 30 DAYS
PRILOSEC 2.5 MG PACKET *omeprazole magnesium*	3	QL 60 / 30 DAYS
PROTONIX 40 MG PACKET *pantoprazole sodium*	3	QL 30 / 30 DAYS
PROTONIX 40 MG RECON SOLN *pantoprazole sodium*	3	
RABEPRAZOLE SODIUM 10 MG CAP SPRINK *rabeprazole sodium*	3	QL 30 / 30 DAYS
rabeprazole sodium 20 mg tab dr	1	QL 30 / 30 DAYS
QUATERNARY ANTICHOLINERGICS		
CUVPOSA 1 MG/5ML SOLUTION *glycopyrrolate*	3	
GLYCATE 1.5 MG TAB *glycopyrrolate*	3	
glycopyrrolate 0.2 mg/ml solution	1	
glycopyrrolate 0.4 mg/2ml solution	1	
glycopyrrolate 1 mg tab	1	
glycopyrrolate 1 mg/5ml solution	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLYCOPYRROLATE 1.5 MG TAB *glycopyrrolate*	3	
glycopyrrolate 2 mg tab	1	
glycopyrrolate 4 mg/20ml solution	1	
GLYCOPYRROLATE PF 0.2 MG/ML SOLN PRSYR *glycopyrrolate*	1	
GLYCOPYRROLATE PF 0.4 MG/2ML SOLN PRSYR *glycopyrrolate*	1	
GLYRX-PF 0.2 MG/ML SOLUTION *glycopyrrolate*	3	
GLYRX-PF 0.4 MG/2ML SOLUTION *glycopyrrolate*	3	
methscopolamine bromide 2.5 mg tab	1	
methscopolamine bromide 5 mg tab	1	
PROPANTHELINE BROMIDE 15 MG TAB *propantheline bromide*	3	
ULCER ANTI-INFECTIVE W/ BISMUTH COMBINATIONS		
HELIDAC THERAPY MISC *metronidazole-tetracycline w/ bismuth subsalicylate*	3	
PYLERA 140-125-125 MG CAP *bismuth subcitrate potassium-metronidazole-tetracycline*	3	
ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS		
amoxicill-clarithro-lansopraz misc	1	
OMECLAMOX-PAK 500-500-20 MG MISC *amoxicillin-clarithromycin w/ omeprazole*	3	
TALICIA 250-12.5-10 MG CAP DR *amoxicillin-rifabutin-omeprazole*	2	
ULCER DRUGS - PROSTAGLANDINS		
misoprostol 100 mcg tab	1	
misoprostol 200 mcg tab	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)		
oxybutynin chloride 5 mg tab	1	QL 120 / 30 DAYS
oxybutynin chloride 5 mg/5ml syrup	1	QL 600 / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxybutynin chloride er 10 mg tab er 24h	1	QL 60 / 30 DAYS
oxybutynin chloride er 15 mg tab er 24h	1	QL 60 / 30 DAYS
oxybutynin chloride er 5 mg tab er 24h	1	QL 30 / 30 DAYS
OXYTROL 3.9 MG/24HR PATCH TW *oxybutynin*	3	QL 8 / 28 DAYS
solifenacin succinate 10 mg tab	1	QL 30 / 30 DAYS
solifenacin succinate 5 mg tab	1	QL 30 / 30 DAYS
tolterodine tartrate 1 mg tab	1	QL 60 / 30 DAYS
tolterodine tartrate 2 mg tab	1	QL 60 / 30 DAYS
tolterodine tartrate er 2 mg cap er 24h	1	QL 30 / 30 DAYS
tolterodine tartrate er 4 mg cap er 24h	1	QL 30 / 30 DAYS
trospium chloride 20 mg tab	1	QL 60 / 30 DAYS
trospium chloride er 60 mg cap er 24h	1	QL 30 / 30 DAYS
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ 25 MG TAB ER 24H *mirabegron*	2	QL 30 / 30 DAYS
MYRBETRIQ 50 MG TAB ER 24H *mirabegron*	2	QL 30 / 30 DAYS
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
bethanechol chloride 10 mg tab	1	
bethanechol chloride 25 mg tab	1	
bethanechol chloride 5 mg tab	1	
bethanechol chloride 50 mg tab	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB RECON SOLN *haemophilus b polysac conj vac*	2	ACA Affordable Care Act
BCG VACCINE INJECTABLE *bcg vaccine*	1	
BEXSERO SUSP PRSYR *meningococcal vac group b (recombant omv adjuvanted)*	2	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BIOTHRAX SUSPENSION *anthrax vaccine adsorbed*	3	
HIBERIX 10 MCG RECON SOLN *haemophilus b polysac conj vac*	2	ACA Affordable Care Act
MENACTRA INJECTABLE *meningococcal (a,c,y&w-135) polysaccharide conjugate vaccine*	2	ACA Affordable Care Act
MENVEO RECON SOLN *meningococcal (a,c,y&w-135) oligosaccharide conjugate vac*	2	ACA Affordable Care Act
PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION *haemophilus b polysac conj vac*	2	ACA Affordable Care Act
PNEUMOVAX 23 25 MCG/0.5ML INJECTABLE *pneumococcal vac polyvalent*	2	ACA Affordable Care Act
PREVNAR 13 SUSPENSION *pneumococcal 13-valent conjugate vaccine*	2	ACA Affordable Care Act
TRUMENBA SUSP PRSYR *meningococcal group b vaccine (recombinant)*	2	ACA Affordable Care Act
TYPHIM VI 25 MCG/0.5ML SOLUTION *typhoid vi polysaccharide vaccine*	3	
VAXCHORA RECON SUSP *cholera vaccine live attenuated*	3	
VIVOTIF CAP DR *typhoid vaccine*	3	
VIRAL VACCINE COMBINATIONS		
M-M-R II RECON SOLN *measles, mumps & rubella virus vaccines*	2	ACA Affordable Care Act
PROQUAD RECON SUSP *measles-mumps-rubella-varicella virus vaccines*	2	ACA Affordable Care Act
TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR *hepatitis a (inactivated)-hepatitis b (recombinant) vaccines*	2	ACA Affordable Care Act
VIRAL VACCINES		
AFLURIA SUSPENSION *influenza virus vaccine split*	2	AL1 At least 5 yrs old ACA Affordable Care Act
AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR *influenza virus vaccine split preservative free*	2	AL1 At least 5 yrs old ACA Affordable Care Act
AFLURIA QUADRIVALENT SUSPENSION *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFLURIA QUADRIVALENT 0.25 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 Up to 3 yrs old ACA Affordable Care Act
AFLURIA QUADRIVALENT 0.5 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
ENGERIX-B 10 MCG/0.5ML INJECTABLE *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
ENGERIX-B 10 MCG/0.5ML SUSPENSION *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
ENGERIX-B 20 MCG/ML INJECTABLE *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
ENGERIX-B 20 MCG/ML SUSPENSION *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
EZ FLU SHOT-FLUCELVAX QUAD 0.5 ML PREF SY KT *influenza virus vaccine tissue-cultured subunit quadrivalent*	3	
FLUAD 0.5 ML SUSP PRSYR *influenza virus vaccine types a & b surface antigen adjuvant*	2	AL1 At least 65 yrs old ACA Affordable Care Act
FLUAD QUADRIVALENT 0.5 ML PRSYR *influenza virus vacc types a & b surf antigen adjuvant quad*	2	AL1 At least 65 yrs old ACA Affordable Care Act
FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR *influenza virus vac recomb hemagglutinin (ha) quadrivalent*	2	AL1 At least 18 yrs old ACA Affordable Care Act
FLUCELVAX QUADRIVALENT SUSPENSION *influenza virus vaccine tissue-cultured subunit quadrivalent*	2	AL1 At least 4 yrs old ACA Affordable Care Act
FLUCELVAX QUADRIVALENT 0.5 ML SUSP PRSYR *influenza virus vaccine tissue-cultured subunit quadrivalent*	2	AL1 At least 4 yrs old ACA Affordable Care Act
FLULAVAL QUADRIVALENT SUSPENSION *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
FLUMIST QUADRIVALENT SUSPENSION *influenza virus vaccine live quadrivalent*	2	AL1 2 to 49 yrs old ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR *influenza virus vaccine split high-dose preservative free*	2	AL1 At least 65 yrs old ACA Affordable Care Act
FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR *influenza virus vac split high-dose quad preservative free*	2	AL1 At least 65 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT SUSPENSION *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT 0.25 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 Up to 3 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT 0.5 ML SUSP PRSYR *influenza virus vaccine split quadrivalent*	2	AL1 At least 5 yrs old ACA Affordable Care Act
