2026 Prescription Drug List

TRADITIONAL 5-TIER FOR QUALIFIED HEALTH PLANS

St Luke's™ Health Plan

Last updated September 1, 2025

Welcome!

St. Luke's Health Plan Inc. Pharmacy Benefit Manager (St. Luke's PBM) administers pharmacy benefits for the St. Luke's Health Plan (the Plan) to ensure you have access to safe, effective and affordable medications.

Prescription Drug List (PDL)

This document is often referred to as a Prescription Drug List (PDL) or medication formulary and contains a list of the most commonly prescribed outpatient medications covered by your plan. The PDL is typically updated on a quarterly basis. The date of the most recent update can be found in the lower right-hand corner of the document cover page. We do not routinely notify members or providers when the PDL is updated. There will not be any changes that negatively impact members during the calendar year. Please use the PDL on the website for the most up-to-date version.

This formulary includes both brand name and generic medications approved by the Food and Drug Administration (FDA). Brand name medications are capitalized and generic medications are in lowercase. Not all medications approved by the FDA are covered under your plan.

The inclusion of a medication on this list does not imply coverage under all plans. Coverage of listed products will be subject to limitations of the prescription medication benefit plan design. Members should consult their prescription medication benefit plan or contact a customer service representative to determine specific coverage at 833-975-1281. Where a difference exists between this document and the benefit plan documents, the benefit plan documents rule.

How to Use the PDL

Members are encouraged to review the PDL to see if currently prescribed medications are covered. Providers and pharmacists are encouraged to review the PDL and utilize it when prescribing for our members. Products on the PDL may not include all strengths or dosage forms associated with the brand name product.

This document is searchable. On your keyboard, press Ctrl+F (Command+F for Mac), type in the medication you are looking for into the search box, and the search function will locate the medication in the document.

Reading the PDL

Within this document, you will find a list of FDA-approved medications covered by the Plan, which tier the medication belongs to, and any specific requirements as required by the Plan. Please see the medication tier explanations in the table below; medications with a lower tier will represent the lowest out-of-pocket costs* for the member.

Tier	Description
ACA	Affordable Care Act Medications may be offered at no cost if the member meets preventive care requirements
1	Preferred Generic Medications
2	Non-preferred Generic Medications
3	Preferred Brand Name Medications
4	Non-preferred Brand Name Medications
5	Specialty Medications which are limited to a 30-day supply per fill; most specialty medications are required to be filled through St. Luke's Specialty Pharmacy
*Please refer to the plan documents for copay and coinsurance information	

ACA Preventive Medications

The Patient Protection and Affordable Care Act of 2010 (ACA) designates certain categories of medications as “preventive” and requires these categories contain options that are covered at no cost to you. The categories include specific preventive medications for children, women, and adults that you will not have to pay a copay or coinsurance for, even if you have not met your deductible. Please reach out to the PBM help desk for additional information on requirements. Preventive categories are listed below and are designated as ACA on the PDL.

- Bowel prep agents for people aged 45-75 years (max of 2 per year)
- Folic acid for women of childbearing age
- Iron supplements for children between 6-12 months
- Contraceptives
- Oral fluoride supplements for children up to age 5
- Preventive breast cancer medications for women aged 35 years or older with prior breast cancer diagnosis
- Tobacco cessation products (max of 182 days per year)
- Certain vaccines (flu, shingles)
- Statins for people aged 40-75 years
- Select antiretrovirals for preventive use

High Deductible Health Plan Preventive Medications

Recognizing that preventive services can lead to improved health by identifying and treating illnesses early, the Plan does not require High Deductible Health Plan (HDHP) participants meet their deductible prior to covering generic medications in some medication categories. If you are enrolled in a HDHP you will not have to meet your deductible before the Plan contributes to the cost of your generic prescription for medications. HDHP preventive categories are listed below and are designated as “PV” on the PDL.

- Anticonvulsants
- Asthma and COPD
- Brand contraceptives
- Cardiovascular (including cholesterol, blood pressure and blood thinners)
- Diabetes (Insulin, Non-Insulin, and Test Strips)
- Mental health (antipsychotics and antidepressants)
- Osteoporosis

How are Medications Assessed for Plan Coverage

The PDL reflects the current judgement of the Pharmacy and Therapeutics (P&T) Committee, which consists of physicians, pharmacists and medical experts. The Committee reviews medications in each therapeutic class for safety, effectiveness and cost of treatment. Then, agents are selected in each category for inclusion/exclusion on the formulary. The maintenance of the formulary is a dynamic process where new medications and information concerning existing medications are continually reviewed by the P&T Committee.

Generic Medications

The St. Luke's PBM prioritizes the use of generic medications whenever possible. The term generic is usually used to describe a less-expensive product that is a safe and effective alternative to a brand-name product. A generic medication is identical, or bioequivalent, to a brand name medication. Although generic medications are chemically identical to their branded counterparts, they are typically sold at substantial discounts. The Food and Drug Administration (FDA) works with pharmaceutical companies to ensure medications (both brand name and generic) meet specific requirements for quality, strength, purity and potency.

Generic Medication Substitution Requirement

If you purchase a brand name medication when a generic substitution is required, you must pay the difference between the Allowed Amount for the Generic medication and the Allowed Amount for the Brand Name medication, plus your Copay/ Coinsurance or Deductible. Some prescription medications are excluded from this requirement.

Coverage Requests

If you would like to request a prior authorization, a higher quantity limit, bypassing step therapy or formulary exception, please have your provider call the St. Luke's PBM at **833-975-1281** to obtain the appropriate form. For formulary exceptions due to medical necessity, the request should include medical records that describe the condition being treated, other treatments previously tried and reason for not using formulary alternatives.

Pharmacy Network

Our pharmacy network is broad, and you can find a pharmacy near you with the lookup tool on your pharmacy member portal.

The Plan offers a maintenance pharmacy benefit, allowing you to obtain up to a 100-day supply of certain medications through St. Luke's Outpatient Pharmacies or St. Luke's Mail Order Pharmacy. Some exceptions may apply.

Specialty medications are high-cost medications used to treat rare or complicated conditions. Specialty medications are listed as tier 5. Most specialty medications are required to be filled through St. Luke's Specialty Pharmacy which offers best in class care and support. To learn more, call **208-205-7779**.

Plan ID Card

Your Plan ID card works for both your doctor's visits and filling medications at the pharmacy. To get the most from your benefits, provide your pharmacy ID card to the pharmacy when dropping off or calling in your prescription.

Term and Acronym Dictionary

ACA- Affordable Care Act:

This medication is covered for some people at no cost based on the Affordable Care Act.

AL1- Age Limit:

This prescription medication may only be covered if you meet the minimum or maximum age limit.

PA – Prior Authorization:

Selected high-risk or high-cost medications may require prior authorization to be eligible for coverage under the member's prescription medication benefit.

PV- High Deductible Health Plan Preventive Medication:

This medication is covered prior to the deductible for high deductible health plans.

QL or QLC - Quantity Limit or Quantity Limit (Custom):

This medication has a limit on the amount of medication per prescription.

S- Specialty Medication:

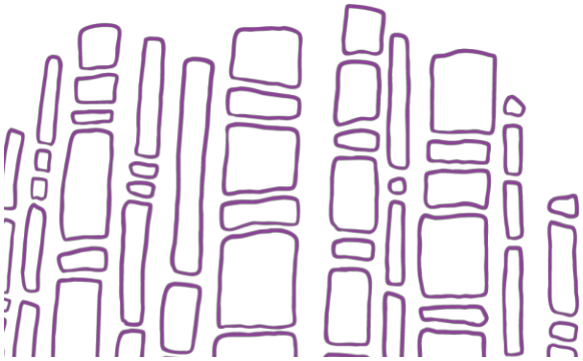
This medication is a specialty medication.

ST - Step Therapy:

This medication requires you to have already tried an alternative medication(s) preferred by the Plan. This process is called "step therapy." The alternative medication(s) is generally a more cost-effective therapy that does not compromise clinical quality.

STC- Step Therapy Criteria:

This is the medication(s) that must be tried prior to using the requested medication.



LIST OF COVERED PRESCRIPTION MEDICATIONS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANALGESICS NONSTEROIDAL ANTI-INFLAMMATORY DRUGS		
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
butalbital-aspirin-caffeine cap 50-325-40 mg	2	QL 70 / 7 days
celecoxib cap 100 mg	1	
celecoxib cap 200 mg	1	
celecoxib cap 400 mg	2	
celecoxib cap 50 mg	1	
diclofenac potassium tab 50 mg	2	
diclofenac sodium soln 1.5%	2	
diclofenac sodium tab delayed release 25 mg	2	
diclofenac sodium tab delayed release 50 mg	1	
diclofenac sodium tab delayed release 75 mg	1	
diclofenac w/ misoprostol tab delayed release 50-0.2 mg	2	
diclofenac w/ misoprostol tab delayed release 75-0.2 mg	2	
diflunisal tab 500 mg	2	
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
etodolac cap 200 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
etodolac cap 300 mg	2	
etodolac tab 400 mg	2	
etodolac tab 500 mg	2	
etodolac tab er 24hr 400 mg	2	
etodolac tab er 24hr 500 mg	2	
etodolac tab er 24hr 600 mg	2	
FENOPROFEN CALCIUM 600 MG TAB	2	
FLURBIPROFEN 100 MG TAB	1	
flurbiprofen tab 100 mg	1	
FLURBIPROFEN 50 MG TAB	4	
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
ibuprofen tab 400 mg	1	
ibuprofen tab 600 mg	1	
ibuprofen tab 800 mg	1	
ibuprofen tab 400 mg	1	
ibuprofen tab 600 mg	1	
ibuprofen tab 800 mg	1	
indomethacin cap 25 mg	1	
indomethacin cap 50 mg	1	
indomethacin suppos 50 mg	4	
indomethacin cap er 75 mg	2	
KETOPROFEN ER 200 MG CAP ER 24H	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ketorolac tromethamine tab 10 mg	1	
LURBIPR 100 MG TAB	1	
MECLOFENAMATE SODIUM 100 MG CAP	4	
MECLOFENAMATE SODIUM 50 MG CAP	4	
mefenamic acid cap 250 mg	2	
meloxicam tab 15 mg	1	
meloxicam tab 7.5 mg	1	
nabumetone tab 500 mg	1	
nabumetone tab 750 mg	2	
naproxen tab 250 mg	1	
naproxen tab 375 mg	1	
naproxen tab 500 mg	1	
naproxen sodium tab 275 mg	2	
naproxen sodium tab 550 mg	2	
oxaprozin tab 600 mg	2	
piroxicam cap 10 mg	2	
piroxicam cap 20 mg	2	
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
sulindac tab 150 mg	1	
sulindac tab 200 mg	1	
OPIOID ANALGESICS, LONG-ACTING		
fentanyl td patch 72hr 100 mcg/hr	2	QL 15 / 30 days
fentanyl td patch 72hr 12 mcg/hr	2	QL 15 / 30 days
fentanyl td patch 72hr 25 mcg/hr	2	QL 15 / 30 days
fentanyl td patch 72hr 50 mcg/hr	2	QL 15 / 30 days
fentanyl td patch 72hr 75 mcg/hr	2	QL 15 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydromorphone hcl tab er 24hr 12 mg	2	QL 30 / 30 days
hydromorphone hcl tab er 24hr 16 mg	2	QL 30 / 30 days
hydromorphone hcl tab er 24hr 32 mg	2	QL 30 / 30 days
hydromorphone hcl tab er 24hr 8 mg	2	QL 30 / 30 days
methadone hcl tab 10 mg	1	QL 90 / 30 days
methadone hcl soln 10 mg/5ml	2	QL 300 / 30 days
methadone hcl conc 10 mg/ml	2	QL 60 / 30 days
methadone hcl tab for oral susp 40 mg	2	QL 90 / 30 days
methadone hcl tab 5 mg	1	QL 90 / 30 days
methadone hcl soln 5 mg/5ml	2	QL 600 / 30 days
methadone hcl conc 10 mg/ml	2	QL 60 / 30 days
methadone hcl tab for oral susp 40 mg	2	QL 90 / 30 days
MORPHINE SULFATE ER 10 MG CAP ER 24H	4	QL 60 / 30 days
MORPHINE SULFATE ER 100 MG CAP ER 24H	4	QL 60 / 30 days
morphine sulfate tab er 100 mg	2	QL 60 / 30 days
morphine sulfate tab er 15 mg	1	QL 60 / 30 days
MORPHINE SULFATE ER 20 MG CAP ER 24H	4	QL 60 / 30 days
morphine sulfate tab er 200 mg	2	QL 60 / 30 days
MORPHINE SULFATE ER 30 MG CAP ER 24H	4	QL 60 / 30 days
morphine sulfate tab er 30 mg	2	QL 60 / 30 days
MORPHINE SULFATE ER 50 MG CAP ER 24H	4	QL 60 / 30 days
MORPHINE SULFATE ER 60 MG CAP ER 24H	4	QL 60 / 30 days
morphine sulfate tab er 60 mg	2	QL 60 / 30 days
MORPHINE SULFATE ER 80 MG CAP ER 24H	4	QL 60 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXYMORPHONE HCL ER 10 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 15 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 20 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 30 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 40 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 5 MG TAB ER 12H	4	QL 60 / 30 days
OXYMORPHONE HCL ER 7.5 MG TAB ER 12H	4	QL 60 / 30 days
SUBLOCADE 100 MG/0.5ML SOLN PRSYR	5	PA S
SUBLOCADE 300 MG/1.5ML SOLN PRSYR	5	PA S
TRAMADOL HCL (ER BIPHASIC) 100 MG TAB ER 24H	4	QL 30 / 30 days
TRAMADOL HCL (ER BIPHASIC) 200 MG TAB ER 24H	4	QL 30 / 30 days
TRAMADOL HCL (ER BIPHASIC) 300 MG TAB ER 24H	4	QL 30 / 30 days
tramadol hcl tab er 24hr 100 mg	2	QL 30 / 30 days
tramadol hcl tab er 24hr 200 mg	2	QL 30 / 30 day(s)
tramadol hcl tab er 24hr 300 mg	2	QL 30 / 30 days
XTAMPZA ER 13.5 MG CP12 DETER	3	QL 60 / 30 days ST STC Trial and failure of 1 therapy: morphine ER
XTAMPZA ER 18 MG CP12 DETER	3	QL 60 / 30 days ST STC Trial and failure of 1 therapy: morphine ER
XTAMPZA ER 27 MG CP12 DETER	3	QL 60 / 30 days ST STC Trial and failure of 1 therapy: morphine ER

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XTAMPZA ER 36 MG CP12 DETER	3	QL 60 / 30 days ST STC Trial and failure of 1 therapy: morphine ER
XTAMPZA ER 9 MG CP12 DETER	3	QL 60 / 30 days ST STC Trial and failure of 1 therapy: morphine ER
OPIOID ANALGESICS, SHORT-ACTING		
ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION	1	QL 630 / 7 day(s)
acetaminophen w/ codeine tab 300-15 mg	1	QL 300 / 30 days
acetaminophen w/ codeine tab 300-30 mg	1	QL 300 / 30 days
ACETAMINOPHEN-CODEINE 300-30 MG/12.5ML SOLUTION	1	QL 630 / 7 days
acetaminophen w/ codeine tab 300-60 mg	2	QL 270 / 30 days
APADAZ 4.08-325 MG TAB	2	QL 360 / 30 days
APADAZ 6.12-325 MG TAB	2	QL 360 / 30 days
APADAZ 8.16-325 MG TAB	2	QL 360 / 30 days
APAP-CAFF-DIHYDROCODEINE 320.5-30-16 MG CAP	3	QL 300 / 30 days
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	2	QL 180 / 30 days
BENZHYDROCODONE-ACETAMINOPHEN 4.08-325 MG TAB	2	QL 360 / 30 days
BENZHYDROCODONE-ACETAMINOPHEN 6.12-325 MG TAB	2	QL 360 / 30 days
BENZHYDROCODONE-ACETAMINOPHEN 8.16-325 MG TAB	2	QL 360 / 30 days
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	2	QL 42 / 7 days
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	2	QL 180 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
butorphanol tartrate nasal soln 10 mg/ml	2	QL 2.5 / 30 days
CODEINE SULFATE 15 MG TAB	4	QL 300 / 30 days
codeine sulfate tab 30 mg	2	QL 300 / 30 days
CODEINE SULFATE 60 MG TAB	4	QL 270 / 30 days
oxycodone w/ acetaminophen tab 10-325 mg	2	QL 180 / 30 days
oxycodone w/ acetaminophen tab 2.5-325 mg	2	QL 180 / 30 days
oxycodone w/ acetaminophen tab 5-325 mg	1	QL 180 / 30 days
oxycodone w/ acetaminophen tab 7.5-325 mg	2	QL 180 / 30 days
FENTANYL CITRATE 1200 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 1200 mcg	2	QL 120 / 30 days PA
FENTANYL CITRATE 1600 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 1600 mcg	2	QL 120 / 30 days PA
FENTANYL CITRATE 200 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 200 mcg	2	QL 120 / 30 days PA
FENTANYL CITRATE 400 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 400 mcg	2	QL 120 / 30 days PA
FENTANYL CITRATE 600 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 600 mcg	2	QL 120 / 30 days PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 800 MCG LOZ HANDLE	2	QL 120 / 30 days PA
fentanyl citrate lozenge on a handle 800 mcg	2	QL 120 / 30 days PA
HYDROCODONE-ACETAMINOPHEN 10-300 MG/15ML SOLUTION	2	QL 4000 / 30 day(s)
hydrocodone-acetaminophen tab 10-325 mg	1	QL 360 / 30 days
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2	QL 5400 / 30 days
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2	QL 5400 / 30 days
hydrocodone-acetaminophen tab 5-325 mg	1	QL 360 / 30 days
hydrocodone-acetaminophen tab 7.5-325 mg	1	QL 360 / 30 days
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2	QL 5400 / 30 days
HYDROCODONE-IBUPROFEN 10-200 MG TAB	4	QL 150 / 30 days
HYDROCODONE-IBUPROFEN 5-200 MG TAB	4	QL 360 / 30 days
hydrocodone-ibuprofen tab 7.5-200 mg	2	QL 360 / 30 days
hydromorphone hcl liqd 1 mg/ml	2	QL 385 / 30 days
hydromorphone hcl tab 2 mg	1	QL 90 / 30 days
hydromorphone hcl tab 4 mg	1	QL 90 / 30 days
hydromorphone hcl tab 8 mg	2	QL 60 / 30 days
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	2	QL 270 / 30 days
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	2	QL 270 / 30 days
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	2	QL 270 / 30 days
MORPHINE SULFATE 10 MG/5ML SOLUTION	1	QL 1350 / 30 day(s)
MORPHINE SULFATE 15 MG TAB	3	QL 90 / 30 days
morphine sulfate tab 15 mg	2	QL 90 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MORPHINE SULFATE 20 MG/5ML SOLUTION	4	QL 675 / 30 day(s)
morphine sulfate oral soln 20 mg/5ml	4	QL 675 / 30 day(s)
MORPHINE SULFATE 30 MG TAB	3	QL 90 / 30 days
morphine sulfate tab 30 mg	2	QL 90 / 30 days
oxycodone hcl tab 10 mg	1	QL 180 / 30 days
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	2	QL 90 / 30 days
oxycodone hcl tab 15 mg	2	QL 180 / 30 days
oxycodone hcl tab 20 mg	2	QL 90 / 30 days
oxycodone hcl tab 30 mg	2	QL 60 / 30 days
oxycodone hcl tab 5 mg	1	QL 180 / 30 days
oxycodone hcl soln 5 mg/5ml	2	QL 1800 / 30 days
oxycodone w/ acetaminophen tab 10-325 mg	2	QL 180 / 30 days
oxycodone w/ acetaminophen tab 2.5-325 mg	2	QL 180 / 30 days
oxycodone w/ acetaminophen tab 5-325 mg	1	QL 180 / 30 days
oxycodone w/ acetaminophen tab 7.5-325 mg	2	QL 180 / 30 days
oxymorphone hcl tab 10 mg	2	QL 120 / 30 days
oxymorphone hcl tab 5 mg	2	QL 120 / 30 days
pentazocine w/ naloxone tab 50-0.5 mg	2	QL 120 / 30 days
tramadol hcl tab 50 mg	1	QL 240 / 30 days
tramadol-acetaminophen tab 37.5-325 mg	1	QL 240 / 30 days
ANESTHETICS LOCAL ANESTHETICS		
lidocaine patch 5%	2	
lidocaine hcl soln 4%	2	
lidocaine hcl viscous soln 2%	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lidocaine-prilocaine cream 2.5-2.5%	2	
lidocaine patch 5%	2	
NAYZILAM 5 MG/0.1ML SOLUTION	4	QL 6 / 30 days PV Preventive
lidocaine patch 5%	2	
lidocaine patch 5%	2	
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS ALCOHOL DETERRENTS/ANTI-CRAVING		
acamprosate calcium tab delayed release 333 mg	2	
disulfiram tab 250 mg	2	
disulfiram tab 500 mg	2	
VIVITROL 380 MG RECON SUSP	5	PA S
OPIOID DEPENDENCE		
BELBUCA 150 MCG FILM	3	QL 60 / 30 days
BELBUCA 300 MCG FILM	3	QL 60 / 30 days
BELBUCA 450 MCG FILM	3	QL 60 / 30 days
BELBUCA 600 MCG FILM	3	QL 60 / 30 days
BELBUCA 75 MCG FILM	3	QL 60 / 30 days
BELBUCA 750 MCG FILM	3	QL 60 / 30 days
BELBUCA 900 MCG FILM	3	QL 60 / 30 days
buprenorphine hcl sl tab 2 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl sl tab 8 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	2	QL 90 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	2	QL 90 / 30 days
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	2	QL 90 / 30 days
lofexidine hcl tab 0.18 mg (base equivalent)	5	PA S
LUCEMYRA 0.18 MG TAB	5	PA S
OPIOID REVERSAL AGENTS		
KLOXXADO 8 MG/0.1ML LIQUID	3	
NALOXONE HCL 0.4 MG/ML SOLN CART	2	
naloxone hcl soln prefilled syringe 0.4 mg/ml	2	
naloxone hcl inj 0.4 mg/ml	2	
naloxone hcl soln prefilled syringe 2 mg/2ml	2	
naloxone hcl nasal spray 4 mg/0.1ml	2	
naloxone hcl inj 4 mg/10ml	2	
naltrexone hcl tab 50 mg	2	
SMOKING CESSATION AGENTS		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	2	AL1 At least 18 yrs old ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
NICOTINE 21-14-7 MG/24HR KIT	3	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications
NICOTROL 10 MG INHALER	3	ACA Affordable Care Act Medications
NICOTROL NS 10 MG/ML SOLUTION	3	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 14 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 21 mg/24hr	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine td patch 24hr 7 mg/24hr	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 2 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex lozenge 4 mg	2	ACA Affordable Care Act Medications
nicotine polacrilex gum 2 mg	2	ACA Affordable Care Act Medications
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	2	ACA Affordable Care Act Medications
varenicline tartrate tab 0.5 mg (base equiv)	2	ACA Affordable Care Act Medications
varenicline tartrate tab 1 mg (base equiv)	2	ACA Affordable Care Act Medications
varenicline tartrate tab 1 mg (base equiv)	2	ACA Affordable Care Act Medications
ANTIBACTERIALS AMINOGLYCOSIDES		
ARIKAYCE 590 MG/8.4ML SUSPENSION	5	PA S
gentamicin sulfate cream 0.1%	2	
gentamicin sulfate oint 0.1%	2	
neomycin sulfate tab 500 mg	1	
ANTIBACTERIALS, OTHER		
CAYSTON 75 MG RECON SOLN	5	PA S
clindamycin hcl cap 150 mg	1	
clindamycin hcl cap 300 mg	1	
clindamycin hcl cap 75 mg	1	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clindamycin phosphate vaginal cream 2%	2	
CLINDESSE 2 % CREAM	4	
fosfomycin tromethamine powd pack 3 gm (base equivalent)	2	
linezolid for susp 100 mg/5ml	2	
linezolid tab 600 mg	2	
methenamine hippurate tab 1 gm	2	
metronidazole cream 0.75%	2	
metronidazole gel 0.75%	2	
metronidazole vaginal gel 0.75%	2	
metronidazole gel 1%	2	
metronidazole tab 250 mg	1	
metronidazole cap 375 mg	2	
metronidazole tab 500 mg	1	
nitrofurantoin susp 25 mg/5ml	2	
nitrofurantoin susp 25 mg/5ml	2	
nitrofurantoin macrocrystalline cap 100 mg	2	
nitrofurantoin macrocrystalline cap 25 mg	2	
nitrofurantoin macrocrystalline cap 50 mg	2	
nitrofurantoin monohydrate macrocrystalline cap 100 mg	1	
NUVESSA 1.3 % GEL	4	
SIVEXTRO 200 MG TAB	5	PA S
tinidazole tab 250 mg	2	
tinidazole tab 500 mg	2	
trimethoprim tab 100 mg	1	
vancomycin hcl cap 125 mg (base equivalent)	2	
vancomycin hcl for oral soln 25 mg/ml (base equivalent)	2	
vancomycin hcl cap 250 mg (base equivalent)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vancomycin hcl for oral soln 50 mg/ml (base equivalent)	2	
vancomycin hcl for oral soln 50 mg/ml (base equivalent)	2	
VANDAZOLE 0.75 % GEL	4	
XIFAXAN 200 MG TAB	4	
XIFAXAN 550 MG TAB	4	
BETA-LACTAM, CEPHALOSPORINS		
CEFACLOR 250 MG CAP	2	
CEFACLOR 500 MG CAP	2	
CEFADROXIL 1 GM TAB	3	
cefadroxil for susp 250 mg/5ml	2	
cefadroxil cap 500 mg	1	
cefadroxil for susp 500 mg/5ml	2	
cefdinir for susp 125 mg/5ml	2	
cefdinir for susp 250 mg/5ml	2	
cefdinir cap 300 mg	1	
cefixime for susp 100 mg/5ml	2	
cefixime for susp 200 mg/5ml	2	
cefpodoxime proxetil tab 100 mg	2	
CEFPODOXIME PROXETIL 100 MG/5ML RECON SUSP	2	
cefpodoxime proxetil tab 200 mg	2	
CEFPODOXIME PROXETIL 50 MG/5ML RECON SUSP	2	
cefprozil for susp 125 mg/5ml	2	
cefprozil tab 250 mg	2	
cefprozil for susp 250 mg/5ml	2	
cefprozil tab 500 mg	2	
cefuroxime axetil tab 250 mg	1	
cefuroxime axetil tab 500 mg	2	
cephalexin for susp 125 mg/5ml	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cephalexin cap 250 mg	1	
cephalexin for susp 250 mg/5ml	2	
cephalexin cap 500 mg	1	
cephalexin cap 750 mg	2	
BETA-LACTAM, PENICILLINS		
AMOXICILLIN 125 MG CHEW TAB	2	
amoxicillin (trihydrate) for susp 125 mg/5ml	1	
amoxicillin (trihydrate) for susp 200 mg/5ml	1	
amoxicillin (trihydrate) cap 250 mg	1	
AMOXICILLIN 250 MG CHEW TAB	2	
amoxicillin (trihydrate) for susp 250 mg/5ml	1	
amoxicillin (trihydrate) for susp 400 mg/5ml	1	
amoxicillin (trihydrate) cap 500 mg	1	
amoxicillin (trihydrate) tab 500 mg	1	
amoxicillin (trihydrate) tab 875 mg	1	
AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB	4	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	1	
amoxicillin & k clavulanate tab 250-125 mg	2	
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	2	
AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB	4	
amoxicillin & k clavulanate for susp 400-57 mg/5ml	1	
amoxicillin & k clavulanate tab 500-125 mg	1	
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	2	
amoxicillin & k clavulanate tab 875-125 mg	1	
AMOXICILLIN-POT CLAVULANATE ER 1000-62.5 MG TAB ER 12H	3	
ampicillin cap 500 mg	2	
dicloxacillin sodium cap 250 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dicloxacillin sodium cap 500 mg	2	
PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN	1	
penicillin v potassium tab 250 mg	1	
PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN	1	
penicillin v potassium tab 500 mg	1	
MACROLIDES		
azithromycin for susp 100 mg/5ml	2	
azithromycin for susp 200 mg/5ml	1	
azithromycin tab 250 mg	1	
azithromycin tab 500 mg	1	
azithromycin tab 600 mg	2	
CLARITHROMYCIN 125 MG/5ML RECON SUSP	4	
clarithromycin tab 250 mg	2	
CLARITHROMYCIN 250 MG/5ML RECON SUSP	4	
clarithromycin tab 500 mg	2	
clarithromycin tab er 24hr 500 mg	2	
DIFICID 200 MG TAB	4	
DIFICID 40 MG/ML RECON SUSP	3	
E.E.S. 400 400 MG TAB	4	ST STC Trial and failure of 1 therapy: generic erythromycin ethylsuccinate
erythromycin ethylsuccinate tab 400 mg	4	ST STC Trial and failure of 1 therapy: generic erythromycin ethylsuccinate
erythromycin tab delayed release 250 mg	2	
erythromycin tab delayed release 333 mg	2	
erythromycin tab delayed release 500 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
erythromycin tab delayed release 250 mg	2	
erythromycin tab delayed release 333 mg	2	
erythromycin tab delayed release 500 mg	2	
ERYTHROMYCIN BASE 250 MG CP DR PART	4	
erythromycin tab 250 mg	2	
erythromycin tab delayed release 250 mg	2	
erythromycin tab delayed release 333 mg	2	
erythromycin tab 500 mg	2	
erythromycin tab delayed release 500 mg	2	
erythromycin ethylsuccinate for susp 200 mg/5ml	2	
erythromycin ethylsuccinate tab 400 mg	4	ST STC Trial and failure of 1 therapy: generic erythromycin ethylsuccinate
erythromycin ethylsuccinate for susp 400 mg/5ml	2	
fidaxomicin tab 200 mg	4	
QUINOLONES		
BAXDELA 450 MG TAB	5	QL 28 / 14 days PA S
BESIVANCE 0.6 % SUSPENSION	3	
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	1	
CIPROFLOXACIN HCL 100 MG TAB	4	
ciprofloxacin hcl tab 250 mg (base equiv)	1	
ciprofloxacin hcl tab 500 mg (base equiv)	1	
ciprofloxacin hcl tab 750 mg (base equiv)	1	
levofloxacin oral soln 25 mg/ml	2	
levofloxacin tab 250 mg	1	
levofloxacin tab 500 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levofloxacin tab 750 mg	1	
moxifloxacin hcl tab 400 mg (base equiv)	2	
OFLOXACIN 300 MG TAB	4	
OFLOXACIN 400 MG TAB	2	
SULFONAMIDES		
sulfadiazine tab 500 mg	4	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	2	
sulfamethoxazole-trimethoprim tab 400-80 mg	1	
sulfamethoxazole-trimethoprim tab 800-160 mg	1	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	2	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	2	
TETRACYCLINES		
doxycycline monohydrate tab 100 mg	1	
demeclocycline hcl tab 150 mg	2	
demeclocycline hcl tab 300 mg	2	
doxycycline hyclate cap 100 mg	1	
doxycycline hyclate tab 100 mg	1	
doxycycline hyclate tab 20 mg	1	
doxycycline hyclate cap 50 mg	2	
doxycycline monohydrate cap 100 mg	1	
doxycycline monohydrate tab 100 mg	1	
doxycycline monohydrate tab 150 mg	2	
doxycycline monohydrate for susp 25 mg/5ml	2	
doxycycline monohydrate cap 50 mg	1	
doxycycline monohydrate tab 50 mg	1	
doxycycline monohydrate tab 75 mg	2	
minocycline hcl cap 100 mg	2	
minocycline hcl cap 50 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
minocycline hcl cap 75 mg	2	
doxycycline monohydrate cap 100 mg	1	
NUZYRA 100 MG RECON SOLN	5	PA S
NUZYRA 150 MG TAB	5	PA S
tetracycline hcl cap 250 mg	2	
tetracycline hcl cap 500 mg	2	
ANTICONVULSANTS ANTICONVULSANTS, OTHER		
BRIVIACT 10 MG TAB	4	PV Preventive
BRIVIACT 10 MG/ML SOLUTION	4	PV Preventive
BRIVIACT 100 MG TAB	4	PV Preventive
BRIVIACT 25 MG TAB	4	PV Preventive
BRIVIACT 50 MG TAB	4	PV Preventive
BRIVIACT 75 MG TAB	4	PV Preventive
DIACOMIT 250 MG CAP	5	PA S
DIACOMIT 250 MG PACKET	5	PA S
DIACOMIT 500 MG CAP	5	PA S
DIACOMIT 500 MG PACKET	5	PA S
divalproex sodium cap delayed release sprinkle 125 mg	2	PV Preventive
divalproex sodium tab delayed release 125 mg	1	PV Preventive
divalproex sodium tab delayed release 250 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
divalproex sodium tab delayed release 500 mg	1	PV Preventive
divalproex sodium tab er 24 hr 250 mg	2	PV Preventive
divalproex sodium tab er 24 hr 500 mg	2	PV Preventive
EPIDIOLEX 100 MG/ML SOLUTION	5	PA S
felbamate tab 400 mg	2	PV Preventive
felbamate tab 600 mg	2	PV Preventive
felbamate susp 600 mg/5ml	2	PV Preventive
FINTEPLA 2.2 MG/ML SOLUTION	5	PA S
FYCOMPA 0.5 MG/ML SUSPENSION	4	PV Preventive
FYCOMPA 10 MG TAB	4	PV Preventive
FYCOMPA 12 MG TAB	4	PV Preventive
FYCOMPA 2 MG TAB	4	PV Preventive
FYCOMPA 4 MG TAB	4	PV Preventive
FYCOMPA 6 MG TAB	4	PV Preventive
FYCOMPA 8 MG TAB	4	PV Preventive
lamotrigine tab 100 mg	1	PV Preventive
lamotrigine tab 150 mg	1	PV Preventive
lamotrigine tab 200 mg	1	PV Preventive
lamotrigine tab chewable dispersible 25 mg	2	PV Preventive
lamotrigine tab 25 mg	1	PV Preventive
lamotrigine tab chewable dispersible 5 mg	2	PV Preventive
lamotrigine tab er 24hr 100 mg	2	PV Preventive
lamotrigine tab er 24hr 200 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamotrigine tab er 24hr 25 mg	2	PV Preventive
lamotrigine tab er 24hr 250 mg	2	PV Preventive
lamotrigine tab er 24hr 300 mg	2	PV Preventive
lamotrigine tab er 24hr 50 mg	2	PV Preventive
lamotrigine tab 35 x 25 mg starter kit	2	PV Preventive
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	2	PV Preventive
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	2	PV Preventive
levetiracetam oral soln 100 mg/ml	2	PV Preventive
levetiracetam tab 1000 mg	2	PV Preventive
levetiracetam tab 250 mg	1	PV Preventive
levetiracetam tab 500 mg	1	PV Preventive
levetiracetam oral soln 100 mg/ml	2	PV Preventive
levetiracetam tab 750 mg	2	PV Preventive
levetiracetam tab er 24hr 500 mg	2	PV Preventive
levetiracetam tab er 24hr 750 mg	2	PV Preventive
perampanel tab 10 mg	4	PV Preventive
perampanel tab 12 mg	4	PV Preventive
perampanel tab 2 mg	4	PV Preventive
perampanel tab 4 mg	4	PV Preventive
perampanel tab 6 mg	4	PV Preventive
perampanel tab 8 mg	4	PV Preventive
levetiracetam tab 500 mg	1	PV Preventive
lamotrigine tab 100 mg	1	PV Preventive
lamotrigine tab 150 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lamotrigine tab 200 mg	1	PV Preventive
lamotrigine tab 25 mg	1	PV Preventive
lamotrigine tab 35 x 25 mg starter kit	2	PV Preventive
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	2	PV Preventive
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	2	PV Preventive
topiramate tab 100 mg	1	PV Preventive
topiramate sprinkle cap 15 mg	2	PV Preventive
topiramate tab 200 mg	1	PV Preventive
topiramate sprinkle cap 25 mg	2	PV Preventive
topiramate tab 25 mg	1	PV Preventive
topiramate sprinkle cap 50 mg	2	PV Preventive
topiramate tab 50 mg	1	PV Preventive
topiramate cap er 24hr 100 mg	3	PV Preventive
topiramate cap er 24hr sprinkle 100 mg	3	PV Preventive
topiramate cap er 24hr sprinkle 150 mg	3	PV Preventive
topiramate cap er 24hr 200 mg	3	PV Preventive
topiramate cap er 24hr sprinkle 200 mg	3	PV Preventive
topiramate cap er 24hr 25 mg	3	PV Preventive
topiramate cap er 24hr sprinkle 25 mg	3	PV Preventive
topiramate cap er 24hr 50 mg	3	PV Preventive
topiramate cap er 24hr sprinkle 50 mg	3	PV Preventive
valproic acid cap 250 mg	2	PV Preventive
valproate sodium oral soln 250 mg/5ml (base equiv)	2	PV Preventive
valproate sodium oral soln 250 mg/5ml (base equiv)	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XCOPRI 100 MG TAB	4	PV Preventive
XCOPRI 150 MG TAB	4	PV Preventive
XCOPRI 200 MG TAB	4	PV Preventive
XCOPRI 50 MG TAB	4	PV Preventive
CALCIUM CHANNEL MODIFYING AGENTS		
ethosuximide cap 250 mg	2	PV Preventive
ethosuximide soln 250 mg/5ml	2	PV Preventive
methsuximide cap 300 mg	2	PV Preventive
ZARONTIN 250 MG CAP	4	ST STC Trial and failure of 1 therapy: generic Zarontin PV Preventive
ZARONTIN 250 MG/5ML SOLUTION	4	ST STC Trial and failure of 1 therapy: generic Zarontin PV Preventive
GAMMA-AMINOBUTYRIC ACID (GABA) MODULATING AGENTS		
clobazam tab 10 mg	2	PV Preventive
clobazam suspension 2.5 mg/ml	2	PV Preventive
clobazam tab 20 mg	2	PV Preventive
diazepam rectal gel delivery system 10 mg	2	QL 5 / 30 days PV Preventive
DIAZEPAM 2.5 MG GEL	4	QL 5 / 30 days PV Preventive
diazepam rectal gel delivery system 20 mg	2	QL 5 / 30 days PV Preventive
gabapentin cap 100 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gabapentin oral soln 250 mg/5ml	2	QL 2160 / 30 days PV Preventive
gabapentin cap 300 mg	1	PV Preventive
gabapentin oral soln 250 mg/5ml	2	QL 2160 / 30 days PV Preventive
gabapentin cap 400 mg	1	PV Preventive
gabapentin tab 600 mg	1	PV Preventive
gabapentin tab 800 mg	1	PV Preventive
MYSOLINE 250 MG TAB	4	ST STC Trial and failure of 1 therapy: generic Mysoline PV Preventive
MYSOLINE 50 MG TAB	4	ST STC Trial and failure of 1 therapy: generic Mysoline PV Preventive
phenobarbital tab 100 mg	1	
phenobarbital tab 15 mg	1	
phenobarbital tab 16.2 mg	1	
phenobarbital elixir 20 mg/5ml	2	
phenobarbital tab 30 mg	1	
phenobarbital elixir 20 mg/5ml	2	
phenobarbital tab 32.4 mg	1	
phenobarbital tab 60 mg	1	
phenobarbital elixir 20 mg/5ml	2	
phenobarbital tab 64.8 mg	1	
phenobarbital tab 97.2 mg	1	
PRIMIDONE 125 MG TAB	4	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
primidone tab 250 mg	2	PV Preventive
primidone tab 50 mg	1	PV Preventive
SABRIL 500 MG PACKET	5	PA ST S STC Trial and failure of 1 therapy: generic Sabril
SABRIL 500 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Sabril
tiagabine hcl tab 12 mg	2	PV Preventive
tiagabine hcl tab 16 mg	2	PV Preventive
tiagabine hcl tab 2 mg	2	PV Preventive
tiagabine hcl tab 4 mg	2	PV Preventive
VALTOCO 10 MG DOSE 10 MG/0.1ML LIQUID	4	QL 5 / 30 days PV Preventive
VALTOCO 15 MG DOSE 2 X 7.5 MG/0.1ML LIQD THPK	4	QL 5 / 30 days PV Preventive
VALTOCO 20 MG DOSE 2 X 10 MG/0.1ML LIQD THPK	4	QL 5 / 30 days PV Preventive
VALTOCO 5 MG DOSE 5 MG/0.1ML LIQUID	4	QL 5 / 30 days PV Preventive
vigabatrin powd pack 500 mg	5	PA S
vigabatrin tab 500 mg	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
vigabatrin powd pack 500 mg	5	PA S
vigabatrin tab 500 mg	5	PA S
vigabatrin powd pack 500 mg	5	PA S
ZTALMY 50 MG/ML SUSPENSION	5	PA S
SODIUM CHANNEL AGENTS		