FLUZONE QUADRIVALENT 0.5 ML SUSPENSION *influenza virus vaccine split quadrivalent*	2	ACA Affordable Care Act
GARDASIL 9 SUSP PRSYR *human papillomavirus (hpv) 9-valent recombinant vaccine*	2	ACA Affordable Care Act
GARDASIL 9 SUSPENSION *human papillomavirus (hpv) 9-valent recombinant vaccine*	2	ACA Affordable Care Act
HAVRIX 1440 EL U/ML SUSPENSION *hepatitis a vaccine*	2	ACA Affordable Care Act
HAVRIX 720 EL U/0.5ML SUSPENSION *hepatitis a vaccine*	2	ACA Affordable Care Act
HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR *hepatitis b vaccine recombinant adjuvanted*	2	ACA Affordable Care Act
HEPLISAV-B 20 MCG/0.5ML SOLUTION *hepatitis b vaccine recombinant adjuvanted*	2	ACA Affordable Care Act
IMOVAX RABIES 2.5 UNIT/ML INJECTABLE *rabies virus vaccine, hdc*	2	
IPOL INJECTABLE *poliovirus vaccine, ipv*	2	ACA Affordable Care Act
IXIARO SUSPENSION *japanese encephalitis vaccine inactivated adsorbed*	3	
RABAVERT RECON SUSP *rabies vaccine, pcec*	2	
RECOMBIVAX HB 10 MCG/ML SUSPENSION *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
RECOMBIVAX HB 40 MCG/ML SUSPENSION *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION *hepatitis b vaccine (recomb)*	2	ACA Affordable Care Act
ROTARIX RECON SUSP *rotavirus vaccine, live oral*	2	ACA Affordable Care Act
ROTATEQ SOLUTION *rotavirus vaccine, live oral pentavalent*	2	ACA Affordable Care Act
SHINGRIX 50 MCG/0.5ML RECON SUSP *zoster vaccine recombinant adjuvanted*	2	AL1 At least 50 yrs old ACA Affordable Care Act
STAMARIL RECON SUSP *yellow fever vaccine*	3	
VAQTA 25 UNIT/0.5ML SUSPENSION *hepatitis a vaccine*	2	ACA Affordable Care Act
VAQTA 50 UNIT/ML SUSPENSION *hepatitis a vaccine*	2	ACA Affordable Care Act
VARIVAX 1350 PFU/0.5ML INJECTABLE *varicella virus vaccine live*	2	ACA Affordable Care Act
YF-VAX INJECTABLE *yellow fever vaccine*	3	
ZOSTAVAX 19400 UNT/0.65ML RECON SUSP *zoster vaccine live*	2	ACA Affordable Care Act
VAGINAL AND RELATED PRODUCTS		
IMIDAZOLE-RELATED ANTIFUNGALS		
GYNAZOLE-1 2 % CREAM *butoconazole nitrate (one dose)*	3	
MICONAZOLE 3 200 MG SUPPOS *miconazole nitrate vaginal*	3	GL Female
terconazole 0.4 % cream	1	QL 45 / 30 DAYS GL Female
TERCONAZOLE 0.8 % CREAM *terconazole vaginal*	3	QL 45 / 30 DAYS GL Female
terconazole 80 mg suppos	1	QL 45 / 30 DAYS GL Female
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA 6.5 MG INSERT *prasterone vaginal*	3	QL 30 / 30 DAYS AL1 At least 18 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPERMICIDES		
ENCARE 100 MG SUPPOS *nonoxynol-9*	2	ACA Affordable Care Act
OPTIONS GYNOL II CONTRACEPTIVE 3 % GEL *nonoxynol-9*	2	ACA Affordable Care Act
SHUR-SEAL CONTRACEPTIVE 2 % GEL *nonoxynol-9*	2	ACA Affordable Care Act
TODAY SPONGE 1000 MG MISC *nonoxynol-9*	2	GL Female ACA Affordable Care Act
VCF VAGINAL CONTRACEPTIVE 12.5 % FOAM *nonoxynol-9*	2	ACA Affordable Care Act
VCF VAGINAL CONTRACEPTIVE 28 % FILM *nonoxynol-9*	2	GL Female ACA Affordable Care Act
vcf vaginal contraceptive 4 % gel	1	ACA Affordable Care Act
VAGINAL ANTI-INFECTIVES		
AVC VAGINAL 15 % CREAM *sulfanilamide vaginal*	3	
clindamycin phosphate 2 % cream	1	
CLINDESSE 2 % CREAM *clindamycin phosphate (one dose)*	3	
metronidazole 0.75 % gel	1	
NUVESSA 1.3 % GEL *metronidazole vaginal*	3	
vandazole 0.75 % gel	1	
VAGINAL ESTROGENS		
estradiol 0.1 mg/gm cream	1	QL 120 / 30 DAYS GL Female