carbamazepine chew tab 100 mg	2	PV Preventive
carbamazepine susp 100 mg/5ml	2	PV Preventive
CARBAMAZEPINE 200 MG CHEW TAB	2	PV Preventive
carbamazepine tab 200 mg	2	PV Preventive
carbamazepine susp 100 mg/5ml	2	PV Preventive
carbamazepine cap er 12hr 100 mg	2	PV Preventive
carbamazepine tab er 12hr 100 mg	2	PV Preventive
carbamazepine cap er 12hr 200 mg	2	PV Preventive
carbamazepine tab er 12hr 200 mg	2	PV Preventive
carbamazepine cap er 12hr 300 mg	2	PV Preventive
carbamazepine tab er 12hr 400 mg	2	PV Preventive
CARBATROL 100 MG CAP ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
CARBATROL 200 MG CAP ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARBATROL 300 MG CAP ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
DILANTIN 100 MG CAP	4	ST STC Trial and failure of 1 therapy: generic Dilantin PV Preventive
DILANTIN 125 MG/5ML SUSPENSION	4	ST STC Trial and failure of 1 therapy: generic Dilantin PV Preventive
DILANTIN 30 MG CAP	4	ST STC Trial and failure of 1 therapy: generic Dilantin PV Preventive
DILANTIN INFATABS 50 MG CHEW TAB	4	ST STC Trial and failure of 1 therapy: generic Dilantin PV Preventive
DILANTIN-125 125 MG/5ML SUSPENSION	4	ST STC Trial and failure of 1 therapy: generic Dilantin PV Preventive
carbamazepine tab 200 mg	2	PV Preventive
lacosamide oral solution 10 mg/ml	2	PV Preventive
lacosamide tab 100 mg	2	PV Preventive
lacosamide oral solution 10 mg/ml	2	PV Preventive
lacosamide tab 150 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lacosamide tab 200 mg	2	PV Preventive
lacosamide tab 50 mg	2	PV Preventive
lacosamide oral solution 10 mg/ml	2	PV Preventive
oxcarbazepine tab 150 mg	1	PV Preventive
oxcarbazepine tab 300 mg	2	PV Preventive
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	2	PV Preventive
oxcarbazepine tab 600 mg	2	PV Preventive
phenytoin sodium extended cap 200 mg	2	PV Preventive
phenytoin sodium extended cap 300 mg	2	PV Preventive
phenytoin susp 125 mg/5ml	2	PV Preventive
phenytoin susp 125 mg/5ml	2	PV Preventive
phenytoin chew tab 50 mg	2	PV Preventive
phenytoin chew tab 50 mg	2	PV Preventive
phenytoin sodium extended cap 100 mg	2	PV Preventive
phenytoin sodium extended cap 200 mg	2	PV Preventive
phenytoin sodium extended cap 300 mg	2	PV Preventive
rufinamide tab 200 mg	2	PV Preventive
rufinamide susp 40 mg/ml	2	PV Preventive
rufinamide tab 400 mg	2	PV Preventive
TEGRETOL 100 MG/5ML SUSPENSION	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
TEGRETOL 200 MG TAB	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TEGRETOL-XR 100 MG TAB ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
TEGRETOL-XR 200 MG TAB ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
TEGRETOL-XR 400 MG TAB ER 12H	4	ST STC Trial and failure of 1 therapy: generic carbamazepine PV Preventive
XCOPRI (250 MG DAILY DOSE) 100 & 150 MG TAB THPK	4	PV Preventive
XCOPRI (350 MG DAILY DOSE) 150 & 200 MG TAB THPK	4	PV Preventive
XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK	4	PV Preventive
XCOPRI 14 X 150 MG & 14 X200 MG TAB THPK	4	PV Preventive
XCOPRI 14 X 50 MG & 14 X100 MG TAB THPK	4	PV Preventive
zonisamide cap 100 mg	2	PV Preventive
zonisamide cap 25 mg	1	PV Preventive
zonisamide cap 50 mg	1	PV Preventive
ANTIDEMENTIA AGENTS ANTIDEMENTIA AGENTS, OTHER		
ERGOLOID MESYLATES 1 MG TAB	4	
CHOLINESTERASE INHIBITORS		
donepezil hydrochloride tab 10 mg	1	
donepezil hydrochloride orally disintegrating tab 10 mg	1	
donepezil hydrochloride tab 23 mg	2	
donepezil hydrochloride tab 5 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
donepezil hydrochloride orally disintegrating tab 5 mg	1	
galantamine hydrobromide tab 12 mg	2	
galantamine hydrobromide tab 4 mg	2	
GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION	4	
galantamine hydrobromide tab 8 mg	2	
galantamine hydrobromide cap er 24hr 16 mg	2	
galantamine hydrobromide cap er 24hr 24 mg	2	
galantamine hydrobromide cap er 24hr 8 mg	2	
rivastigmine td patch 24hr 13.3 mg/24hr	2	
rivastigmine td patch 24hr 4.6 mg/24hr	2	
rivastigmine td patch 24hr 9.5 mg/24hr	2	
rivastigmine tartrate cap 1.5 mg (base equivalent)	2	
rivastigmine tartrate cap 3 mg (base equivalent)	2	
rivastigmine tartrate cap 4.5 mg (base equivalent)	2	
rivastigmine tartrate cap 6 mg (base equivalent)	2	
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST		
memantine hcl tab 10 mg	1	
memantine hcl oral solution 2 mg/ml	2	
memantine hcl oral solution 2 mg/ml	2	
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	2	
memantine hcl tab 5 mg	1	
ANTIDEPRESSANTS ANTIDEPRESSANTS, OTHER		
AUVELITY 45-105 MG TAB ER	4	ST STC Trial and failure of buproprion and one additional generic antidepressant PV Preventive
bupropion hcl tab 100 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bupropion hcl tab 75 mg	1	PV Preventive
bupropion hcl tab er 12hr 100 mg	1	PV Preventive
bupropion hcl tab er 12hr 150 mg	1	PV Preventive
bupropion hcl tab er 12hr 200 mg	1	PV Preventive
bupropion hcl tab er 24hr 150 mg	1	PV Preventive
bupropion hcl tab er 24hr 300 mg	1	PV Preventive
CHLORDIAZEPOXIDE-AMITRIPTYLINE 10-25 MG TAB	4	QL 180 / 30 days
CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TAB	4	QL 180 / 30 days
mirtazapine tab 15 mg	1	PV Preventive
mirtazapine orally disintegrating tab 15 mg	2	PV Preventive
mirtazapine tab 30 mg	1	PV Preventive
mirtazapine orally disintegrating tab 30 mg	2	PV Preventive
mirtazapine tab 45 mg	1	PV Preventive
mirtazapine orally disintegrating tab 45 mg	2	PV Preventive
mirtazapine tab 7.5 mg	2	PV Preventive
PERPHENAZINE-AMITRIPTYLINE 2-10 MG TAB	4	
PERPHENAZINE-AMITRIPTYLINE 2-25 MG TAB	4	
PERPHENAZINE-AMITRIPTYLINE 4-10 MG TAB	4	
PERPHENAZINE-AMITRIPTYLINE 4-25 MG TAB	4	
PERPHENAZINE-AMITRIPTYLINE 4-50 MG TAB	4	
SPRAVATO (56 MG DOSE) 28 MG/DEVICE SOLN THPK	5	PA S
SPRAVATO (84 MG DOSE) 28 MG/DEVICE SOLN THPK	5	PA S
ZURZUVAE 20 MG CAP	5	PA S QLC 14 / 365 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZURZUVAE 25 MG CAP	5	PA S QLC 14 / 365 days
ZURZUVAE 30 MG CAP	5	PA S QLC 14 / 365 days
MONOAMINE OXIDASE INHIBITORS		
EMSAM 12 MG/24HR PATCH 24HR	4	PV Preventive
EMSAM 6 MG/24HR PATCH 24HR	4	PV Preventive
EMSAM 9 MG/24HR PATCH 24HR	4	PV Preventive
MARPLAN 10 MG TAB	4	PV Preventive
PHENELZINE SULFATE 15 MG TAB	4	PV Preventive
tranylcypromine sulfate tab 10 mg	2	PV Preventive
SSRIS/SNRIS (SELECTIVE SEROTONIN REUPTAKE INHIBITOR/SEROTONIN AND NOREPINEPHRINE REUPTAKE INHIBITOR)		
citalopram hydrobromide tab 10 mg (base equiv)	1	PV Preventive
citalopram hydrobromide oral soln 10 mg/5ml	2	PV Preventive
citalopram hydrobromide tab 20 mg (base equiv)	1	PV Preventive
citalopram hydrobromide oral soln 10 mg/5ml	2	PV Preventive
citalopram hydrobromide tab 40 mg (base equiv)	1	PV Preventive
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	2	PV Preventive
desvenlafaxine succinate tab er 24hr 25 mg (base equiv)	2	PV Preventive
desvenlafaxine succinate tab er 24hr 50 mg (base equiv)	2	PV Preventive
escitalopram oxalate tab 10 mg (base equiv)	1	PV Preventive
escitalopram oxalate soln 5 mg/5ml (base equiv)	2	PV Preventive
escitalopram oxalate tab 20 mg (base equiv)	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
escitalopram oxalate tab 5 mg (base equiv)	1	PV Preventive
escitalopram oxalate soln 5 mg/5ml (base equiv)	2	PV Preventive
FETZIMA 120 MG CAP ER 24H	4	ST STC Trial and failure of one generic antidepressant PV Preventive
FETZIMA 20 MG CAP ER 24H	4	ST STC Trial and failure of one generic antidepressant PV Preventive
FETZIMA 40 MG CAP ER 24H	4	ST STC Trial and failure of one generic antidepressant PV Preventive
FETZIMA 80 MG CAP ER 24H	4	ST STC Trial and failure of one generic antidepressant PV Preventive
FETZIMA TITRATION 20 & 40 MG CP24 THPK	4	ST STC Trial and failure of one generic antidepressant PV Preventive
fluoxetine hcl cap 10 mg	1	PV Preventive
fluoxetine hcl cap 20 mg	1	PV Preventive
fluoxetine hcl solution 20 mg/5ml	2	PV Preventive
fluoxetine hcl cap 40 mg	1	PV Preventive
fluvoxamine maleate tab 100 mg	2	PV Preventive
fluvoxamine maleate tab 25 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluvoxamine maleate tab 50 mg	2	PV Preventive
NEFAZODONE HCL 100 MG TAB	4	PV Preventive
NEFAZODONE HCL 150 MG TAB	4	PV Preventive
NEFAZODONE HCL 200 MG TAB	4	PV Preventive
NEFAZODONE HCL 250 MG TAB	4	PV Preventive
NEFAZODONE HCL 50 MG TAB	4	PV Preventive
paroxetine hcl tab 10 mg	1	PV Preventive
PAROXETINE HCL 10 MG/5ML SUSPENSION	1	PV Preventive
paroxetine hcl tab 20 mg	1	PV Preventive
paroxetine hcl tab 30 mg	1	PV Preventive
paroxetine hcl tab 40 mg	1	PV Preventive
sertraline hcl tab 100 mg	1	PV Preventive
sertraline hcl oral concentrate for solution 20 mg/ml	2	PV Preventive
sertraline hcl tab 25 mg	1	PV Preventive
sertraline hcl tab 50 mg	1	PV Preventive
trazodone hcl tab 100 mg	1	PV Preventive
trazodone hcl tab 150 mg	1	PV Preventive
trazodone hcl tab 50 mg	1	PV Preventive
TRINTELLIX 10 MG TAB	4	PV Preventive
TRINTELLIX 20 MG TAB	4	PV Preventive
TRINTELLIX 5 MG TAB	4	PV Preventive
venlafaxine hcl tab 100 mg (base equivalent)	1	PV Preventive
venlafaxine hcl tab 25 mg (base equivalent)	1	PV Preventive
venlafaxine hcl tab 37.5 mg (base equivalent)	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
venlafaxine hcl tab 50 mg (base equivalent)	1	PV Preventive
venlafaxine hcl tab 75 mg (base equivalent)	1	PV Preventive
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	1	PV Preventive
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	1	PV Preventive
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	1	PV Preventive
VIIBRYD 10 MG TAB	4	ST STC Trial and failure of vilazodone (generic Viibryd) PV Preventive
VIIBRYD 20 MG TAB	4	ST STC Trial and failure of vilazodone (generic Viibryd) PV Preventive
VIIBRYD 40 MG TAB	4	ST STC Trial and failure of vilazodone (generic Viibryd) PV Preventive
VIIBRYD STARTER PACK 10 & 20 MG KIT	4	ST STC Trial and failure of vilazodone (generic Viibryd) PV Preventive
vilazodone hcl tab 10 mg	2	PV Preventive
vilazodone hcl tab 20 mg	2	PV Preventive
vilazodone hcl tab 40 mg	2	PV Preventive
TRICYCLICS		
amitriptyline hcl tab 10 mg	1	PV Preventive
amitriptyline hcl tab 100 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amitriptyline hcl tab 150 mg	2	PV Preventive
amitriptyline hcl tab 25 mg	1	PV Preventive
amitriptyline hcl tab 50 mg	1	PV Preventive
amitriptyline hcl tab 75 mg	1	PV Preventive
amoxapine tab 100 mg	2	PV Preventive
amoxapine tab 150 mg	2	PV Preventive
amoxapine tab 25 mg	2	PV Preventive
amoxapine tab 50 mg	2	PV Preventive
clomipramine hcl cap 25 mg	2	PV Preventive
clomipramine hcl cap 50 mg	2	PV Preventive
clomipramine hcl cap 75 mg	2	PV Preventive
desipramine hcl tab 10 mg	2	PV Preventive
desipramine hcl tab 100 mg	2	PV Preventive
desipramine hcl tab 150 mg	2	PV Preventive
desipramine hcl tab 25 mg	2	PV Preventive
desipramine hcl tab 50 mg	2	PV Preventive
desipramine hcl tab 75 mg	2	PV Preventive
doxepin hcl cap 10 mg	1	PV Preventive
doxepin hcl conc 10 mg/ml	1	PV Preventive
doxepin hcl cap 100 mg	2	PV Preventive
doxepin hcl cap 150 mg	2	PV Preventive
doxepin hcl cap 25 mg	1	PV Preventive
doxepin hcl cap 50 mg	2	PV Preventive
doxepin hcl cap 75 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
imipramine hcl tab 10 mg	1	PV Preventive
imipramine hcl tab 25 mg	1	PV Preventive
imipramine hcl tab 50 mg	1	PV Preventive
nortriptyline hcl cap 10 mg	1	PV Preventive
nortriptyline hcl soln 10 mg/5ml	2	PV Preventive
nortriptyline hcl cap 25 mg	1	PV Preventive
nortriptyline hcl cap 50 mg	1	PV Preventive
nortriptyline hcl cap 75 mg	1	PV Preventive
protriptyline hcl tab 10 mg	2	PV Preventive
protriptyline hcl tab 5 mg	2	PV Preventive
trimipramine maleate cap 100 mg	2	PV Preventive
trimipramine maleate cap 25 mg	2	PV Preventive
trimipramine maleate cap 50 mg	2	PV Preventive
ANTIEMETICS ANTIEMETICS, OTHER		
prochlorperazine suppos 25 mg	2	
meclizine hcl tab 25 mg	1	
metoclopramide hcl tab 10 mg (base equivalent)	1	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	2	
metoclopramide hcl tab 5 mg (base equivalent)	1	
METOCLOPRAMIDE HCL 5 MG TAB DISP	4	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	2	
perphenazine tab 16 mg	2	PV Preventive
perphenazine tab 2 mg	2	PV Preventive
perphenazine tab 4 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
perphenazine tab 8 mg	2	PV Preventive
prochlorperazine suppos 25 mg	2	
prochlorperazine maleate tab 10 mg (base equivalent)	2	
prochlorperazine maleate tab 5 mg (base equivalent)	1	
promethazine hcl suppos 12.5 mg	2	
promethazine hcl tab 12.5 mg	1	
promethazine hcl suppos 25 mg	2	
promethazine hcl tab 25 mg	1	
promethazine hcl tab 50 mg	1	
promethazine hcl suppos 12.5 mg	2	
promethazine hcl suppos 25 mg	2	
PROMETHEGAN 50 MG SUPPOS	4	
scopolamine td patch 72hr 1 mg/3days	2	
trimethobenzamide hcl cap 300 mg	2	
EMETOGENIC THERAPY ADJUNCTS		
aprepitant capsule 125 mg	2	QL 4 / 30 days
aprepitant capsule 40 mg	2	QL 4 / 30 days
aprepitant capsule therapy pack 80 & 125 mg	2	QL 6 / 30 days
aprepitant capsule 80 mg	2	QL 4 / 30 days
dronabinol cap 10 mg	2	QL 60 / 30 days
dronabinol cap 2.5 mg	2	QL 60 / 30 days
dronabinol cap 5 mg	2	QL 60 / 30 days
EMEND 125 MG/5ML RECON SUSP	3	QL 3 / 30 days
granisetron hcl tab 1 mg	2	
ondansetron orally disintegrating tab 4 mg	1	
ondansetron orally disintegrating tab 8 mg	1	
ondansetron hcl tab 4 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ondansetron hcl oral soln 4 mg/5ml	1	
ondansetron hcl tab 8 mg	1	
VARUBI (180 MG DOSE) 2 X 90 MG TAB THPK	4	QL 4.2 / 30 days QLC 4.2 / 30 days
ANTIFUNGALS		
clotrimazole troche 10 mg	2	
CRESEMBA 186 MG CAP	5	PA S
CRESEMBA 372 MG RECON SOLN	5	PA S
CRESEMBA 74.5 MG CAP	5	PA S
econazole nitrate cream 1%	2	
EXELDERM 1 % CREAM	4	
EXELDERM 1 % SOLUTION	4	
fluconazole for susp 10 mg/ml	2	
fluconazole tab 100 mg	1	
fluconazole tab 150 mg	1	
fluconazole tab 200 mg	1	
fluconazole for susp 40 mg/ml	2	
fluconazole tab 50 mg	1	
flucytosine cap 250 mg	2	
flucytosine cap 500 mg	2	
griseofulvin microsize susp 125 mg/5ml	2	
griseofulvin microsize tab 500 mg	2	
griseofulvin ultramicrosize tab 125 mg	2	
griseofulvin ultramicrosize tab 250 mg	2	
GYNAZOLE-1 2 % CREAM	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
itraconazole oral soln 10 mg/ml	2	
itraconazole cap 100 mg	2	
ketoconazole cream 2%	2	
ketoconazole shampoo 2%	1	
ketoconazole tab 200 mg	2	
nystatin topical powder 100000 unit/gm	2	
LULICONAZOLE 1 % CREAM	4	
MICONAZOLE 3 200 MG SUPPOS	4	
NAFTIFINE HCL 1 % CREAM	4	
NOXAFIL 300 MG PACKET	5	PA S
nystatin topical powder 100000 unit/gm	2	
nystatin cream 100000 unit/gm	1	
nystatin oint 100000 unit/gm	1	
nystatin topical powder 100000 unit/gm	2	
nystatin susp 100000 unit/ml	1	
nystatin tab 500000 unit	2	
nystatin topical powder 100000 unit/gm	2	
ORAVIG 50 MG TAB	4	
oxiconazole nitrate cream 1%	2	
posaconazole tab delayed release 100 mg	2	
posaconazole susp 40 mg/ml	4	
SULCONAZOLE NITRATE 1 % CREAM	4	
SULCONAZOLE NITRATE 1 % SOLUTION	4	
terbinafine hcl tab 250 mg	1	
terconazole vaginal cream 0.4%	2	
terconazole vaginal cream 0.8%	2	
terconazole vaginal suppos 80 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
voriconazole tab 200 mg	2	
voriconazole for susp 40 mg/ml	2	
voriconazole tab 50 mg	2	
ANTIGOUT AGENTS		
allopurinol tab 100 mg	1	
allopurinol tab 300 mg	1	
colchicine tab 0.6 mg	2	
colchicine w/ probenecid tab 0.5-500 mg	2	
febuxostat tab 40 mg	2	
febuxostat tab 80 mg	2	
probenecid tab 500 mg	2	
ANTIMIGRAINE AGENTS CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAGONISTS		
AIMOVIG 140 MG/ML SOLN A-INJ	3	QL 1 / 30 days PA STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)
AIMOVIG 70 MG/ML SOLN A-INJ	3	QL 1 / 30 days PA STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AJOVY 225 MG/1.5ML SOLN A-INJ	3	PA QLC 4.5 / 84 days STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)
AJOVY 225 MG/1.5ML SOLN PRSYR	3	PA QLC 4.5 / 84 days STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)
EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR	3	QL 3 / 30 days PA STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMGALITY 120 MG/ML SOLN PRSYR	3	QL 2 / 30 days PA STC Trial and failure of 3 classes: beta blocker (propranolol, timolol, metoprolol, nadolol, atenolol), antidepressant (amitriptyline, nortriptyline, venlafaxine) and antiepileptic (topiramate, valproate)
NURTEC 75 MG TAB DISP	3	QL 16 / 30 days PA
QULIPTA 10 MG TAB	4	QL 30 / 30 days PA
QULIPTA 30 MG TAB	4	QL 30 / 30 days PA
QULIPTA 60 MG TAB	4	QL 30 / 30 days PA
UBRELVY 100 MG TAB	3	QL 10 / 30 days PA
UBRELVY 50 MG TAB	3	QL 10 / 30 days PA
ERGOT ALKALOIDS		
dihydroergotamine mesylate inj 1 mg/ml	2	QL 9 / 30 days
ERGOMAR 2 MG SL TAB	4	
SEROTONIN (5-HT) RECEPTOR AGONIST		
almotriptan malate tab 12.5 mg	2	QLC 27 / 90 days
almotriptan malate tab 6.25 mg	2	QLC 27 / 90 days
eletriptan hydrobromide tab 20 mg (base equivalent)	2	QLC 27 / 90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
eletriptan hydrobromide tab 40 mg (base equivalent)	2	QLC 27 / 90 days
frovatriptan succinate tab 2.5 mg (base equivalent)	2	ST QLC 27 / 90 days STC Trial and failure of 2 therapies: naratriptan and sumatriptan, rizatriptan or zolmatriptan
naratriptan hcl tab 1 mg (base equiv)	2	QLC 27 / 90 days
naratriptan hcl tab 2.5 mg (base equiv)	2	QLC 27 / 90 days
REYVOW 100 MG TAB	4	QL 8 / 30 days PA
REYVOW 50 MG TAB	4	QL 8 / 30 days PA
rizatriptan benzoate tab 10 mg (base equivalent)	1	QL 18 / 30 days
rizatriptan benzoate oral disintegrating tab 10 mg (base eq)	1	QL 18 / 30 days
rizatriptan benzoate tab 5 mg (base equivalent)	1	QL 18 / 30 days
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1	QL 18 / 30 days
sumatriptan nasal spray 20 mg/act	2	QLC 36 / 90 days
sumatriptan nasal spray 5 mg/act	2	QLC 36 / 90 days
sumatriptan succinate tab 100 mg	1	QL 18 / 30 days
sumatriptan succinate tab 25 mg	1	QL 18 / 30 days
sumatriptan succinate solution auto-injector 4 mg/0.5ml	2	QLC 27 / 90 days
sumatriptan succinate tab 50 mg	1	QL 18 / 30 days
sumatriptan succinate solution auto-injector 6 mg/0.5ml	2	QLC 27 / 90 days
sumatriptan succinate inj 6 mg/0.5ml	2	QLC 27 / 90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zolmitriptan tab 2.5 mg	2	QLC 27 / 90 days
zolmitriptan tab 5 mg	2	QLC 27 / 90 days
zolmitriptan tab 2.5 mg	2	QLC 27 / 90 days
zolmitriptan tab 5 mg	2	QLC 27 / 90 days
ANTIMYASTHENIC AGENTS PARASYMPATHOMIMETICS		
pyridostigmine bromide tab 60 mg	2	
pyridostigmine bromide oral soln 60 mg/5ml	2	
pyridostigmine bromide tab er 180 mg	2	
ZILBRYSQ 16.6 MG/0.416ML SOLN PRSYR	5	PA S
ZILBRYSQ 23 MG/0.574ML SOLN PRSYR	5	PA S
ZILBRYSQ 32.4 MG/0.81ML SOLN PRSYR	5	PA S
ANTIMYCOBACTERIALS ANTIMYCOBACTERIALS, OTHER		
dapsone tab 100 mg	2	
dapsone tab 25 mg	2	
rifabutin cap 150 mg	2	
ANTITUBERCULARS		
CYCLOSERINE 250 MG CAP	2	
ethambutol hcl tab 100 mg	2	
ethambutol hcl tab 400 mg	2	
isoniazid tab 100 mg	2	
isoniazid tab 300 mg	1	
isoniazid syrup 50 mg/5ml	2	
PRETOMANID 200 MG TAB	4	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRIFTIN 150 MG TAB	3	
pyrazinamide tab 500 mg	2	
rifampin cap 150 mg	2	
rifampin cap 300 mg	2	
SIRTURO 100 MG TAB	5	PA S
SIRTURO 20 MG TAB	5	PA S
TRECATOR 250 MG TAB	4	
ANTINEOPLASTICS ALKYLATING AGENTS		
cyclophosphamide cap 25 mg	5	PA S
CYCLOPHOSPHAMIDE 25 MG TAB	5	PA S
cyclophosphamide cap 50 mg	5	PA S
CYCLOPHOSPHAMIDE 50 MG TAB	5	PA S
GLEOSTINE 10 MG CAP	5	PA S
GLEOSTINE 100 MG CAP	5	PA S
GLEOSTINE 40 MG CAP	5	PA S
LEUKERAN 2 MG TAB	5	PA S
MATULANE 50 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MELPHALAN 2 MG TAB	5	PA S
MYLERAN 2 MG TAB	5	PA S
temozolomide cap 100 mg	5	PA S
temozolomide cap 140 mg	5	PA S
temozolomide cap 180 mg	5	PA S
temozolomide cap 20 mg	5	PA S
temozolomide cap 250 mg	5	PA S
temozolomide cap 5 mg	5	PA S
ANTIANDROGENS		
abiraterone acetate tab 250 mg	5	S
abiraterone acetate tab 500 mg	5	S
abiraterone acetate tab 250 mg	5	S
bicalutamide tab 50 mg	5	S
ERLEADA 240 MG TAB	5	PA S
ERLEADA 60 MG TAB	5	PA S
nilutamide tab 150 mg	5	PA S
NUBEQA 300 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORSERDU 345 MG TAB	5	PA S
ORSERDU 86 MG TAB	5	PA S
XTANDI 40 MG CAP	5	PA S
XTANDI 40 MG TAB	5	PA S
XTANDI 80 MG TAB	5	PA S
YONSA 125 MG TAB	5	PA S
ANTIANGIOGENIC AGENTS		
lenalidomide cap 10 mg	5	PA S
lenalidomide cap 15 mg	5	PA S
lenalidomide caps 2.5 mg	5	PA S
lenalidomide cap 20 mg	5	PA S
lenalidomide cap 25 mg	5	PA S
lenalidomide cap 5 mg	5	PA S
POMALYST 1 MG CAP	5	PA S
POMALYST 2 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POMALYST 3 MG CAP	5	PA S
POMALYST 4 MG CAP	5	PA S
REVLIMID 10 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Revlimid
REVLIMID 15 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Revlimid
REVLIMID 2.5 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Revlimid
REVLIMID 20 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Revlimid
REVLIMID 25 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Revlimid

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THALOMID 100 MG CAP	5	PA S
THALOMID 150 MG CAP	5	PA S
THALOMID 200 MG CAP	5	PA S
THALOMID 50 MG CAP	5	PA S
ANTIESTROGENS/MODIFIERS		
EMCYT 140 MG CAP	4	PA S
SOLTAMOX 10 MG/5ML SOLUTION	4	ACA Affordable Care Act Medications
tamoxifen citrate tab 10 mg (base equivalent)	1	ACA Affordable Care Act Medications
tamoxifen citrate tab 20 mg (base equivalent)	1	ACA Affordable Care Act Medications
toremifene citrate tab 60 mg (base equivalent)	5	PA S
ANTIMETABOLITES		
capecitabine tab 150 mg	5	S
capecitabine tab 500 mg	5	S
mercaptopurine susp 2000 mg/100ml (20 mg/ml)	5	PA S
mercaptopurine tab 50 mg	5	S
ONUREG 200 MG TAB	5	PA S
ONUREG 300 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PURIXAN 2000 MG/100ML SUSPENSION	5	PA S
TABLOID 40 MG TAB	5	PA S
ANTINEOPLASTICS, OTHER		
AUGTYRO 160 MG CAP	5	PA S
AUGTYRO 40 MG CAP	5	PA S
FRUZAQLA 1 MG CAP	5	PA S
FRUZAQLA 5 MG CAP	5	PA S
hydroxyurea cap 500 mg	5	S
INQOVI 35-100 MG TAB	5	PA S
leucovorin calcium tab 10 mg	2	
leucovorin calcium tab 15 mg	2	
leucovorin calcium tab 25 mg	2	
leucovorin calcium tab 5 mg	2	
LONSURF 15-6.14 MG TAB	5	PA S
LONSURF 20-8.19 MG TAB	5	PA S
LYSODREN 500 MG TAB	5	PA S
OJJAARA 100 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OJJAARA 150 MG TAB	5	PA S
OJJAARA 200 MG TAB	5	PA S
QINLOCK 50 MG TAB	5	PA S
WELIREG 40 MG TAB	5	PA S
ZOLINZA 100 MG CAP	5	PA S
AROMATASE INHIBITORS, 3RD GENERATION		
anastrozole tab 1 mg	1	ACA Affordable Care Act Medications
exemestane tab 25 mg	2	
letrozole tab 2.5 mg	1	ACA Affordable Care Act Medications
ENZYME INHIBITORS		
ETOPOSIDE 50 MG CAP	5	PA S
HYCAMTIN 0.25 MG CAP	5	PA S
HYCAMTIN 1 MG CAP	5	PA S
MOLECULAR TARGET INHIBITORS		
ALECENSA 150 MG CAP	5	PA S
ALUNBRIG 180 MG TAB	5	PA S
ALUNBRIG 30 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALUNBRIG 90 & 180 MG TAB THPK	5	PA S
ALUNBRIG 90 MG TAB	5	PA S
AYVAKIT 100 MG TAB	5	PA S
AYVAKIT 200 MG TAB	5	PA S
AYVAKIT 25 MG TAB	5	PA S
AYVAKIT 300 MG TAB	5	PA S
AYVAKIT 50 MG TAB	5	PA S
BALVERSA 3 MG TAB	5	PA S
BALVERSA 4 MG TAB	5	PA S
BALVERSA 5 MG TAB	5	PA S
BOSULIF 100 MG CAP	5	PA S
BOSULIF 100 MG TAB	5	PA S
BOSULIF 400 MG TAB	5	PA S
BOSULIF 50 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BOSULIF 500 MG TAB	5	PA S
BRAFTOVI 75 MG CAP	5	PA S
BRUKINSA 160 MG TAB	5	PA S
BRUKINSA 80 MG CAP	5	PA S
CABOMETYX 20 MG TAB	5	PA S
CABOMETYX 40 MG TAB	5	PA S
CABOMETYX 60 MG TAB	5	PA S
CALQUENCE 100 MG TAB	5	PA S
CAPRELSA 100 MG TAB	5	PA S
CAPRELSA 300 MG TAB	5	PA S
COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT	5	PA S
COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT	5	PA S
COMETRIQ (60 MG DAILY DOSE) 20 MG KIT	5	PA S
COPIKTRA 15 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COPIKTRA 25 MG CAP	5	PA S
COTELLIC 20 MG TAB	5	PA S
dasatinib tab 100 mg	5	PA S
dasatinib tab 140 mg	5	PA S
dasatinib tab 20 mg	5	PA S
dasatinib tab 50 mg	5	PA S
dasatinib tab 70 mg	5	PA S
dasatinib tab 80 mg	5	PA S
DAURISMO 100 MG TAB	5	PA S
DAURISMO 25 MG TAB	5	PA S
ERIVEDGE 150 MG CAP	5	PA S
erlotinib hcl tab 100 mg (base equivalent)	5	PA S
erlotinib hcl tab 150 mg (base equivalent)	5	PA S
erlotinib hcl tab 25 mg (base equivalent)	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
everolimus tab 10 mg	5	PA S
everolimus tab for oral susp 2 mg	5	PA S
everolimus tab 2.5 mg	5	PA S
everolimus tab for oral susp 3 mg	5	PA S
everolimus tab 5 mg	5	PA S
everolimus tab for oral susp 5 mg	5	PA S
everolimus tab 7.5 mg	5	PA S
EXKIVITY 40 MG CAP	5	PA S
FOTIVDA 0.89 MG CAP	5	PA S
FOTIVDA 1.34 MG CAP	5	PA S
GAVRETO 100 MG CAP	5	PA S
gefitinib tab 250 mg	5	PA S
GILOTRIF 20 MG TAB	5	PA S
GILOTRIF 30 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GILOTRIF 40 MG TAB	5	PA S
GOMEKLI 1 MG CAP	5	PA S
GOMEKLI 1 MG TAB SOL	5	PA S
GOMEKLI 2 MG CAP	5	PA S
IBRANCE 100 MG CAP	5	PA S
IBRANCE 100 MG TAB	5	PA S
IBRANCE 125 MG CAP	5	PA S
IBRANCE 125 MG TAB	5	PA S
IBRANCE 75 MG CAP	5	PA S
IBRANCE 75 MG TAB	5	PA S
ICLUSIG 10 MG TAB	5	PA S
ICLUSIG 15 MG TAB	5	PA S
ICLUSIG 30 MG TAB	5	PA S
ICLUSIG 45 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IDHIFA 100 MG TAB	5	PA S
IDHIFA 50 MG TAB	5	PA S
imatinib mesylate tab 100 mg (base equivalent)	5	PA S
imatinib mesylate tab 400 mg (base equivalent)	5	PA S
IMBRUVICA 140 MG CAP	5	PA S
IMBRUVICA 140 MG TAB	5	PA S
IMBRUVICA 280 MG TAB	5	PA S
IMBRUVICA 420 MG TAB	5	PA S
IMBRUVICA 70 MG CAP	5	PA S
IMBRUVICA 70 MG/ML SUSPENSION	5	PA S
INLYTA 1 MG TAB	5	PA S
INLYTA 5 MG TAB	5	PA S
INREBIC 100 MG CAP	5	PA S
IRESSA 250 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ITOVEBI 3 MG TAB	5	PA S
ITOVEBI 9 MG TAB	5	PA S
JAKAFI 10 MG TAB	5	PA S
JAKAFI 15 MG TAB	5	PA S
JAKAFI 20 MG TAB	5	PA S
JAKAFI 25 MG TAB	5	PA S
JAKAFI 5 MG TAB	5	PA S
JAYPIRCA 100 MG TAB	5	QL 30 / 30 days PA S
JAYPIRCA 50 MG TAB	5	QL 60 / 30 days PA S
KISQALI (200 MG DOSE) 200 MG TAB THPK	5	PA S
KISQALI (400 MG DOSE) 200 MG TAB THPK	5	PA S
KISQALI (600 MG DOSE) 200 MG TAB THPK	5	PA S
KOSELUGO 10 MG CAP	5	PA S
KOSELUGO 25 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KRAZATI 200 MG TAB	5	QL 180 / 30 days PA S
lapatinib ditosylate tab 250 mg (base equiv)	5	PA S
LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK	5	PA S
LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK	5	PA S
LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK	5	PA S
LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK	5	PA S
LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK	5	PA S
LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK	5	PA S
LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK	5	PA S
LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK	5	PA S
LORBRENA 100 MG TAB	5	PA S
LORBRENA 25 MG TAB	5	PA S
LUMAKRAS 120 MG TAB	5	PA S
LUMAKRAS 240 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUMAKRAS 320 MG TAB	5	PA S
LYNPARZA 100 MG TAB	5	PA S
LYNPARZA 150 MG TAB	5	PA S
LYTGOBI (12 MG DAILY DOSE) 4 MG TAB THPK	5	PA S
LYTGOBI (16 MG DAILY DOSE) 4 MG TAB THPK	5	PA S
LYTGOBI (20 MG DAILY DOSE) 4 MG TAB THPK	5	PA S
MEKINIST 0.05 MG/ML RECON SOLN	5	PA S
MEKINIST 0.5 MG TAB	5	PA S
MEKINIST 2 MG TAB	5	PA S
MEKTOVI 15 MG TAB	5	PA S
NERLYNX 40 MG TAB	5	PA S
nilotinib hcl cap 150 mg (base equivalent)	5	PA S
nilotinib hcl cap 200 mg (base equivalent)	5	PA S
nilotinib hcl cap 50 mg (base equivalent)	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NINLARO 2.3 MG CAP	5	PA S
NINLARO 3 MG CAP	5	PA S
NINLARO 4 MG CAP	5	PA S
ODOMZO 200 MG CAP	5	PA S
OGSIVEO 100 MG TAB	5	QL 56 / 28 day(s) PA S
OGSIVEO 150 MG TAB	5	QL 56 / 28 day(s) PA S
OGSIVEO 50 MG TAB	5	QL 180 / 30 day(s) PA S
OJEMDA 100 MG TAB	5	PA S
OJEMDA 25 MG/ML RECON SUSP	5	PA S
pazopanib hcl tab 200 mg (base equiv)	5	PA S
PEMAZYRE 13.5 MG TAB	5	PA S
PEMAZYRE 4.5 MG TAB	5	PA S
PEMAZYRE 9 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK	5	PA S
PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK	5	PA S
PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK	5	PA S
RETEVMO 40 MG CAP	5	PA S
RETEVMO 80 MG CAP	5	PA S
REVUFORJ 110 MG TAB	5	PA S
REVUFORJ 160 MG TAB	5	PA S
REVUFORJ 25 MG TAB	5	PA S
REZLIDHIA 150 MG CAP	5	QL 60 / 30 days PA S
ROMVIMZA 14 MG CAP	5	QL 8 / 28 days PA S
ROMVIMZA 20 MG CAP	5	QL 8 / 28 days PA S
ROMVIMZA 30 MG CAP	5	QL 8 / 28 days PA S
ROZLYTREK 100 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ROZLYTREK 200 MG CAP	5	PA S
RUBRACA 200 MG TAB	5	PA S
RUBRACA 250 MG TAB	5	PA S
RUBRACA 300 MG TAB	5	PA S
RYDAPT 25 MG CAP	5	PA S
SCEMBLIX 20 MG TAB	5	PA S
SCEMBLIX 40 MG TAB	5	PA S
sorafenib tosylate tab 200 mg (base equivalent)	5	PA S
SPRYCEL 100 MG TAB	5	PA S
SPRYCEL 140 MG TAB	5	PA S
SPRYCEL 20 MG TAB	5	PA S
SPRYCEL 50 MG TAB	5	PA S
SPRYCEL 70 MG TAB	5	PA S
SPRYCEL 80 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STIVARGA 40 MG TAB	5	PA S
sunitinib malate cap 12.5 mg (base equivalent)	5	PA S
sunitinib malate cap 25 mg (base equivalent)	5	PA S
sunitinib malate cap 37.5 mg (base equivalent)	5	PA S
sunitinib malate cap 50 mg (base equivalent)	5	PA S
TABRECTA 150 MG TAB	5	PA S
TABRECTA 200 MG TAB	5	PA S
TAFINLAR 10 MG TAB SOL	5	PA S
TAFINLAR 50 MG CAP	5	PA S
TAFINLAR 75 MG CAP	5	PA S
TAGRISSO 40 MG TAB	5	PA S
TAGRISSO 80 MG TAB	5	PA S
TALZENNA 0.1 MG CAP	5	PA S
TALZENNA 0.25 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TALZENNA 0.35 MG CAP	5	PA S
TALZENNA 0.5 MG CAP	5	PA S
TALZENNA 0.75 MG CAP	5	PA S
TALZENNA 1 MG CAP	5	PA S
TASIGNA 150 MG CAP	5	PA S
TASIGNA 200 MG CAP	5	PA S
TASIGNA 50 MG CAP	5	PA S
TAZVERIK 200 MG TAB	5	PA S
TEPMETKO 225 MG TAB	5	PA S
TIBSOVO 250 MG TAB	5	PA S
everolimus tab 10 mg	5	PA S
everolimus tab 2.5 mg	5	PA S
everolimus tab 5 mg	5	PA S
everolimus tab 7.5 mg	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUQAP 160 MG TAB	5	PA S
TRUQAP 160 MG TAB THPK	5	PA S
TRUQAP 200 MG TAB	5	PA S
TRUQAP 200 MG TAB THPK	5	PA S
TUKYSA 150 MG TAB	5	PA S
TUKYSA 50 MG TAB	5	PA S
TURALIO 125 MG CAP	5	QL 120 / 30 days PA S
VANFLYTA 17.7 MG TAB	5	PA S
VANFLYTA 26.5 MG TAB	5	PA S
VENCLEXTA 10 MG TAB	5	PA S
VENCLEXTA 100 MG TAB	5	PA S
VENCLEXTA 50 MG TAB	5	PA S
VENCLEXTA STARTING PACK 10 & 50 & 100 MG TAB THPK	5	PA S
VERZENIO 100 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERZENIO 150 MG TAB	5	PA S
VERZENIO 200 MG TAB	5	PA S
VERZENIO 50 MG TAB	5	PA S
VIJOICE 125 MG TAB THPK	5	PA S
VIJOICE 200 & 50 MG TAB THPK	5	PA S
VIJOICE 50 MG TAB THPK	5	PA S
VITRAKVI 100 MG CAP	5	PA S
VITRAKVI 20 MG/ML SOLUTION	5	PA S
VITRAKVI 25 MG CAP	5	PA S
VIZIMPRO 15 MG TAB	5	PA S
VIZIMPRO 30 MG TAB	5	PA S
VIZIMPRO 45 MG TAB	5	PA S
VOTRIENT 200 MG TAB	5	PA S
XALKORI 200 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XALKORI 250 MG CAP	5	PA S
XOSPATA 40 MG TAB	5	PA S
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	5	PA S
XPOVIO (40 MG ONCE WEEKLY) 10 MG TAB THPK	5	PA S
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	5	PA S
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	5	PA S
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	5	PA S
XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK	5	PA S
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	5	PA S
XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK	5	PA S
ZEJULA 100 MG TAB	5	PA S
ZEJULA 200 MG TAB	5	PA S
ZEJULA 300 MG TAB	5	PA S
ZELBORAF 240 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZYDELIG 100 MG TAB	5	PA S
ZYDELIG 150 MG TAB	5	PA S
ZYKADIA 150 MG TAB	5	PA S
RETINOIDS		
bexarotene gel 1%	5	PA S
bexarotene cap 75 mg	5	PA S
PANRETIN 0.1 % GEL	5	PA S
TARGRETIN 1 % GEL	5	PA ST S STC Trial and failure of 1 therapy: generic Targretin
tretinoin cap 10 mg	5	PA S
TREATMENT ADJUNCTS		
mesna tab 400 mg	3	
MESNEX 400 MG TAB	3	
VONJO 100 MG CAP	5	PA S
ANTIPARASITICS ANTHELMINTHICS		
albendazole tab 200 mg	2	
EMVERM 100 MG CHEW TAB	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ivermectin tab 3 mg	2	
IVERMECTIN 6 MG TAB	2	
praziquantel tab 600 mg	2	
ANTIPROTOZOALS		
ALINIA 100 MG/5ML RECON SUSP	3	ST STC Trial and failure of 1 therapy: generic Alinia
atovaquone susp 750 mg/5ml	2	
atovaquone-proguanil hcl tab 250-100 mg	2	
atovaquone-proguanil hcl tab 62.5-25 mg	2	
BENZNIDAZOLE 100 MG TAB	3	
BENZNIDAZOLE 12.5 MG TAB	3	
CHLOROQUINE PHOSPHATE 250 MG TAB	2	
chloroquine phosphate tab 250 mg	2	
chloroquine phosphate tab 500 mg	2	
COARTEM 20-120 MG TAB	4	
hydroxychloroquine sulfate tab 100 mg	2	
hydroxychloroquine sulfate tab 200 mg	2	
hydroxychloroquine sulfate tab 300 mg	2	
hydroxychloroquine sulfate tab 400 mg	2	
IMPAVIDO 50 MG CAP	5	PA S
KRINTAFEL 150 MG TAB	4	
LAMPIT 120 MG TAB	4	
LAMPIT 30 MG TAB	4	
mefloquine hcl tab 250 mg	2	
nitazoxanide tab 500 mg	2	
pentamidine isethionate for nebulization soln 300 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
primaquine phosphate tab 26.3 mg (15 mg base)	2	
pyrimethamine tab 25 mg	2	
quinine sulfate cap 324 mg	2	
ANTIPARKINSON AGENTS ANTICHOLINERGICS		
benztropine mesylate tab 0.5 mg	1	
benztropine mesylate tab 1 mg	1	
benztropine mesylate tab 2 mg	1	
TRIHEXYPHENIDYL HCL 0.4 MG/ML SOLUTION	4	
trihexyphenidyl hcl tab 2 mg	1	
trihexyphenidyl hcl tab 5 mg	1	
ANTIPARKINSON AGENTS, OTHER		
amantadine hcl cap 100 mg	2	
amantadine hcl soln 50 mg/5ml	2	
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	2	
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	2	
carbidopa-levodopa-entacapone tabs 25-100-200 mg	2	
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	2	
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	2	
carbidopa-levodopa-entacapone tabs 50-200-200 mg	2	
entacapone tab 200 mg	2	
NOURIANZ 20 MG TAB	5	PA S
NOURIANZ 40 MG TAB	5	PA S
tolcapone tab 100 mg	2	
DOPAMINE AGONISTS		
APOKYN 30 MG/3ML SOLN CART	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
apomorphine hcl soln cartridge 30 mg/3ml	5	PA S
bromocriptine mesylate tab 2.5 mg (base equivalent)	2	
bromocriptine mesylate cap 5 mg (base equivalent)	2	
NEUPRO 1 MG/24HR PATCH 24HR	4	
NEUPRO 2 MG/24HR PATCH 24HR	4	
NEUPRO 3 MG/24HR PATCH 24HR	4	
NEUPRO 4 MG/24HR PATCH 24HR	4	
NEUPRO 6 MG/24HR PATCH 24HR	4	
NEUPRO 8 MG/24HR PATCH 24HR	4	
pramipexole dihydrochloride tab 0.125 mg	1	
pramipexole dihydrochloride tab 0.25 mg	1	
pramipexole dihydrochloride tab 0.5 mg	1	
pramipexole dihydrochloride tab 0.75 mg	1	
pramipexole dihydrochloride tab 1 mg	1	
pramipexole dihydrochloride tab 1.5 mg	1	
ropinirole hydrochloride tab 0.25 mg	1	
ropinirole hydrochloride tab 0.5 mg	1	
ropinirole hydrochloride tab 1 mg	1	
ropinirole hydrochloride tab 2 mg	1	
ropinirole hydrochloride tab 3 mg	1	
ropinirole hydrochloride tab 4 mg	1	
ropinirole hydrochloride tab 5 mg	1	
ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)	2	
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)	2	
ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)	2	
ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)	2	
DOPAMINE PRECURSORS AND/OR L-AMINO ACID DECARBOXYLASE INHIBITORS		
carbidopa tab 25 mg	2	
carbidopa & levodopa tab 10-100 mg	1	
CARBIDOPA-LEVODOPA 10-100 MG TAB DISP	4	
carbidopa & levodopa tab 25-100 mg	2	
CARBIDOPA-LEVODOPA 25-100 MG TAB DISP	4	
carbidopa & levodopa tab 25-250 mg	2	
CARBIDOPA-LEVODOPA 25-250 MG TAB DISP	4	
carbidopa & levodopa tab er 25-100 mg	2	
carbidopa & levodopa tab er 50-200 mg	2	
CREXONT 35-140 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
CREXONT 52.5-210 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
CREXONT 70-280 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
CREXONT 87.5-350 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
INBRIJA 42 MG CAP	5	PA S
RYTARY 23.75-95 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYTARY 36.25-145 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
RYTARY 48.75-195 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
RYTARY 61.25-245 MG CAP ER	4	ST STC Trial and failure of 1 therapy: generic Rytary
VYALEV 12-240 MG/ML SOLUTION	5	PA S
MONOAMINE OXIDASE B (MAO-B) INHIBITORS		