ESTRING 2 MG RING *estradiol vaginal*	3	QL 1 / 90 DAYS GL Female
FEMRING 0.05 MG/24HR RING *estradiol acetate vaginal*	3	QL 1 / 90 DAYS GL Female
FEMRING 0.1 MG/24HR RING *estradiol acetate vaginal*	3	QL 1 / 90 DAYS GL Female

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREMARIN 0.625 MG/GM CREAM *estrogens, conjugated vaginal*	2	QL 60 / 30 DAYS GL Female
VAGIFEM 10 MCG TAB *estradiol vaginal*	1	QL 30 / 30 DAYS GL Female
VAGINAL PROGESTINS		
ENDOMETRIN 100 MG INSERT *progesterone (vaginal)*	2	QL 84 / 28 DAYS GL Female
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
ADRENALIN 1 MG/ML SOLUTION *epinephrine (anaphylaxis)*	3	
ADRENALIN 30 MG/30ML SOLUTION *epinephrine (anaphylaxis)*	3	
epinephrine 0.15 mg/0.3ml soln a-inj	1	QL 4 / Rx
epinephrine 0.3 mg/0.3ml soln a-inj	1	QL 4 / Rx
epinephrine 30 mg/30ml solution	1	
EPINEPHRINE PROFESSIONAL 1 MG/ML KIT *epinephrine (anaphylaxis)*	3	
EPINEPHRINESNAP-EMS 1 MG/ML KIT *epinephrine (anaphylaxis)*	3	QL 2 / Rx
EPINEPHRINESNAP-V 1 MG/ML KIT *epinephrine (anaphylaxis)*	3	QL 2 / Rx
SYMJEPI 0.15 MG/0.3ML SOLN PRSYR *epinephrine (anaphylaxis)*	2	QL 2 / Rx
SYMJEPI 0.3 MG/0.3ML SOLN PRSYR *epinephrine (anaphylaxis)*	2	QL 2 / Rx
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
NORTHERA 100 MG CAP *droxidopa*	3	QL 450 / 30 DAYS PA S Specialty Drug
NORTHERA 200 MG CAP *droxidopa*	3	QL 180 / 30 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORTHERA 300 MG CAP *droxidopa*	3	QL 180 / 30 DAYS PA S Specialty Drug
AKOVAZ 50 MG/ML SOLUTION *ephedrine sulfate (pressors)*	3	
BIORPHEN 0.5 MG/5ML SOLUTION *phenylephrine hcl (pressors)*	3	
DOBUTAMINE HCL 250 MG/20ML SOLUTION *dobutamine hcl*	1	
dobutamine hcl 250 mg/20ml solution	1	
dobutamine in d5w 1-5 mg/ml-% solution	1	
dobutamine in d5w 2 mg/ml solution	1	
dobutamine in d5w 4-5 mg/ml-% solution	1	
DOPAMINE HCL 160 MG/ML SOLUTION *dopamine hcl*	1	
dopamine hcl 40 mg/ml solution	1	
DOPAMINE HCL 80 MG/ML SOLUTION *dopamine hcl*	1	
dopamine in d5w 0.8-5 mg/ml-% solution	1	
dopamine in d5w 1.6-5 mg/ml-% solution	1	
dopamine in d5w 3.2-5 mg/ml-% solution	1	
EMERPHED 5 MG/ML SOLUTION *ephedrine sulfate (pressors)*	3	
EPHEDRINE SULFATE 50 MG/ML SOLUTION *ephedrine sulfate (pressors)*	1	
ephedrine sulfate 50 mg/ml solution	1	
epinephrine 1 mg/10ml soln prsyr	1	
epinephrine pf 1 mg/ml solution	1	
EPINEPHRINE PF 1 MG/ML SOLUTION *epinephrine*	1	
GIAPREZA 2.5 MG/ML SOLUTION *angiotensin ii acetate*	3	
LEVOPHED 1 MG/ML SOLUTION *norepinephrine bitartrate*	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
midodrine hcl 10 mg tab	1	
midodrine hcl 2.5 mg tab	1	
midodrine hcl 5 mg tab	1	
norepinephrine bitartrate 1 mg/ml solution	1	
PHENYLEPHRINE HCL 10 MG/ML SOLUTION *phenylephrine hcl (pressors)*	1	
phenylephrine hcl 10 mg/ml solution	1	
VAZCULEP 10 MG/ML SOLUTION *phenylephrine hcl (pressors)*	3	
VITAMINS		
VITAMIN A		
AQUASOL A 15 MG/ML SOLUTION *vitamin a*	3	
VITAMIN B-1		
thiamine hcl 100 mg/ml solution	1	
VITAMIN B-6		
PYRIDOXINE HCL 100 MG/ML SOLUTION *pyridoxine hcl*	1	
VITAMIN C		
ASCOR 25000 MG/50ML SOLUTION *ascorbic acid*	3	
VITAMIN D		
ergocalciferol 1.25 mg (50000 ut) cap	1	
vitamin d (ergocalciferol) 1.25 mg (50000 ut) cap	1	
VITAMIN K		
phytonadione 1 mg/0.5ml solution	1	
phytonadione 10 mg/ml solution	1	
phytonadione 5 mg tab	1	
vitamin k1 1 mg/0.5ml solution	1	
vitamin k1 10 mg/ml solution	1	

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