rasagiline mesylate tab 0.5 mg (base equiv)	2	
rasagiline mesylate tab 1 mg (base equiv)	2	
selegiline hcl cap 5 mg	2	
selegiline hcl tab 5 mg	2	
ANTIPSYCHOTICS 1ST GENERATION/TYPICAL		
chlorpromazine hcl tab 10 mg	2	PV Preventive
chlorpromazine hcl tab 100 mg	2	PV Preventive
chlorpromazine hcl tab 200 mg	2	PV Preventive
chlorpromazine hcl tab 25 mg	2	PV Preventive
chlorpromazine hcl tab 50 mg	2	PV Preventive
fluphenazine hcl tab 1 mg	2	PV Preventive
fluphenazine hcl tab 10 mg	2	PV Preventive
fluphenazine hcl tab 2.5 mg	2	PV Preventive
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR	4	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluphenazine hcl tab 5 mg	2	PV Preventive
FLUPHENAZINE HCL 5 MG/ML CONC	4	PV Preventive
haloperidol tab 0.5 mg	1	PV Preventive
haloperidol tab 1 mg	1	PV Preventive
haloperidol tab 10 mg	2	PV Preventive
haloperidol tab 2 mg	2	PV Preventive
haloperidol tab 20 mg	2	PV Preventive
haloperidol tab 5 mg	2	PV Preventive
haloperidol lactate oral conc 2 mg/ml	2	PV Preventive
loxapine succinate cap 10 mg	2	PV Preventive
loxapine succinate cap 25 mg	2	PV Preventive
loxapine succinate cap 5 mg	2	PV Preventive
loxapine succinate cap 50 mg	2	PV Preventive
MOLINDONE HCL 10 MG TAB	4	PV Preventive
MOLINDONE HCL 25 MG TAB	4	PV Preventive
MOLINDONE HCL 5 MG TAB	4	PV Preventive
PIMOZIDE 1 MG TAB	4	
PIMOZIDE 2 MG TAB	4	
thioridazine hcl tab 10 mg	2	PV Preventive
thioridazine hcl tab 100 mg	2	PV Preventive
thioridazine hcl tab 25 mg	2	PV Preventive
thioridazine hcl tab 50 mg	2	PV Preventive
thiothixene cap 1 mg	2	PV Preventive
thiothixene cap 10 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
thiothixene cap 2 mg	2	PV Preventive
thiothixene cap 5 mg	2	PV Preventive
trifluoperazine hcl tab 1 mg (base equivalent)	2	PV Preventive
trifluoperazine hcl tab 10 mg (base equivalent)	2	PV Preventive
trifluoperazine hcl tab 2 mg (base equivalent)	2	PV Preventive
trifluoperazine hcl tab 5 mg (base equivalent)	2	PV Preventive
2ND GENERATION/ATYPICAL		
ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR	5	PA S PV Preventive
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	5	PA S PV Preventive
ABILIFY MAINTENA 300 MG PRSYR	5	PA S PV Preventive
ABILIFY MAINTENA 300 MG SRER	5	PA S PV Preventive
ABILIFY MAINTENA 400 MG PRSYR	5	PA S PV Preventive
ABILIFY MAINTENA 400 MG SRER	5	PA S PV Preventive
aripiprazole oral solution 1 mg/ml	2	PV Preventive
aripiprazole tab 10 mg	1	PV Preventive
aripiprazole orally disintegrating tab 10 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aripiprazole tab 15 mg	1	PV Preventive
aripiprazole orally disintegrating tab 15 mg	2	PV Preventive
aripiprazole tab 2 mg	1	PV Preventive
aripiprazole tab 20 mg	2	PV Preventive
aripiprazole tab 30 mg	2	PV Preventive
aripiprazole tab 5 mg	1	PV Preventive
ARISTADA 1064 MG/3.9ML PRSYR	5	PA S PV Preventive
ARISTADA 441 MG/1.6ML PRSYR	5	PA S PV Preventive
ARISTADA 662 MG/2.4ML PRSYR	5	PA S PV Preventive
ARISTADA 882 MG/3.2ML PRSYR	5	PA S PV Preventive
ARISTADA INITIO 675 MG/2.4ML PRSYR	5	PA S PV Preventive
asenapine maleate sl tab 10 mg (base equiv)	2	PV Preventive
asenapine maleate sl tab 2.5 mg (base equiv)	2	PV Preventive
asenapine maleate sl tab 5 mg (base equiv)	2	PV Preventive
FANAPT 1 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FANAPT 10 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT 12 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT 2 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT 4 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT 6 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT 8 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT TITRATION PACK A 1 & 2 & 4 & 6 MG TAB	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
FANAPT TITRATION PACK B 1 & 2 & 6 & 8 MG TAB	4	ST PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FANAPT TITRATION PACK C 1 & 2 & 6 MG TAB	4	ST STC Trial And Failure Of 2 Therapies: Any Two Generic Antipsychotic PV Preventive
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	5	PA S PV Preventive
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	5	PA S PV Preventive
INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR	5	PA S PV Preventive
INVEGA SUSTENNA 156 MG/ML SUSP PRSYR	5	PA S PV Preventive
INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR	5	PA S PV Preventive
INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR	5	PA S PV Preventive
INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR	5	PA S PV Preventive
INVEGA TRINZA 273 MG/0.88ML SUSP PRSYR	5	PA S PV Preventive
INVEGA TRINZA 410 MG/1.32ML SUSP PRSYR	5	PA S PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR	5	PA S PV Preventive
INVEGA TRINZA 819 MG/2.63ML SUSP PRSYR	5	PA S PV Preventive
lurasidone hcl tab 120 mg	2	PV Preventive
lurasidone hcl tab 20 mg	2	PV Preventive
lurasidone hcl tab 40 mg	2	PV Preventive
lurasidone hcl tab 60 mg	2	PV Preventive
lurasidone hcl tab 80 mg	2	PV Preventive
NUPLAZID 10 MG TAB	5	PA S
NUPLAZID 34 MG CAP	5	PA S
olanzapine tab 10 mg	1	PV Preventive
olanzapine orally disintegrating tab 10 mg	2	PV Preventive
olanzapine tab 15 mg	1	PV Preventive
olanzapine orally disintegrating tab 15 mg	2	PV Preventive
olanzapine tab 2.5 mg	1	PV Preventive
olanzapine tab 20 mg	1	PV Preventive
olanzapine orally disintegrating tab 20 mg	2	PV Preventive
olanzapine tab 5 mg	1	PV Preventive
olanzapine orally disintegrating tab 5 mg	2	PV Preventive
olanzapine tab 7.5 mg	1	PV Preventive
paliperidone tab er 24hr 1.5 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
paliperidone tab er 24hr 3 mg	2	PV Preventive
paliperidone tab er 24hr 6 mg	2	PV Preventive
paliperidone tab er 24hr 9 mg	2	PV Preventive
PERSERIS 120 MG PRSYR	5	PA S PV Preventive
PERSERIS 90 MG PRSYR	5	PA S PV Preventive
quetiapine fumarate tab 100 mg	1	PV Preventive
quetiapine fumarate tab 200 mg	1	PV Preventive
quetiapine fumarate tab 25 mg	1	PV Preventive
quetiapine fumarate tab 300 mg	1	PV Preventive
quetiapine fumarate tab 400 mg	1	PV Preventive
quetiapine fumarate tab 50 mg	1	PV Preventive
quetiapine fumarate tab er 24hr 150 mg	1	PV Preventive
quetiapine fumarate tab er 24hr 200 mg	2	PV Preventive
quetiapine fumarate tab er 24hr 300 mg	2	PV Preventive
quetiapine fumarate tab er 24hr 400 mg	2	PV Preventive
quetiapine fumarate tab er 24hr 50 mg	2	PV Preventive
REXULTI 0.25 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
REXULTI 0.5 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REXULTI 1 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
REXULTI 2 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
REXULTI 3 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
REXULTI 4 MG TAB	3	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive
RISPERDAL CONSTA 12.5 MG SRER	5	PA S PV Preventive
RISPERDAL CONSTA 25 MG SRER	5	PA S PV Preventive
RISPERDAL CONSTA 37.5 MG SRER	5	PA S PV Preventive
RISPERDAL CONSTA 50 MG SRER	5	PA S PV Preventive
risperidone tab 0.25 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RISPERIDONE 0.25 MG TAB DISP	4	PV Preventive
risperidone tab 0.5 mg	1	PV Preventive
risperidone orally disintegrating tab 0.5 mg	2	PV Preventive
risperidone tab 1 mg	1	PV Preventive
risperidone orally disintegrating tab 1 mg	2	PV Preventive
risperidone soln 1 mg/ml	2	PV Preventive
risperidone tab 2 mg	1	PV Preventive
risperidone orally disintegrating tab 2 mg	2	PV Preventive
risperidone tab 3 mg	1	PV Preventive
risperidone orally disintegrating tab 3 mg	2	PV Preventive
risperidone tab 4 mg	1	PV Preventive
risperidone orally disintegrating tab 4 mg	2	PV Preventive
risperidone microspheres for im extended rel susp 12.5 mg	5	PA S PV Preventive
risperidone microspheres for im extended rel susp 25 mg	5	PA S PV Preventive
risperidone microspheres for im extended rel susp 37.5 mg	5	PA S PV Preventive
risperidone microspheres for im extended rel susp 50 mg	5	PA S PV Preventive
SECUADO 3.8 MG/24HR PATCH 24HR	4	ST STC Trial and failure of 1 therapy: Latuda PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SECUADO 5.7 MG/24HR PATCH 24HR	4	ST STC Trial and failure of 1 therapy: Latuda PV Preventive
SECUADO 7.6 MG/24HR PATCH 24HR	4	ST STC Trial and failure of 1 therapy: Latuda PV Preventive
UZEDY 100 MG/0.28ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 125 MG/0.35ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 150 MG/0.42ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 200 MG/0.56ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 250 MG/0.7ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 50 MG/0.14ML SUSP PRSYR	5	PA S PV Preventive
UZEDY 75 MG/0.21ML SUSP PRSYR	5	PA S PV Preventive
VRAYLAR 1.5 & 3 MG CAP THPK	4	ST STC Trial and failure of 2 therapies: any two generic antipsychotic PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VRAYLAR 1.5 MG CAP	4	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Antipsychotics PV Preventive
VRAYLAR 3 MG CAP	4	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Antipsychotics PV Preventive
VRAYLAR 4.5 MG CAP	4	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Antipsychotics PV Preventive
VRAYLAR 6 MG CAP	4	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Antipsychotics PV Preventive
ziprasidone hcl cap 20 mg	2	PV Preventive
ziprasidone hcl cap 40 mg	2	PV Preventive
ziprasidone hcl cap 60 mg	2	PV Preventive
ziprasidone hcl cap 80 mg	2	PV Preventive
ZYPREXA RELPREVV 210 MG RECON SUSP	5	PA S PV Preventive
ZYPREXA RELPREVV 300 MG RECON SUSP	5	PA S PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZYPREXA RELPREVV 405 MG RECON SUSP	5	PA S PV Preventive
ANTIPSYCHOTICS, OTHER		
COBENFY 100-20 MG CAP	4	QL 60 / 30 days ST STC Trial and Failure of 2 generic antipsychotics (e.g., aripiprazole, quetiapine, risperidone)
COBENFY 125-30 MG CAP	4	QL 60 / 30 days ST STC Trial and Failure of 2 generic antipsychotics (e.g., aripiprazole, quetiapine, risperidone)
COBENFY 50-20 MG CAP	4	QL 60 / 30 days ST STC Trial and Failure of 2 generic antipsychotics (e.g., aripiprazole, quetiapine, risperidone)
COBENFY STARTER PACK 50-20 & 100-20 MG CAP THPK	4	ST QLC 56 / 180 days STC Trial and Failure of 2 generic antipsychotics (e.g., aripiprazole, quetiapine, risperidone)
TREATMENT-RESISTANT		
clozapine tab 100 mg	2	PV Preventive
clozapine orally disintegrating tab 100 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLOZAPINE 12.5 MG TAB DISP	4	PV Preventive
clozapine orally disintegrating tab 150 mg	2	PV Preventive
clozapine tab 200 mg	2	PV Preventive
clozapine orally disintegrating tab 200 mg	2	PV Preventive
clozapine tab 25 mg	1	PV Preventive
clozapine orally disintegrating tab 25 mg	2	PV Preventive
clozapine tab 50 mg	2	PV Preventive
ANTISPASTICITY AGENTS		
baclofen tab 10 mg	1	
baclofen tab 20 mg	1	
dantrolene sodium cap 100 mg	2	
dantrolene sodium cap 25 mg	2	
dantrolene sodium cap 50 mg	2	
tizanidine hcl tab 2 mg (base equivalent)	1	QL 270 / 30 days
tizanidine hcl tab 4 mg (base equivalent)	1	QL 270 / 30 days
ANTIVIRALS ANTI-CYTOMEGALOVIRUS (CMV) AGENTS		
FOSCAVIR 6000 MG/250ML SOLUTION	5	PA S
LIVTENCITY 200 MG TAB	5	QL 120 / 30 days PA S
PREVYMIS 120 MG PACKET	5	PA S
PREVYMIS 20 MG PACKET	5	PA S
PREVYMIS 240 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVYMIS 240 MG/12ML SOLUTION	5	PA S
PREVYMIS 480 MG TAB	5	PA S
PREVYMIS 480 MG/24ML SOLUTION	5	PA S
VALCYTE 450 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Valcyte
VALCYTE 50 MG/ML RECON SOLN	5	PA ST S STC Trial and failure of 1 therapy: generic Valcyte
valganciclovir hcl tab 450 mg (base equivalent)	2	
valganciclovir hcl for soln 50 mg/ml (base equiv)	2	
ANTI-HEPATITIS B (HBV) AGENTS		
adefovir dipivoxil tab 10 mg	2	
BARACLUDE 0.05 MG/ML SOLUTION	5	PA S
entecavir tab 0.5 mg	2	
entecavir tab 1 mg	2	
lamivudine tab 100 mg (hbv)	2	
VEMLIDY 25 MG TAB	5	PA S
ANTI-HEPATITIS C (HCV) AGENTS		
EPCLUSA 150-37.5 MG PACKET	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPCLUSA 200-50 MG PACKET	5	PA S
EPCLUSA 200-50 MG TAB	5	PA S
HARVONI 33.75-150 MG PACKET	5	PA S
HARVONI 45-200 MG PACKET	5	PA S
HARVONI 45-200 MG TAB	5	PA S
LEDIPASVIR-SOFOSBUVIR 90-400 MG TAB	5	PA S
MAVYRET 100-40 MG TAB	5	PA S
MAVYRET 50-20 MG PACKET	5	PA S
RIBAVIRIN 200 MG CAP	5	PA S
RIBAVIRIN 200 MG TAB	5	PA S
SOFOSBUVIR-VELPATASVIR 400-100 MG TAB	5	PA S
SOVALDI 150 MG PACKET	5	PA S
SOVALDI 200 MG PACKET	5	PA S
SOVALDI 200 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOVALDI 400 MG TAB	5	PA S
VOSEVI 400-100-100 MG TAB	5	PA S
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI)		
BIKTARVY 30-120-15 MG TAB	3	
BIKTARVY 50-200-25 MG TAB	3	
DOVATO 50-300 MG TAB	3	
GENVOYA 150-150-200-10 MG TAB	3	
ISENTRESS 100 MG CHEW TAB	3	
ISENTRESS 100 MG PACKET	3	
ISENTRESS 25 MG CHEW TAB	3	
ISENTRESS 400 MG TAB	3	
ISENTRESS HD 600 MG TAB	3	
JULUCA 50-25 MG TAB	3	
STRIBILD 150-150-200-300 MG TAB	3	
TIVICAY 10 MG TAB	3	
TIVICAY 25 MG TAB	3	
TIVICAY 50 MG TAB	3	
TIVICAY PD 5 MG TAB SOL	3	
ANTI-HIV AGENTS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NNRTI)		
COMPLERA 200-25-300 MG TAB	3	
DELSTRIGO 100-300-300 MG TAB	3	
EDURANT 25 MG TAB	4	
EDURANT PED 2.5 MG TAB SOL	4	
EFAVIRENZ 200 MG CAP	4	
EFAVIRENZ 50 MG CAP	4	
efavirenz tab 600 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	2	
EFAVIRENZ-LAMIVUDINE-TENOFOVIR 400-300-300 MG TAB	2	
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	2	
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	3	
etravirine tab 100 mg	2	
etravirine tab 200 mg	2	
INTELENCE 25 MG TAB	3	
nevirapine tab 200 mg	1	
NEVIRAPINE 50 MG/5ML SUSPENSION	4	
NEVIRAPINE ER 100 MG TAB ER 24H	4	
nevirapine tab er 24hr 400 mg	2	
ODEFSEY 200-25-25 MG TAB	3	
ANTI-HIV AGENTS, NUCLEOSIDE AND NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI)		
abacavir sulfate soln 20 mg/ml (base equiv)	2	
abacavir sulfate tab 300 mg (base equiv)	2	
abacavir sulfate-lamivudine tab 600-300 mg	2	
CIMDUO 300-300 MG TAB	3	
DESCOVY 120-15 MG TAB	3	QL 30 / 30 days
DESCOVY 200-25 MG TAB	3	ACA Affordable Care Act Medications
emtricitabine caps 200 mg	2	
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg	2	
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	2	
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	2	
emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMTRIVA 10 MG/ML SOLUTION	4	
lamivudine oral soln 10 mg/ml	2	
lamivudine tab 150 mg	2	
lamivudine tab 300 mg	2	
lamivudine oral soln 10 mg/ml	2	
lamivudine-zidovudine tab 150-300 mg	2	
tenofovir disoproxil fumarate tab 300 mg	2	
TRIUMEQ 600-50-300 MG TAB	3	
TRIUMEQ PD 60-5-30 MG TAB SOL	3	
TRIZIVIR 300-150-300 MG TAB	4	ST STC Trial and failure of 1 therapy: generic Trizivir
VIREAD 150 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Viread
VIREAD 200 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Viread
VIREAD 250 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Viread
VIREAD 300 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Viread

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIREAD 40 MG/GM POWDER	3	
zidovudine cap 100 mg	2	
zidovudine tab 300 mg	2	
zidovudine syrup 10 mg/ml	2	
ANTI-HIV AGENTS, OTHER		
FUZEON 90 MG RECON SOLN	5	PA S
maraviroc tab 150 mg	2	
maraviroc tab 300 mg	2	
RUKOBIA 600 MG TAB ER 12H	4	
SELZENTRY 20 MG/ML SOLUTION	4	
SELZENTRY 25 MG TAB	4	
SELZENTRY 75 MG TAB	4	
SUNLENCA 300 MG TAB	5	PA S
SUNLENCA 4 X 300 MG TAB THPK	5	PA S
SUNLENCA 463.5 MG/1.5ML SOLUTION	5	PA S
SUNLENCA 5 X 300 MG TAB THPK	5	PA S
TYBOST 150 MG TAB	4	
ANTI-HIV AGENTS, PROTEASE INHIBITORS (PI)		
APTIVUS 250 MG CAP	4	
atazanavir sulfate cap 150 mg (base equiv)	2	
atazanavir sulfate cap 200 mg (base equiv)	2	
atazanavir sulfate cap 300 mg (base equiv)	2	
darunavir tab 600 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
darunavir tab 800 mg	2	
EVOTAZ 300-150 MG TAB	3	
fosamprenavir calcium tab 700 mg (base equiv)	2	
LEXIVA 50 MG/ML SUSPENSION	4	
lopinavir-ritonavir tab 100-25 mg	2	
lopinavir-ritonavir tab 200-50 mg	2	
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	2	
NORVIR 100 MG PACKET	4	
PREZCOBIX 675-150 MG TAB	3	
PREZCOBIX 800-150 MG TAB	3	
PREZISTA 100 MG/ML SUSPENSION	4	
PREZISTA 150 MG TAB	4	
PREZISTA 75 MG TAB	4	
REYATAZ 50 MG PACKET	4	
ritonavir tab 100 mg	2	
SYMTUZA 800-150-200-10 MG TAB	3	
VIRACEPT 250 MG TAB	4	
VIRACEPT 625 MG TAB	4	
ANTI-INFLUENZA AGENTS		
oseltamivir phosphate cap 30 mg (base equiv)	2	
oseltamivir phosphate cap 45 mg (base equiv)	2	
oseltamivir phosphate for susp 6 mg/ml (base equiv)	2	
oseltamivir phosphate cap 75 mg (base equiv)	2	
RELENZA DISKHALER 5 MG/ACT AER POW BA	4	
XENLETA 600 MG TAB	5	PA S
XOFLUZA (40 MG DOSE) 1 X 40 MG TAB THPK	4	
XOFLUZA (80 MG DOSE) 1 X 80 MG TAB THPK	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIHERPETIC AGENTS		
acyclovir cap 200 mg	1	
acyclovir susp 200 mg/5ml	2	
acyclovir tab 400 mg	1	
acyclovir tab 800 mg	1	
acyclovir susp 200 mg/5ml	2	
famciclovir tab 125 mg	2	
famciclovir tab 250 mg	2	
famciclovir tab 500 mg	2	
valacyclovir hcl tab 1 gm	2	
valacyclovir hcl tab 500 mg	1	
ANTIVIRAL, CORONAVIRUS AGENTS		
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	3	ACA Affordable Care Act Medications
PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK	3	
PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK	3	
PAXLOVID 6 X 150 MG & 5 X 100MG TAB THPK	3	
ANXIOLYTICS ANXIOLYTICS, OTHER		
buspirone hcl tab 10 mg	1	
buspirone hcl tab 15 mg	1	
buspirone hcl tab 30 mg	2	
buspirone hcl tab 5 mg	1	
hydroxyzine hcl tab 10 mg	1	
hydroxyzine hcl syrup 10 mg/5ml	2	
hydroxyzine hcl tab 25 mg	1	
hydroxyzine hcl tab 50 mg	1	
HYDROXYZINE PAMOATE 100 MG CAP	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
hydroxyzine pamoate cap 25 mg	1	
hydroxyzine pamoate cap 50 mg	1	
meprobamate tab 200 mg	2	
meprobamate tab 400 mg	2	
BENZODIAZEPINES		
alprazolam tab 0.25 mg	1	QL 120 / 30 days
alprazolam tab 0.5 mg	1	QL 120 / 30 days
alprazolam tab 1 mg	1	QL 120 / 30 days
alprazolam tab 2 mg	1	QL 120 / 30 days
alprazolam tab er 24hr 0.5 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 1 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 2 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 3 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 0.5 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 1 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 2 mg	1	QL 60 / 30 days
alprazolam tab er 24hr 3 mg	1	QL 60 / 30 days
chlordiazepoxide hcl cap 10 mg	1	QL 120 / 30 days
chlordiazepoxide hcl cap 25 mg	1	QL 120 / 30 days
chlordiazepoxide hcl cap 5 mg	1	QL 120 / 30 days
clonazepam orally disintegrating tab 0.125 mg	2	QL 90 / 30 days PV Preventive
clonazepam orally disintegrating tab 0.25 mg	2	QL 90 / 30 days PV Preventive
clonazepam tab 0.5 mg	1	QL 90 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
clonazepam orally disintegrating tab 0.5 mg	2	QL 90 / 30 days PV Preventive
clonazepam tab 1 mg	1	QL 90 / 30 days PV Preventive
clonazepam orally disintegrating tab 1 mg	2	QL 90 / 30 days PV Preventive
clonazepam tab 2 mg	1	QL 90 / 30 days PV Preventive
clonazepam orally disintegrating tab 2 mg	2	QL 90 / 30 days PV Preventive
clorazepate dipotassium tab 15 mg	2	QL 180 / 30 days
clorazepate dipotassium tab 3.75 mg	2	QL 180 / 30 days
clorazepate dipotassium tab 7.5 mg	2	QL 180 / 30 days
diazepam tab 10 mg	1	QL 120 / 30 days
diazepam tab 2 mg	1	QL 120 / 30 days
diazepam tab 5 mg	1	QL 120 / 30 days
diazepam oral soln 1 mg/ml	1	QL 600 / 30 days
diazepam conc 5 mg/ml	2	QL 120 / 30 days
diazepam conc 5 mg/ml	2	QL 120 / 30 days
lorazepam tab 0.5 mg	1	QL 120 / 30 days
lorazepam tab 1 mg	1	QL 120 / 30 days
lorazepam tab 2 mg	1	QL 120 / 30 days
lorazepam conc 2 mg/ml	2	QL 120 / 30 days
lorazepam conc 2 mg/ml	2	QL 120 / 30 days
oxazepam cap 10 mg	2	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
oxazepam cap 15 mg	2	QL 120 / 30 days
oxazepam cap 30 mg	2	QL 120 / 30 days
BIPOLAR AGENTS MOOD STABILIZERS		
lithium oral solution 8 meq/5ml	2	PV Preventive
LITHIUM CARBONATE 150 MG CAP	4	PV Preventive
lithium carbonate cap 150 mg	1	PV Preventive
LITHIUM CARBONATE 300 MG CAP	4	PV Preventive
lithium carbonate cap 300 mg	1	PV Preventive
lithium carbonate tab 300 mg	1	PV Preventive
LITHIUM CARBONATE 600 MG CAP	4	PV Preventive
lithium carbonate cap 600 mg	1	PV Preventive
lithium carbonate tab er 300 mg	1	PV Preventive
lithium carbonate tab er 450 mg	1	PV Preventive
BLOOD GLUCOSE REGULATORS ANTIDIABETIC AGENTS		
acarbose tab 100 mg	2	PV Preventive
acarbose tab 25 mg	2	PV Preventive
acarbose tab 50 mg	2	PV Preventive
DAPAGLIFLOZIN PRO-METFORMIN ER 10-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
DAPAGLIFLOZIN PRO-METFORMIN ER 5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glimepiride tab 1 mg	1	PV Preventive
glimepiride tab 2 mg	1	PV Preventive
glimepiride tab 4 mg	1	PV Preventive
glipizide tab 10 mg	1	PV Preventive
GLIPIZIDE 2.5 MG TAB	4	PV Preventive
glipizide tab 5 mg	1	PV Preventive
glipizide tab er 24hr 10 mg	1	PV Preventive
glipizide tab er 24hr 2.5 mg	1	PV Preventive
glipizide tab er 24hr 5 mg	1	PV Preventive
glipizide tab er 24hr 10 mg	1	PV Preventive
glipizide tab er 24hr 2.5 mg	1	PV Preventive
glipizide tab er 24hr 5 mg	1	PV Preventive
glipizide-metformin hcl tab 2.5-250 mg	2	PV Preventive
glipizide-metformin hcl tab 2.5-500 mg	2	PV Preventive
glipizide-metformin hcl tab 5-500 mg	2	PV Preventive
glyburide tab 1.25 mg	1	PV Preventive
glyburide tab 2.5 mg	1	PV Preventive
glyburide tab 5 mg	1	PV Preventive
GLYBURIDE MICRONIZED 1.5 MG TAB	1	PV Preventive
GLYBURIDE MICRONIZED 3 MG TAB	1	PV Preventive
GLYBURIDE MICRONIZED 6 MG TAB	1	PV Preventive
glyburide-metformin tab 1.25-250 mg	1	PV Preventive
glyburide-metformin tab 2.5-500 mg	1	PV Preventive
glyburide-metformin tab 5-500 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLYXAMBI 10-5 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
GLYXAMBI 25-5 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	4	PA PV Preventive
metformin hcl tab 1000 mg	1	PV Preventive
metformin hcl tab 500 mg	1	PV Preventive
metformin hcl tab 850 mg	1	PV Preventive
metformin hcl tab er 24hr 500 mg	1	PV Preventive
metformin hcl tab er 24hr 750 mg	1	PV Preventive
MIGLITOL 100 MG TAB	2	PV Preventive
MIGLITOL 25 MG TAB	2	PV Preventive
MIGLITOL 50 MG TAB	2	PV Preventive
MOUNJARO 10 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive
MOUNJARO 12.5 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive
MOUNJARO 15 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive
MOUNJARO 2.5 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOUNJARO 5 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive
MOUNJARO 7.5 MG/0.5ML SOLN A-INJ	3	QL 2 / 28 day(s) PA PV Preventive
nateglinide tab 120 mg	2	PV Preventive
nateglinide tab 60 mg	2	PV Preventive
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN	3	PA PV Preventive
OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN	3	PA PV Preventive
OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN	3	PA PV Preventive
pioglitazone hcl tab 15 mg (base equiv)	1	PV Preventive
pioglitazone hcl tab 30 mg (base equiv)	1	PV Preventive
pioglitazone hcl tab 45 mg (base equiv)	1	PV Preventive
pioglitazone hcl-metformin hcl tab 15-500 mg	2	PV Preventive
pioglitazone hcl-metformin hcl tab 15-850 mg	2	PV Preventive
repaglinide tab 0.5 mg	2	PV Preventive
repaglinide tab 1 mg	2	PV Preventive
repaglinide tab 2 mg	2	PV Preventive
RYBELSUS 14 MG TAB	4	PA PV Preventive
RYBELSUS 3 MG TAB	4	PA PV Preventive
RYBELSUS 7 MG TAB	4	PA PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SITAGLIPTIN 100 MG TAB	1	ST STC Trial and failure of 1 therapy: metformin PV Preventive
SITAGLIPTIN 25 MG TAB	1	ST STC Trial and failure of 1 therapy: metformin PV Preventive
SITAGLIPTIN 50 MG TAB	1	ST STC Trial and failure of 1 therapy: metformin PV Preventive
SYNJARDY 12.5-1000 MG TAB	3	PV Preventive
SYNJARDY 12.5-500 MG TAB	3	PV Preventive
SYNJARDY 5-1000 MG TAB	3	PV Preventive
SYNJARDY 5-500 MG TAB	3	PV Preventive
SYNJARDY XR 10-1000 MG TAB ER 24H	3	PV Preventive
SYNJARDY XR 12.5-1000 MG TAB ER 24H	3	PV Preventive
SYNJARDY XR 25-1000 MG TAB ER 24H	3	PV Preventive
SYNJARDY XR 5-1000 MG TAB ER 24H	3	PV Preventive
TRIJARDY XR 10-5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
TRIJARDY XR 25-5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIJARDY XR 5-2.5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
TRULICITY 0.75 MG/0.5ML SOLN A-INJ	3	PA PV Preventive
TRULICITY 1.5 MG/0.5ML SOLN A-INJ	3	PA PV Preventive
TRULICITY 3 MG/0.5ML SOLN A-INJ	3	PA PV Preventive
TRULICITY 4.5 MG/0.5ML SOLN A-INJ	3	PA PV Preventive
VICTOZA 18 MG/3ML SOLN PEN	4	PA PV Preventive
XIGDUO XR 10-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
XIGDUO XR 10-500 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
XIGDUO XR 2.5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
XIGDUO XR 5-1000 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
XIGDUO XR 5-500 MG TAB ER 24H	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLYCEMIC AGENTS		
BAQSIMI ONE PACK 3 MG/DOSE POWDER	3	PV Preventive
BAQSIMI TWO PACK 3 MG/DOSE POWDER	3	PV Preventive
diazoxide susp 50 mg/ml	2	PV Preventive
FT GLUCOSE 4 GM CHEW TAB	3	
glucagon (rdna) for inj kit 1 mg	2	PV Preventive
GLUCAGON EMERGENCY 1 MG/ML RECON SOLN	3	PV Preventive
GVOKE HYPOPEN 1-PACK 0.5 MG/0.1ML SOLN A-INJ	3	PV Preventive
GVOKE HYPOPEN 1-PACK 1 MG/0.2ML SOLN A-INJ	3	PV Preventive
GVOKE HYPOPEN 2-PACK 0.5 MG/0.1ML SOLN A-INJ	3	PV Preventive
GVOKE HYPOPEN 2-PACK 1 MG/0.2ML SOLN A-INJ	3	PV Preventive
GVOKE KIT 1 MG/0.2ML SOLUTION	3	PV Preventive
GVOKE PFS 0.5 MG/0.1ML SOLN PRSYR	3	PV Preventive
GVOKE PFS 1 MG/0.2ML SOLN PRSYR	3	PV Preventive
INSULINS		
FIASP 100 UNIT/ML SOLUTION	3	PV Preventive
FIASP FLEXTOUCH 100 UNIT/ML SOLN PEN	3	PV Preventive
FIASP PENFILL 100 UNIT/ML SOLN CART	3	PV Preventive
FIASP PUMPCART 100 UNIT/ML SOLN CART	3	PV Preventive
HUMALOG 100 UNIT/ML SOLN CART	4	PV Preventive
HUMALOG 100 UNIT/ML SOLUTION	4	PV Preventive
HUMALOG JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN	4	PV Preventive
HUMALOG KWIKPEN 100 UNIT/ML SOLN PEN	4	PV Preventive
HUMALOG KWIKPEN 200 UNIT/ML SOLN PEN	4	PV Preventive
HUMALOG MIX 50/50 (50-50) 100 UNIT/ML SUSPENSION	4	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMALOG MIX 50/50 KWIKPEN (50-50) 100 UNIT/ML SUSP PEN	4	PV Preventive
HUMALOG MIX 75/25 (75-25) 100 UNIT/ML SUSPENSION	4	PV Preventive
HUMALOG MIX 75/25 KWIKPEN (75-25) 100 UNIT/ML SUSP PEN	4	PV Preventive
HUMALOG TEMPO PEN 100 UNIT/ML SOLN PEN	4	PV Preventive
HUMULIN 70/30 (70-30) 100 UNIT/ML SUSPENSION	4	PV Preventive
HUMULIN 70/30 KWIKPEN (70-30) 100 UNIT/ML SUSP PEN	4	PV Preventive
HUMULIN N 100 UNIT/ML SUSPENSION	4	PV Preventive
HUMULIN N KWIKPEN 100 UNIT/ML SUSP PEN	4	PV Preventive
HUMULIN R 100 UNIT/ML SOLUTION	4	PV Preventive
HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION	3	PV Preventive
HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN	3	PV Preventive
INSULIN ASP PROT & ASP FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	3	PV Preventive
INSULIN ASPART 100 UNIT/ML SOLUTION	3	PV Preventive
INSULIN ASPART FLEXPEN 100 UNIT/ML SOLN PEN	3	PV Preventive
INSULIN ASPART PENFILL 100 UNIT/ML SOLN CART	3	PV Preventive
INSULIN ASPART PROT & ASPART (70-30) 100 UNIT/ML SUSPENSION	3	PV Preventive
INSULIN DEGLUDEC 100 UNIT/ML SOLUTION	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive
INSULIN DEGLUDEC FLEXTOUCH 100 UNIT/ML SOLN PEN	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN DEGLUDEC FLEXTOUCH 200 UNIT/ML SOLN PEN	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive
INSULIN GLARGINE MAX SOLOSTAR 300 UNIT/ML SOLN PEN	3	PV Preventive
INSULIN GLARGINE SOLOSTAR 300 UNIT/ML SOLN PEN	3	PV Preventive
INSULIN GLARGINE-YFGN 100 UNIT/ML SOLN PEN	3	PV Preventive
INSULIN GLARGINE-YFGN 100 UNIT/ML SOLUTION	3	PV Preventive
INSULIN LISPRO (1 UNIT DIAL) 100 UNIT/ML SOLN PEN	4	PV Preventive
INSULIN LISPRO 100 UNIT/ML SOLUTION	4	PV Preventive
INSULIN LISPRO JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN	4	PV Preventive
INSULIN LISPRO PROT & LISPRO (75-25) 100 UNIT/ML SUSP PEN	4	PV Preventive
LANTUS 100 UNIT/ML SOLUTION	3	PV Preventive
LANTUS SOLOSTAR 100 UNIT/ML SOLN PEN	3	PV Preventive
LYUMJEV 100 UNIT/ML SOLUTION	4	ST STC Trial and failure of 2 therapies: Novolog and Fiasp PV Preventive
LYUMJEV KWIKPEN 100 UNIT/ML SOLN PEN	4	ST STC Trial and failure of 2 therapies: Novolog and Fiasp PV Preventive
LYUMJEV KWIKPEN 200 UNIT/ML SOLN PEN	4	PA PV Preventive
NOVOLIN 70/30 (70-30) 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLIN 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLIN 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN	3	PV Preventive
NOVOLIN 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLIN N 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLIN N FLEXPEN 100 UNIT/ML SUSP PEN	3	PV Preventive
NOVOLIN N FLEXPEN RELION 100 UNIT/ML SUSP PEN	3	PV Preventive
NOVOLIN N RELION 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLIN R 100 UNIT/ML SOLUTION	3	PV Preventive
NOVOLIN R FLEXPEN 100 UNIT/ML SOLN PEN	3	PV Preventive
NOVOLIN R FLEXPEN RELION 100 UNIT/ML SOLN PEN	3	PV Preventive
NOVOLIN R RELION 100 UNIT/ML SOLUTION	3	PV Preventive
NOVOLOG 100 UNIT/ML SOLUTION	3	PV Preventive
NOVOLOG 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN	3	PV Preventive
NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN	3	PV Preventive
NOVOLOG FLEXPEN RELION 100 UNIT/ML SOLN PEN	3	PV Preventive
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	3	PV Preventive
NOVOLOG MIX 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION	3	PV Preventive
NOVOLOG PENFILL 100 UNIT/ML SOLN CART	3	PV Preventive
NOVOLOG RELION 100 UNIT/ML SOLUTION	3	PV Preventive
SEMGLEE (YFGN) 100 UNIT/ML SOLN PEN	3	PV Preventive
SEMGLEE (YFGN) 100 UNIT/ML SOLUTION	3	PV Preventive
TOUJEO MAX SOLOSTAR 300 UNIT/ML SOLN PEN	3	PV Preventive
TOUJEO SOLOSTAR 300 UNIT/ML SOLN PEN	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRESIBA 100 UNIT/ML SOLUTION	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive
TRESIBA FLEXTOUCH 100 UNIT/ML SOLN PEN	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive
TRESIBA FLEXTOUCH 200 UNIT/ML SOLN PEN	3	ST STC Trial and failure of 1 therapy: Any insulin glargine product PV Preventive
BLOOD PRODUCTS AND MODIFIERS ANTICOAGULANTS		
dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	2	QL 60 / 30 day(s) PV Preventive
dabigatran etexilate mesylate cap 150 mg (etexilate base eq)	2	QL 60 / 30 days PV Preventive
dabigatran etexilate mesylate cap 75 mg (etexilate base eq)	2	QL 60 / 30 days PV Preventive
ELIQUIS 2.5 MG TAB	3	QL 90 / 30 days PV Preventive
ELIQUIS 5 MG TAB	3	QL 90 / 30 days PV Preventive
ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK	3	QLC 74 / 180 days PV Preventive
enoxaparin sodium inj soln pref syr 100 mg/ml	2	PV Preventive
enoxaparin sodium inj soln pref syr 120 mg/0.8ml	2	PV Preventive
enoxaparin sodium inj soln pref syr 150 mg/ml	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
enoxaparin sodium inj soln pref syr 30 mg/0.3ml	2	PV Preventive
enoxaparin sodium inj 300 mg/3ml	2	PV Preventive
enoxaparin sodium inj soln pref syr 40 mg/0.4ml	2	PV Preventive
enoxaparin sodium inj soln pref syr 60 mg/0.6ml	2	PV Preventive
enoxaparin sodium inj soln pref syr 80 mg/0.8ml	2	PV Preventive
fondaparinux sodium subcutaneous inj 10 mg/0.8ml	2	PV Preventive
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml	2	PV Preventive
fondaparinux sodium subcutaneous inj 5 mg/0.4ml	2	PV Preventive
fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml	2	PV Preventive
heparin sodium (porcine) inj 1000 unit/ml	2	PV Preventive
heparin sodium (porcine) inj 10000 unit/ml	2	PV Preventive
heparin sodium (porcine) inj 20000 unit/ml	2	PV Preventive
heparin sodium (porcine) inj 5000 unit/ml	2	PV Preventive
heparin sodium (porcine) pf inj 1000 unit/ml	2	PV Preventive
heparin sodium (porcine) pf inj 5000 unit/0.5ml	2	PV Preventive
HEPARIN SODIUM (PORCINE) PF 5000 UNIT/ML SOLUTION	3	PV Preventive
warfarin sodium tab 1 mg	1	PV Preventive
warfarin sodium tab 10 mg	1	PV Preventive
warfarin sodium tab 2 mg	1	PV Preventive
warfarin sodium tab 2.5 mg	1	PV Preventive
warfarin sodium tab 3 mg	1	PV Preventive
warfarin sodium tab 4 mg	1	PV Preventive
warfarin sodium tab 5 mg	1	PV Preventive
warfarin sodium tab 6 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
warfarin sodium tab 7.5 mg	1	PV Preventive
PRADAXA 110 MG CAP	4	QL 60 / 30 day(s) PV Preventive
PRADAXA 110 MG PACKET	4	QL 60 / 30 days PV Preventive
PRADAXA 150 MG PACKET	4	QL 60 / 30 days PV Preventive
PRADAXA 20 MG PACKET	4	QL 60 / 30 days PV Preventive
PRADAXA 30 MG PACKET	4	QL 60 / 30 days PV Preventive
PRADAXA 40 MG PACKET	4	QL 60 / 30 days PV Preventive
PRADAXA 50 MG PACKET	4	QL 60 / 30 days PV Preventive
rivaroxaban for susp 1 mg/ml	3	
rivaroxaban tab 2.5 mg	3	QL 60 / 30 day(s) PV Preventive
warfarin sodium tab 1 mg	1	PV Preventive
warfarin sodium tab 10 mg	1	PV Preventive
warfarin sodium tab 2 mg	1	PV Preventive
warfarin sodium tab 2.5 mg	1	PV Preventive
warfarin sodium tab 3 mg	1	PV Preventive
warfarin sodium tab 4 mg	1	PV Preventive
warfarin sodium tab 5 mg	1	PV Preventive
warfarin sodium tab 6 mg	1	PV Preventive
warfarin sodium tab 7.5 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XARELTO 1 MG/ML RECON SUSP	3	PA PV Preventive
XARELTO 10 MG TAB	3	QL 60 / 30 days PV Preventive
XARELTO 15 MG TAB	3	QL 60 / 30 days PV Preventive
XARELTO 2.5 MG TAB	3	QL 60 / 30 day(s) PV Preventive
XARELTO 20 MG TAB	3	QL 60 / 30 days PV Preventive
XARELTO STARTER PACK 15 & 20 MG TAB THPK	3	QL 60 / 30 days PV Preventive
ZONTIVITY 2.08 MG TAB	4	QL 30 / 30 days PV Preventive
BLOOD PRODUCTS AND MODIFIERS, OTHER		
anagrelide hcl cap 0.5 mg	2	
anagrelide hcl cap 1 mg	2	
eltrombopag olamine powder pack for susp 12.5 mg (base eq)	5	PA S
eltrombopag olamine tab 12.5 mg (base equiv)	5	PA S
eltrombopag olamine powder pack for susp 25 mg (base equiv)	5	PA S
eltrombopag olamine tab 25 mg (base equiv)	5	PA S
eltrombopag olamine tab 50 mg (base equiv)	5	PA S
eltrombopag olamine tab 75 mg (base equiv)	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FABHALTA 200 MG CAP	5	QL 60 / 30 days PA S
FULPHILA 6 MG/0.6ML SOLN PRSYR	5	PA S
LEUKINE 250 MCG RECON SOLN	5	PA S
MULPLETA 3 MG TAB	5	PA S
NIVESTYM 300 MCG/0.5ML SOLN PRSYR	5	PA S
NIVESTYM 300 MCG/ML SOLUTION	5	PA S
NIVESTYM 480 MCG/0.8ML SOLN PRSYR	5	PA S
NIVESTYM 480 MCG/1.6ML SOLUTION	5	PA S
NYVEPRIA 6 MG/0.6ML SOLN PRSYR	5	PA S
PROCRIT 10000 UNIT/ML SOLUTION	5	PA S
PROCRIT 2000 UNIT/ML SOLUTION	5	PA S
PROCRIT 20000 UNIT/ML SOLUTION	5	PA S
PROCRIT 3000 UNIT/ML SOLUTION	5	PA S
PROCRIT 4000 UNIT/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROCRIT 40000 UNIT/ML SOLUTION	5	PA S
PROMACTA 12.5 MG PACKET	5	PA S
PROMACTA 12.5 MG TAB	5	PA S
PROMACTA 25 MG PACKET	5	PA S
PROMACTA 25 MG TAB	5	PA S
PROMACTA 50 MG TAB	5	PA S
PROMACTA 75 MG TAB	5	PA S
PYRUKYND TAPER PACK 5 MG TAB THPK	5	PA S
PYRUKYND TAPER PACK 7 X 20 MG & 7 X 5 MG TAB THPK	5	PA S
PYRUKYND TAPER PACK 7 X 50 MG & 7 X 20 MG TAB THPK	5	PA S
RETACRIT 10000 UNIT/ML SOLUTION	5	PA S
RETACRIT 2000 UNIT/ML SOLUTION	5	PA S
RETACRIT 20000 UNIT/ML SOLUTION	5	PA S
RETACRIT 3000 UNIT/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETACRIT 4000 UNIT/ML SOLUTION	5	PA S
RETACRIT 40000 UNIT/ML SOLUTION	5	PA S
ZARXIO 300 MCG/0.5ML SOLN PRSYR	5	PA S
ZARXIO 480 MCG/0.8ML SOLN PRSYR	5	PA S
ZIEXTENZO 6 MG/0.6ML SOLN PRSYR	5	PA S
HEMOSTASIS AGENTS		
HEMLIBRA 105 MG/0.7ML SOLUTION	5	PA S
HEMLIBRA 12 MG/0.4ML SOLUTION	5	PA S
HEMLIBRA 150 MG/ML SOLUTION	5	PA S
HEMLIBRA 30 MG/ML SOLUTION	5	PA S
HEMLIBRA 300 MG/2ML SOLUTION	5	PA S
HEMLIBRA 60 MG/0.4ML SOLUTION	5	PA S
phytonadione tab 5 mg	2	
tranexamic acid tab 650 mg	2	
PLATELET MODIFYING AGENTS		
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin 81 mg chew tab	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin adult low dose 81 mg tab dr	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin low dose 81 mg chew tab	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin-dipyridamole cap er 12hr 25-200 mg	2	PV Preventive
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
BRILINTA 60 MG TAB	3	QL 60 / 30 day(s) PV Preventive
BRILINTA 90 MG TAB	3	QL 60 / 30 day(s) PV Preventive
CABLIVI 11 MG KIT	5	PA S
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
cilostazol tab 100 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cilostazol tab 50 mg	1	PV Preventive
clopidogrel bisulfate tab 75 mg (base equiv)	1	QL 30 / 30 days PV Preventive
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
dipyridamole tab 25 mg	2	PV Preventive
dipyridamole tab 50 mg	2	PV Preventive
dipyridamole tab 75 mg	2	PV Preventive
DOPTELET 20 MG TAB	5	PA S
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
prasugrel hcl tab 10 mg (base equiv)	2	QL 30 / 30 days PV Preventive
prasugrel hcl tab 5 mg (base equiv)	2	QL 30 / 30 days PV Preventive
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin chew tab 81 mg	1	PV Preventive ACA Affordable Care Act Medications
aspirin tab delayed release 81 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAVALISSE 100 MG TAB	5	PA S
TAVALISSE 150 MG TAB	5	PA S
ticagrelor tab 60 mg	3	QL 60 / 30 day(s) PV Preventive
ticagrelor tab 90 mg	3	QL 60 / 30 day(s) PV Preventive
CARDIOVASCULAR AGENTS ALPHA-ADRENERGIC AGONISTS		
clonidine td patch weekly 0.1 mg/24hr	2	PV Preventive
clonidine td patch weekly 0.2 mg/24hr	2	PV Preventive
clonidine td patch weekly 0.3 mg/24hr	2	PV Preventive
clonidine hcl tab 0.1 mg	1	PV Preventive
clonidine hcl tab 0.2 mg	1	PV Preventive
clonidine hcl tab 0.3 mg	1	PV Preventive
guanfacine hcl tab 1 mg	2	QL 60 / 30 days PV Preventive
guanfacine hcl tab 2 mg	2	QL 60 / 30 days PV Preventive
methyldopa tab 250 mg	4	PV Preventive
METHYLDOPA 500 MG TAB	4	PV Preventive
midodrine hcl tab 10 mg	2	
midodrine hcl tab 2.5 mg	2	
midodrine hcl tab 5 mg	2	
ALPHA-ADRENERGIC BLOCKING AGENTS		
doxazosin mesylate tab 1 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
doxazosin mesylate tab 2 mg	1	PV Preventive
doxazosin mesylate tab 4 mg	1	PV Preventive
doxazosin mesylate tab 8 mg	1	PV Preventive
phenoxybenzamine hcl cap 10 mg	5	PA S PV Preventive
prazosin hcl cap 1 mg	1	PV Preventive
prazosin hcl cap 2 mg	2	PV Preventive
prazosin hcl cap 5 mg	2	PV Preventive
terazosin hcl cap 1 mg (base equivalent)	1	PV Preventive
terazosin hcl cap 10 mg (base equivalent)	1	PV Preventive
terazosin hcl cap 2 mg (base equivalent)	1	PV Preventive
terazosin hcl cap 5 mg (base equivalent)	1	PV Preventive
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan cilexetil tab 16 mg	2	PV Preventive
candesartan cilexetil tab 32 mg	2	PV Preventive
candesartan cilexetil tab 4 mg	2	PV Preventive
candesartan cilexetil tab 8 mg	2	PV Preventive
irbesartan tab 150 mg	1	PV Preventive
irbesartan tab 300 mg	1	PV Preventive
irbesartan tab 75 mg	1	PV Preventive
losartan potassium tab 100 mg	1	PV Preventive
losartan potassium tab 25 mg	1	PV Preventive
losartan potassium tab 50 mg	1	PV Preventive
olmesartan medoxomil tab 20 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
olmesartan medoxomil tab 40 mg	1	PV Preventive
olmesartan medoxomil tab 5 mg	1	PV Preventive
telmisartan tab 20 mg	1	PV Preventive
telmisartan tab 40 mg	1	PV Preventive
telmisartan tab 80 mg	1	PV Preventive
valsartan tab 160 mg	1	PV Preventive
valsartan tab 320 mg	1	PV Preventive
valsartan tab 40 mg	1	PV Preventive
valsartan tab 80 mg	1	PV Preventive
ANGIOTENSIN-CONVERTING ENZYME (ACE) INHIBITORS		
benazepril hcl tab 10 mg	1	PV Preventive
benazepril hcl tab 20 mg	1	PV Preventive
benazepril hcl tab 40 mg	1	PV Preventive
benazepril hcl tab 5 mg	1	PV Preventive
captopril tab 100 mg	2	PV Preventive
captopril tab 12.5 mg	2	PV Preventive
captopril tab 25 mg	2	PV Preventive
captopril tab 50 mg	2	PV Preventive
enalapril maleate oral soln 1 mg/ml	1	PV Preventive
enalapril maleate tab 10 mg	1	PV Preventive
enalapril maleate tab 2.5 mg	1	PV Preventive
enalapril maleate tab 20 mg	1	PV Preventive
enalapril maleate tab 5 mg	1	PV Preventive
fosinopril sodium tab 10 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fosinopril sodium tab 20 mg	1	PV Preventive
fosinopril sodium tab 40 mg	1	PV Preventive
lisinopril tab 10 mg	1	PV Preventive
lisinopril tab 2.5 mg	1	PV Preventive
lisinopril tab 20 mg	1	PV Preventive
lisinopril tab 30 mg	1	PV Preventive
lisinopril tab 40 mg	1	PV Preventive
lisinopril tab 5 mg	1	PV Preventive
moexipril hcl tab 15 mg	2	PV Preventive
moexipril hcl tab 7.5 mg	2	PV Preventive
PERINDOPRIL ERBUMINE 2 MG TAB	2	PV Preventive
perindopril erbumine tab 2 mg	2	PV Preventive
perindopril erbumine tab 4 mg	2	PV Preventive
PERINDOPRIL ERBUMINE 8 MG TAB	4	PV Preventive
quinapril hcl tab 10 mg	1	PV Preventive
quinapril hcl tab 20 mg	1	PV Preventive
quinapril hcl tab 40 mg	1	PV Preventive
quinapril hcl tab 5 mg	1	PV Preventive
ramipril cap 1.25 mg	1	PV Preventive
ramipril cap 10 mg	1	PV Preventive
ramipril cap 2.5 mg	1	PV Preventive
ramipril cap 5 mg	1	PV Preventive
trandolapril tab 1 mg	1	PV Preventive
trandolapril tab 2 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
trandolapril tab 4 mg	1	PV Preventive
ANTIARRHYTHMICS		
amiodarone hcl tab 100 mg	2	PV Preventive
amiodarone hcl tab 200 mg	1	PV Preventive
DIGOXIN 0.05 MG/ML SOLUTION	4	PV Preventive
digoxin oral soln 0.05 mg/ml	2	PV Preventive
digoxin tab 125 mcg (0.125 mg)	1	PV Preventive
digoxin tab 250 mcg (0.25 mg)	1	PV Preventive
digoxin tab 62.5 mcg (0.0625 mg)	2	PV Preventive
disopyramide phosphate cap 100 mg	2	PV Preventive
disopyramide phosphate cap 150 mg	2	PV Preventive
dofetilide cap 125 mcg (0.125 mg)	2	PV Preventive
dofetilide cap 250 mcg (0.25 mg)	2	PV Preventive
dofetilide cap 500 mcg (0.5 mg)	2	PV Preventive
flecainide acetate tab 100 mg	2	PV Preventive
flecainide acetate tab 150 mg	2	PV Preventive
flecainide acetate tab 50 mg	2	PV Preventive
mexiletine hcl cap 150 mg	2	PV Preventive
mexiletine hcl cap 200 mg	2	PV Preventive
mexiletine hcl cap 250 mg	2	PV Preventive
MULTAQ 400 MG TAB	3	PV Preventive
NORPACE CR 100 MG CAP ER 12H	4	PV Preventive
NORPACE CR 150 MG CAP ER 12H	4	PV Preventive
amiodarone hcl tab 100 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amiodarone hcl tab 200 mg	1	PV Preventive
propafenone hcl tab 150 mg	1	PV Preventive
propafenone hcl tab 225 mg	2	PV Preventive
propafenone hcl tab 300 mg	2	PV Preventive
propafenone hcl cap er 12hr 225 mg	2	PV Preventive
propafenone hcl cap er 12hr 325 mg	2	PV Preventive
propafenone hcl cap er 12hr 425 mg	2	PV Preventive
quinidine gluconate tab er 324 mg	2	PV Preventive
QUINIDINE SULFATE 200 MG TAB	4	PV Preventive
QUINIDINE SULFATE 300 MG TAB	4	PV Preventive
sotalol hcl (afib/afl) tab 120 mg	2	PV Preventive
sotalol hcl (afib/afl) tab 160 mg	2	PV Preventive
sotalol hcl (afib/afl) tab 80 mg	1	PV Preventive
sotalol hcl tab 120 mg	1	PV Preventive
sotalol hcl tab 160 mg	2	PV Preventive
sotalol hcl tab 240 mg	2	PV Preventive
sotalol hcl tab 80 mg	1	PV Preventive
BETA-ADRENERGIC BLOCKING AGENTS		
acebutolol hcl cap 200 mg	2	PV Preventive
acebutolol hcl cap 400 mg	2	PV Preventive
atenolol tab 100 mg	1	PV Preventive
atenolol tab 25 mg	1	PV Preventive
atenolol tab 50 mg	1	PV Preventive
betaxolol hcl tab 10 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
betaxolol hcl tab 20 mg	2	PV Preventive
bisoprolol fumarate tab 10 mg	2	PV Preventive
BISOPROLOL FUMARATE 2.5 MG TAB	2	PV Preventive
bisoprolol fumarate tab 5 mg	1	PV Preventive
carvedilol tab 12.5 mg	1	PV Preventive
carvedilol tab 25 mg	1	PV Preventive
carvedilol tab 3.125 mg	1	PV Preventive
carvedilol tab 6.25 mg	1	PV Preventive
labetalol hcl tab 100 mg	1	PV Preventive
labetalol hcl tab 200 mg	2	PV Preventive
labetalol hcl tab 300 mg	2	PV Preventive
metoprolol succinate tab er 24hr 100 mg (tartrate equiv)	1	PV Preventive
metoprolol succinate tab er 24hr 200 mg (tartrate equiv)	2	PV Preventive
metoprolol succinate tab er 24hr 25 mg (tartrate equiv)	1	PV Preventive
metoprolol succinate tab er 24hr 50 mg (tartrate equiv)	1	PV Preventive
metoprolol tartrate tab 100 mg	1	PV Preventive
metoprolol tartrate tab 25 mg	1	PV Preventive
metoprolol tartrate tab 37.5 mg	1	PV Preventive
metoprolol tartrate tab 50 mg	1	PV Preventive
metoprolol tartrate tab 75 mg	1	PV Preventive
nadolol tab 20 mg	2	PV Preventive
nadolol tab 40 mg	2	PV Preventive
nadolol tab 80 mg	2	PV Preventive
nebivolol hcl tab 10 mg (base equivalent)	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nebivolol hcl tab 2.5 mg (base equivalent)	2	PV Preventive
nebivolol hcl tab 20 mg (base equivalent)	2	PV Preventive
nebivolol hcl tab 5 mg (base equivalent)	2	PV Preventive
pindolol tab 10 mg	2	PV Preventive
pindolol tab 5 mg	2	PV Preventive
propranolol hcl tab 10 mg	1	PV Preventive
propranolol hcl tab 20 mg	1	PV Preventive
PROPRANOLOL HCL 20 MG/5ML SOLUTION	1	PV Preventive
propranolol hcl tab 40 mg	1	PV Preventive
PROPRANOLOL HCL 40 MG/5ML SOLUTION	3	PV Preventive
propranolol hcl tab 60 mg	2	PV Preventive
propranolol hcl tab 80 mg	2	PV Preventive
propranolol hcl cap er 24hr 120 mg	2	PV Preventive
propranolol hcl cap er 24hr 160 mg	2	PV Preventive
propranolol hcl cap er 24hr 60 mg	2	PV Preventive
propranolol hcl cap er 24hr 80 mg	2	PV Preventive
timolol maleate tab 10 mg	2	PV Preventive
timolol maleate tab 20 mg	2	PV Preventive
timolol maleate tab 5 mg	2	PV Preventive
CALCIUM CHANNEL BLOCKING AGENTS, DIHYDROPYRIDINES		
amlodipine besylate tab 10 mg (base equivalent)	1	PV Preventive
amlodipine besylate tab 2.5 mg (base equivalent)	1	PV Preventive
amlodipine besylate tab 5 mg (base equivalent)	1	PV Preventive
felodipine tab er 24hr 10 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
felodipine tab er 24hr 2.5 mg	1	PV Preventive
felodipine tab er 24hr 5 mg	1	PV Preventive
nifedipine cap 10 mg	2	PV Preventive
nifedipine cap 20 mg	2	PV Preventive
nifedipine tab er 24hr 30 mg	1	PV Preventive
nifedipine tab er 24hr 60 mg	2	PV Preventive
nifedipine tab er 24hr 90 mg	2	PV Preventive
nifedipine tab er 24hr osmotic release 30 mg	1	PV Preventive
nifedipine tab er 24hr osmotic release 60 mg	2	PV Preventive
nifedipine tab er 24hr osmotic release 90 mg	2	PV Preventive
nimodipine cap 30 mg	2	PV Preventive
NYMALIZE 6 MG/ML SOLUTION	4	PV Preventive
CALCIUM CHANNEL BLOCKING AGENTS, NONDIHYDROPYRIDINES		
diltiazem hcl coated beads cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 180 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 240 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 300 mg	2	PV Preventive
diltiazem hcl cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl cap er 24hr 180 mg	2	PV Preventive
diltiazem hcl cap er 24hr 240 mg	2	PV Preventive
diltiazem hcl tab 120 mg	2	PV Preventive
diltiazem hcl tab 30 mg	1	PV Preventive
diltiazem hcl tab 60 mg	1	PV Preventive
diltiazem hcl tab 90 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem hcl cap er 12hr 120 mg	2	PV Preventive
diltiazem hcl cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl tab er 24hr 120 mg	2	PV Preventive
diltiazem hcl cap er 24hr 180 mg	2	PV Preventive
diltiazem hcl cap er 24hr 240 mg	2	PV Preventive
diltiazem hcl cap er 12hr 60 mg	2	PV Preventive
diltiazem hcl cap er 12hr 90 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl extended release beads cap er 24hr 180 mg	1	PV Preventive
diltiazem hcl extended release beads cap er 24hr 240 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 300 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 360 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 420 mg	2	PV Preventive
diltiazem hcl coated beads cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 180 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 240 mg	1	PV Preventive
diltiazem hcl coated beads cap er 24hr 300 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl extended release beads cap er 24hr 180 mg	1	PV Preventive
diltiazem hcl extended release beads cap er 24hr 240 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 300 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 360 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 120 mg	1	PV Preventive
diltiazem hcl extended release beads cap er 24hr 180 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
diltiazem hcl extended release beads cap er 24hr 240 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 300 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 360 mg	2	PV Preventive
diltiazem hcl extended release beads cap er 24hr 420 mg	2	PV Preventive
verapamil hcl tab 120 mg	1	PV Preventive
verapamil hcl tab 40 mg	1	PV Preventive
verapamil hcl tab 80 mg	1	PV Preventive
verapamil hcl cap er 24hr 120 mg	2	PV Preventive
verapamil hcl tab er 120 mg	1	PV Preventive
verapamil hcl cap er 24hr 180 mg	2	PV Preventive
verapamil hcl tab er 180 mg	1	PV Preventive
verapamil hcl cap er 24hr 240 mg	2	PV Preventive
verapamil hcl tab er 240 mg	1	PV Preventive
CARDIOVASCULAR AGENTS, OTHER		
acetazolamide tab 125 mg	2	PV Preventive
acetazolamide tab 250 mg	2	PV Preventive
AMILORIDE-HYDROCHLOROTHIAZIDE 5-50 MG TAB	2	PV Preventive
amlodipine besylate-benazepril hcl cap 10-20 mg	1	PV Preventive
amlodipine besylate-benazepril hcl cap 10-40 mg	1	PV Preventive
amlodipine besylate-benazepril hcl cap 2.5-10 mg	1	PV Preventive
amlodipine besylate-benazepril hcl cap 5-10 mg	1	PV Preventive
amlodipine besylate-benazepril hcl cap 5-20 mg	1	PV Preventive
amlodipine besylate-benazepril hcl cap 5-40 mg	1	PV Preventive
amlodipine besylate-valsartan tab 10-160 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amlodipine besylate-valsartan tab 10-320 mg	1	PV Preventive
amlodipine besylate-valsartan tab 5-160 mg	1	PV Preventive
amlodipine besylate-valsartan tab 5-320 mg	1	PV Preventive
amlodipine besylate-olmesartan medoxomil tab 10-20 mg	1	PV Preventive
amlodipine besylate-olmesartan medoxomil tab 10-40 mg	1	PV Preventive
amlodipine besylate-olmesartan medoxomil tab 5-20 mg	1	PV Preventive
amlodipine besylate-olmesartan medoxomil tab 5-40 mg	1	PV Preventive
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg	2	PV Preventive
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg	2	PV Preventive
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg	2	PV Preventive
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg	2	PV Preventive
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg	2	PV Preventive
atenolol & chlorthalidone tab 100-25 mg	2	PV Preventive
atenolol & chlorthalidone tab 50-25 mg	1	PV Preventive
benazepril & hydrochlorothiazide tab 10-12.5 mg	1	PV Preventive
benazepril & hydrochlorothiazide tab 20-12.5 mg	1	PV Preventive
benazepril & hydrochlorothiazide tab 20-25 mg	1	PV Preventive
benazepril & hydrochlorothiazide tab 5-6.25 mg	1	PV Preventive
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	1	PV Preventive
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	1	PV Preventive
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	1	PV Preventive
CAMZYOS 10 MG CAP	5	QL 30 / 30 days PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAMZYOS 15 MG CAP	5	QL 30 / 30 days PA S
CAMZYOS 2.5 MG CAP	5	QL 30 / 30 days PA S
CAMZYOS 5 MG CAP	5	QL 30 / 30 days PA S
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg	2	PV Preventive
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg	2	PV Preventive
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg	2	PV Preventive
CORLANOR 5 MG TAB	3	
CORLANOR 5 MG/5ML SOLUTION	3	
CORLANOR 7.5 MG TAB	3	
enalapril maleate & hydrochlorothiazide tab 10-25 mg	1	PV Preventive
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1	PV Preventive
ENTRESTO 24-26 MG TAB	3	
ENTRESTO 49-51 MG TAB	3	
ENTRESTO 97-103 MG TAB	3	
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	2	PV Preventive
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg	2	PV Preventive
irbesartan-hydrochlorothiazide tab 150-12.5 mg	1	PV Preventive
irbesartan-hydrochlorothiazide tab 300-12.5 mg	1	PV Preventive
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	2	
ivabradine hcl tab 5 mg (base equiv)	2	
ivabradine hcl tab 7.5 mg (base equiv)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lisinopril & hydrochlorothiazide tab 10-12.5 mg	1	PV Preventive
lisinopril & hydrochlorothiazide tab 20-12.5 mg	1	PV Preventive
lisinopril & hydrochlorothiazide tab 20-25 mg	1	PV Preventive
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	1	PV Preventive
losartan potassium & hydrochlorothiazide tab 100-25 mg	1	PV Preventive
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	1	PV Preventive
metoprolol & hydrochlorothiazide tab 100-25 mg	2	PV Preventive
metoprolol & hydrochlorothiazide tab 100-50 mg	2	PV Preventive
metoprolol & hydrochlorothiazide tab 50-25 mg	2	PV Preventive
metyrosine cap 250 mg	5	QL 360 / 30 days PA S
NEXLETOL 180 MG TAB	3	PA PV Preventive
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg	1	PV Preventive
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg	1	PV Preventive
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg	1	PV Preventive
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg	2	PV Preventive
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg	2	PV Preventive
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg	2	PV Preventive
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg	2	PV Preventive
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg	2	PV Preventive
pentoxifylline tab er 400 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
quinapril-hydrochlorothiazide tab 10-12.5 mg	2	PV Preventive
quinapril-hydrochlorothiazide tab 20-12.5 mg	2	PV Preventive
QUINAPRIL-HYDROCHLOROTHIAZIDE 20-25 MG TAB	2	PV Preventive
quinapril-hydrochlorothiazide tab 20-25 mg	2	PV Preventive
ranolazine tab er 12hr 1000 mg	2	PV Preventive
ranolazine tab er 12hr 500 mg	2	PV Preventive
sacubitril-valsartan tab 24-26 mg	2	
sacubitril-valsartan tab 49-51 mg	2	
sacubitril-valsartan tab 97-103 mg	2	
spironolactone & hydrochlorothiazide tab 25-25 mg	2	PV Preventive
TELMISARTAN-AMLODIPINE 40-10 MG TAB	4	PV Preventive
TELMISARTAN-AMLODIPINE 40-5 MG TAB	4	PV Preventive
TELMISARTAN-AMLODIPINE 80-10 MG TAB	4	PV Preventive
TELMISARTAN-AMLODIPINE 80-5 MG TAB	4	PV Preventive
telmisartan-hydrochlorothiazide tab 40-12.5 mg	2	PV Preventive
telmisartan-hydrochlorothiazide tab 80-12.5 mg	2	PV Preventive
telmisartan-hydrochlorothiazide tab 80-25 mg	2	PV Preventive
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	PV Preventive
triamterene & hydrochlorothiazide tab 37.5-25 mg	1	PV Preventive
triamterene & hydrochlorothiazide tab 75-50 mg	1	PV Preventive
valsartan-hydrochlorothiazide tab 160-12.5 mg	1	PV Preventive
valsartan-hydrochlorothiazide tab 160-25 mg	1	PV Preventive
valsartan-hydrochlorothiazide tab 320-12.5 mg	1	PV Preventive
valsartan-hydrochlorothiazide tab 320-25 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
valsartan-hydrochlorothiazide tab 80-12.5 mg	1	PV Preventive
VECAMYL 2.5 MG TAB	5	PA S
VERQUVO 10 MG TAB	3	PV Preventive
VERQUVO 2.5 MG TAB	3	PV Preventive
VERQUVO 5 MG TAB	3	PV Preventive
DIURETICS, LOOP		
bumetanide tab 0.5 mg	1	PV Preventive
bumetanide tab 1 mg	2	PV Preventive
bumetanide tab 2 mg	2	PV Preventive
ethacrynic acid tab 25 mg	2	
FUROSCIX 80 MG/10ML CART KIT	5	PA S
furosemide oral soln 10 mg/ml	1	PV Preventive
furosemide tab 20 mg	1	PV Preventive
furosemide tab 40 mg	1	PV Preventive
furosemide tab 80 mg	1	PV Preventive
torsemide tab 10 mg	1	PV Preventive
torsemide tab 100 mg	1	PV Preventive
torsemide tab 20 mg	1	PV Preventive
torsemide tab 5 mg	1	PV Preventive
DIURETICS, POTASSIUM-SPARING		
amiloride hcl tab 5 mg	1	PV Preventive
eplerenone tab 25 mg	2	PV Preventive
eplerenone tab 50 mg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIURETICS, THIAZIDE		
chlorthalidone tab 25 mg	1	PV Preventive
chlorthalidone tab 50 mg	1	PV Preventive
DIURIL 250 MG/5ML SUSPENSION	4	PV Preventive
hydrochlorothiazide cap 12.5 mg	1	PV Preventive
hydrochlorothiazide tab 12.5 mg	1	PV Preventive
hydrochlorothiazide tab 25 mg	1	PV Preventive
hydrochlorothiazide tab 50 mg	1	PV Preventive
indapamide tab 1.25 mg	1	PV Preventive
indapamide tab 2.5 mg	1	PV Preventive
metolazone tab 10 mg	2	PV Preventive
metolazone tab 2.5 mg	2	PV Preventive
metolazone tab 5 mg	2	PV Preventive
DYSLIPIDEMICS, FIBRIC ACID DERIVATIVES		
fenofibrate micronized cap 134 mg	1	PV Preventive
fenofibrate tab 145 mg	1	PV Preventive
fenofibrate tab 160 mg	1	PV Preventive
fenofibrate micronized cap 200 mg	2	PV Preventive
fenofibrate tab 48 mg	1	PV Preventive
fenofibrate tab 54 mg	1	PV Preventive
fenofibrate micronized cap 67 mg	1	PV Preventive
fenofibrate micronized cap 134 mg	1	PV Preventive
fenofibrate micronized cap 200 mg	2	PV Preventive
fenofibrate micronized cap 67 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gemfibrozil tab 600 mg	1	PV Preventive
DYSLIPIDEMICS, HMG COA REDUCTASE INHIBITORS		
atorvastatin calcium tab 10 mg (base equivalent)	1	PV Preventive ACA Affordable Care Act Medications
atorvastatin calcium tab 20 mg (base equivalent)	1	PV Preventive ACA Affordable Care Act Medications
atorvastatin calcium tab 40 mg (base equivalent)	1	PV Preventive
atorvastatin calcium tab 80 mg (base equivalent)	1	PV Preventive
fluvastatin sodium cap 20 mg (base equivalent)	2	PV Preventive
fluvastatin sodium cap 40 mg (base equivalent)	2	PV Preventive
fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	2	PV Preventive
lovastatin tab 10 mg	1	PV Preventive ACA Affordable Care Act Medications
lovastatin tab 20 mg	1	PV Preventive ACA Affordable Care Act Medications
lovastatin tab 40 mg	1	PV Preventive ACA Affordable Care Act Medications
pravastatin sodium tab 10 mg	1	PV Preventive ACA Affordable Care Act Medications
pravastatin sodium tab 20 mg	1	PV Preventive ACA Affordable Care Act Medications
pravastatin sodium tab 40 mg	1	PV Preventive ACA Affordable Care Act Medications
pravastatin sodium tab 80 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
rosuvastatin calcium tab 10 mg	1	PV Preventive ACA Affordable Care Act Medications
rosuvastatin calcium tab 20 mg	1	PV Preventive
rosuvastatin calcium tab 40 mg	1	PV Preventive
rosuvastatin calcium tab 5 mg	1	PV Preventive ACA Affordable Care Act Medications
simvastatin tab 10 mg	1	PV Preventive ACA Affordable Care Act Medications
simvastatin tab 20 mg	1	PV Preventive ACA Affordable Care Act Medications
simvastatin tab 40 mg	1	PV Preventive ACA Affordable Care Act Medications
simvastatin tab 5 mg	1	PV Preventive ACA Affordable Care Act Medications
simvastatin tab 80 mg	1	PV Preventive
DYSLIPIDEMICS, OTHER		
cholestyramine powder packets 4 gm	2	PV Preventive
cholestyramine powder 4 gm/dose	2	PV Preventive
cholestyramine light powder packets 4 gm	2	PV Preventive
cholestyramine light powder 4 gm/dose	2	PV Preventive
colesevelam hcl tab 625 mg	2	PV Preventive
colestipol hcl tab 1 gm	2	PV Preventive
colestipol hcl granules 5 gm	2	PV Preventive
colestipol hcl granule packets 5 gm	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ezetimibe tab 10 mg	1	PV Preventive
ezetimibe-simvastatin tab 10-10 mg	2	PV Preventive
ezetimibe-simvastatin tab 10-20 mg	2	PV Preventive
ezetimibe-simvastatin tab 10-40 mg	2	PV Preventive
ezetimibe-simvastatin tab 10-80 mg	2	PV Preventive
icosapent ethyl cap 0.5 gm	1	PV Preventive
icosapent ethyl cap 1 gm	1	PV Preventive
JUXTAPID 10 MG CAP	5	PA S
JUXTAPID 20 MG CAP	5	PA S
JUXTAPID 30 MG CAP	5	PA S
JUXTAPID 5 MG CAP	5	PA S
LEQVIO 284 MG/1.5ML SOLN PRSYR	5	PA S
NEXLIZET 180-10 MG TAB	3	PV Preventive
niacin tab er 1000 mg (antihyperlipidemic)	2	PV Preventive
niacin tab er 500 mg (antihyperlipidemic)	2	PV Preventive
niacin tab er 750 mg (antihyperlipidemic)	2	PV Preventive
cholestyramine light powder 4 gm/dose	2	PV Preventive
REPATHA 140 MG/ML SOLN PRSYR	3	PA PV Preventive
REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART	3	PA PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REPATHA SURECLICK 140 MG/ML SOLN A-INJ	3	PA PV Preventive
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
spironolactone tab 100 mg	1	PV Preventive
spironolactone tab 25 mg	1	PV Preventive
spironolactone tab 50 mg	1	PV Preventive
SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS (SGLT2I)		
DAPAGLIFLOZIN PROPANEDIOL 10 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
DAPAGLIFLOZIN PROPANEDIOL 5 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
FARXIGA 10 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
FARXIGA 5 MG TAB	3	ST STC Trial and failure of 1 therapy: metformin PV Preventive
JARDIANCE 10 MG TAB	3	PV Preventive
JARDIANCE 25 MG TAB	3	PV Preventive
VASODILATORS, DIRECT-ACTING ARTERIAL		
hydralazine hcl tab 10 mg	1	PV Preventive
hydralazine hcl tab 100 mg	1	PV Preventive
hydralazine hcl tab 25 mg	1	PV Preventive
hydralazine hcl tab 50 mg	1	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
minoxidil tab 10 mg	1	PV Preventive
minoxidil tab 2.5 mg	1	PV Preventive
VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS		
isosorbide dinitrate tab 10 mg	2	PV Preventive
isosorbide dinitrate tab 20 mg	2	PV Preventive
isosorbide dinitrate tab 30 mg	2	PV Preventive
isosorbide dinitrate tab 5 mg	2	PV Preventive
ISOSORBIDE MONONITRATE 10 MG TAB	1	PV Preventive
isosorbide mononitrate tab 10 mg	1	PV Preventive
ISOSORBIDE MONONITRATE 20 MG TAB	1	PV Preventive
isosorbide mononitrate tab 20 mg	1	PV Preventive
isosorbide mononitrate tab er 24hr 120 mg	1	PV Preventive
isosorbide mononitrate tab er 24hr 30 mg	1	PV Preventive
isosorbide mononitrate tab er 24hr 60 mg	1	PV Preventive
NITRO-BID 2 % OINTMENT	4	PV Preventive
NITRO-TIME 2.5 MG CAP ER	4	PV Preventive
NITRO-TIME 6.5 MG CAP ER	4	PV Preventive
NITRO-TIME 9 MG CAP ER	4	PV Preventive
nitroglycerin td patch 24hr 0.1 mg/hr	2	PV Preventive
nitroglycerin td patch 24hr 0.2 mg/hr	2	PV Preventive
nitroglycerin sl tab 0.3 mg	1	PV Preventive
nitroglycerin oint 0.4%	4	
nitroglycerin sl tab 0.4 mg	1	PV Preventive
nitroglycerin td patch 24hr 0.4 mg/hr	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	2	PV Preventive
nitroglycerin sl tab 0.6 mg	1	PV Preventive
nitroglycerin td patch 24hr 0.6 mg/hr	2	PV Preventive
NITROLINGUAL 0.4 MG/SPRAY SOLUTION	2	PV Preventive
RECTIV 0.4 % OINTMENT	4	
CENTRAL NERVOUS SYSTEM AGENTS AMYOTROPHIC LATERAL SCLEROSIS (ALS) AGENTS		
EXSERVAN 50 MG FILM	5	PA S
RADICAVA ORS 105 MG/5ML SUSPENSION	5	PA S
RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION	5	PA S
TEGLUTIK 50 MG/10ML SUSPENSION	5	PA S
TIGLUTIK 50 MG/10ML SUSPENSION	5	PA S
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, AMPHETAMINES		
amphetamine sulfate tab 10 mg	2	QL 90 / 30 days
amphetamine sulfate tab 5 mg	2	QL 90 / 30 days
amphetamine-dextroamphetamine cap er 24hr 10 mg	1	QL 90 / 30 days
amphetamine-dextroamphetamine cap er 24hr 15 mg	1	QL 90 / 30 days
amphetamine-dextroamphetamine cap er 24hr 20 mg	1	QL 90 / 30 days
amphetamine-dextroamphetamine cap er 24hr 25 mg	1	QL 60 / 30 days
amphetamine-dextroamphetamine cap er 24hr 30 mg	1	QL 60 / 30 days
amphetamine-dextroamphetamine cap er 24hr 5 mg	1	QL 90 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
amphetamine-dextroamphetamine tab 10 mg	2	QL 90 / 30 days
amphetamine-dextroamphetamine tab 12.5 mg	2	QL 90 / 30 days
amphetamine-dextroamphetamine tab 15 mg	2	QL 90 / 30 days
amphetamine-dextroamphetamine tab 20 mg	2	QL 90 / 30 days
amphetamine-dextroamphetamine tab 30 mg	2	QL 60 / 30 days
amphetamine-dextroamphetamine tab 5 mg	1	QL 90 / 30 days
amphetamine-dextroamphetamine tab 7.5 mg	2	QL 90 / 30 days
dextroamphetamine sulfate tab 10 mg	2	QL 90 / 30 days
dextroamphetamine sulfate tab 5 mg	2	QL 90 / 30 days
dextroamphetamine sulfate oral solution 5 mg/5ml	2	QL 1800 / 30 days
dextroamphetamine sulfate cap er 24hr 10 mg	2	QL 90 / 30 days
dextroamphetamine sulfate cap er 24hr 15 mg	2	QL 90 / 30 days
dextroamphetamine sulfate cap er 24hr 5 mg	2	QL 90 / 30 days
lisdexamfetamine dimesylate cap 10 mg	2	QL 90 / 30 days
lisdexamfetamine dimesylate chew tab 10 mg	2	QL 90 / 30 days
lisdexamfetamine dimesylate cap 20 mg	2	QL 90 / 30 days
lisdexamfetamine dimesylate chew tab 20 mg	2	QL 90 / 30 days
lisdexamfetamine dimesylate cap 30 mg	2	QL 60 / 30 days
lisdexamfetamine dimesylate chew tab 30 mg	2	QL 60 / 30 days
lisdexamfetamine dimesylate cap 40 mg	2	QL 30 / 30 days
lisdexamfetamine dimesylate chew tab 40 mg	2	QL 30 / 30 days
lisdexamfetamine dimesylate cap 50 mg	2	QL 30 / 30 days
lisdexamfetamine dimesylate chew tab 50 mg	2	QL 30 / 30 days
lisdexamfetamine dimesylate cap 60 mg	2	QL 30 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
lisdexamfetamine dimesylate chew tab 60 mg	2	QL 30 / 30 days
lisdexamfetamine dimesylate cap 70 mg	2	QL 30 / 30 days
dextroamphetamine sulfate oral solution 5 mg/5ml	2	QL 1800 / 30 days
dextroamphetamine sulfate tab 10 mg	2	QL 90 / 30 days
dextroamphetamine sulfate tab 5 mg	2	QL 90 / 30 days
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, NON-AMPHETAMINES		
atomoxetine hcl cap 10 mg (base equiv)	2	QL 90 / 30 days
atomoxetine hcl cap 100 mg (base equiv)	2	QL 30 / 30 days
atomoxetine hcl cap 18 mg (base equiv)	2	QL 60 / 30 days
atomoxetine hcl cap 25 mg (base equiv)	2	QL 90 / 30 days
atomoxetine hcl cap 40 mg (base equiv)	2	QL 60 / 30 days
atomoxetine hcl cap 60 mg (base equiv)	2	QL 30 / 30 days
atomoxetine hcl cap 80 mg (base equiv)	2	QL 30 / 30 days
clonidine hcl tab er 12hr 0.1 mg	2	
dexmethylphenidate hcl tab 10 mg	2	QL 90 / 30 days
dexmethylphenidate hcl tab 2.5 mg	1	QL 90 / 30 days
dexmethylphenidate hcl tab 5 mg	1	QL 90 / 30 days
dexmethylphenidate hcl cap er 24 hr 10 mg	2	QL 90 / 30 days
dexmethylphenidate hcl cap er 24 hr 15 mg	2	QL 90 / 30 days
dexmethylphenidate hcl cap er 24 hr 20 mg	2	QL 60 / 30 days
dexmethylphenidate hcl cap er 24 hr 25 mg	2	QL 60 / 30 days
dexmethylphenidate hcl cap er 24 hr 30 mg	2	QL 30 / 30 days
dexmethylphenidate hcl cap er 24 hr 35 mg	2	QL 30 / 30 days
dexmethylphenidate hcl cap er 24 hr 40 mg	2	QL 30 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dexmethylphenidate hcl cap er 24 hr 5 mg	2	QL 90 / 30 days
guanfacine hcl tab er 24hr 1 mg (base equiv)	1	QL 90 / 30 days
guanfacine hcl tab er 24hr 2 mg (base equiv)	1	QL 90 / 30 days
guanfacine hcl tab er 24hr 3 mg (base equiv)	1	QL 60 / 30 days
guanfacine hcl tab er 24hr 4 mg (base equiv)	1	QL 30 / 30 days
methylphenidate hcl chew tab 10 mg	2	QL 90 / 30 days
methylphenidate hcl tab 10 mg	1	QL 90 / 30 days
methylphenidate hcl soln 10 mg/5ml	2	QL 900 / 30 days
methylphenidate hcl chew tab 2.5 mg	2	QL 90 / 30 days
methylphenidate hcl tab 20 mg	1	QL 90 / 30 days
methylphenidate hcl chew tab 5 mg	2	QL 90 / 30 days
methylphenidate hcl tab 5 mg	1	QL 90 / 30 days
methylphenidate hcl soln 5 mg/5ml	2	QL 1800 / 30 days
methylphenidate hcl cap er 10 mg (cd)	2	QL 90 / 30 days
methylphenidate hcl cap er 20 mg (cd)	2	QL 90 / 30 days
methylphenidate hcl cap er 30 mg (cd)	2	QL 60 / 30 days
methylphenidate hcl cap er 40 mg (cd)	2	QL 30 / 30 days
methylphenidate hcl cap er 50 mg (cd)	2	QL 30 / 30 days
methylphenidate hcl cap er 60 mg (cd)	2	QL 30 / 30 days
methylphenidate hcl cap er 24hr 10 mg (la)	2	QL 90 / 30 days
methylphenidate hcl cap er 24hr 20 mg (la)	2	QL 90 / 30 days
methylphenidate hcl cap er 24hr 30 mg (la)	2	QL 60 / 30 days
methylphenidate hcl cap er 24hr 40 mg (la)	2	QL 30 / 30 days
methylphenidate hcl tab er osmotic release (osm) 18 mg	2	QL 90 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylphenidate hcl tab er osmotic release (osm) 27 mg	2	QL 60 / 30 days
methylphenidate hcl tab er osmotic release (osm) 36 mg	2	QL 60 / 30 days
methylphenidate hcl tab er osmotic release (osm) 54 mg	2	QL 30 / 30 day(s)
methylphenidate hcl tab er 10 mg	2	QL 90 / 30 days
methylphenidate hcl tab er osmotic release (osm) 18 mg	2	QL 90 / 30 days
methylphenidate hcl tab er 20 mg	2	QL 90 / 30 days
methylphenidate hcl tab er osmotic release (osm) 27 mg	2	QL 60 / 30 days
methylphenidate hcl tab er osmotic release (osm) 36 mg	2	QL 60 / 30 days
methylphenidate hcl tab er osmotic release (osm) 54 mg	2	QL 30 / 30 day(s)
CENTRAL NERVOUS SYSTEM, OTHER		
AUSTEDO 12 MG TAB	5	PA S
AUSTEDO 6 MG TAB	5	PA S
AUSTEDO 9 MG TAB	5	PA S
AUSTEDO PATIENT TITRATION KIT 6 & 9 & 12 MG TAB THPK	5	PA S
butalbital-acetaminophen-caffeine tab 50-325-40 mg	2	QL 70 / 7 days
butalbital-acetaminophen tab 50-325 mg	2	QL 70 / 7 days
butalbital-acetaminophen-caffeine tab 50-325-40 mg	2	QL 70 / 7 days
FIRDAPSE 10 MG TAB	5	PA S
INGREZZA 40 & 80 MG CAP THPK	5	PA S
INGREZZA 40 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INGREZZA 60 MG CAP	5	PA S
INGREZZA 80 MG CAP	5	PA S
riluzole tab 50 mg	5	S
tetrabenazine tab 12.5 mg	2	PA
tetrabenazine tab 25 mg	2	PA
FIBROMYALGIA AGENTS		
duloxetine hcl enteric coated pellets cap 20 mg (base eq)	1	PV Preventive
duloxetine hcl enteric coated pellets cap 30 mg (base eq)	1	PV Preventive
duloxetine hcl enteric coated pellets cap 60 mg (base eq)	1	PV Preventive
pregabalin cap 100 mg	1	PV Preventive
pregabalin cap 150 mg	1	PV Preventive
pregabalin soln 20 mg/ml	2	PV Preventive
pregabalin cap 200 mg	1	PV Preventive
pregabalin cap 225 mg	1	PV Preventive
pregabalin cap 25 mg	1	PV Preventive
pregabalin cap 300 mg	1	PV Preventive
pregabalin cap 50 mg	1	PV Preventive
pregabalin cap 75 mg	1	PV Preventive
SAVELLA 100 MG TAB	3	
SAVELLA 12.5 MG TAB	3	
SAVELLA 25 MG TAB	3	
SAVELLA 50 MG TAB	3	
SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO 14 MG TAB	5	PA S
AUBAGIO 7 MG TAB	5	PA S
AVONEX PEN 30 MCG/0.5ML AUT-IJ KIT	5	PA S
AVONEX PREFILLED 30 MCG/0.5ML PREF SY KT	5	PA S
BETASERON 0.3 MG KIT	5	PA S
dalfampridine tab er 12hr 10 mg	5	S
dimethyl fumarate capsule delayed release 120 mg	5	PA S
dimethyl fumarate capsule delayed release 240 mg	5	PA S
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	5	PA S
fingolimod hcl cap 0.5 mg (base equiv)	5	PA S
GILENYA 0.25 MG CAP	5	QL 30 / 30 days PA S
GILENYA 0.5 MG CAP	5	PA S
glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA S
glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA S
glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA S
KESIMPTA 20 MG/0.4ML SOLN A-INJ	5	PA S
MAVENCLAD (10 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (4 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (5 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (6 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (7 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (8 TABS) 10 MG TAB THPK	5	PA S
MAVENCLAD (9 TABS) 10 MG TAB THPK	5	PA S
MAYZENT 0.25 MG TAB	5	PA S
MAYZENT 1 MG TAB	5	PA S
MAYZENT 2 MG TAB	5	PA S
MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAYZENT STARTER PACK 7 X 0.25 MG TAB THPK	5	PA S
OCREVUS 300 MG/10ML SOLUTION	5	PA S
PLEGRIDY 125 MCG/0.5ML SOLN A-INJ	5	PA S
PLEGRIDY 125 MCG/0.5ML SOLN PRSYR	5	PA S
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN A-INJ	5	PA S
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PRSYR	5	PA S
REBIF 22 MCG/0.5ML SOLN PRSYR	5	PA S
REBIF 44 MCG/0.5ML SOLN PRSYR	5	PA S
REBIF REBIDOSE 22 MCG/0.5ML SOLN A-INJ	5	PA S
REBIF REBIDOSE 44 MCG/0.5ML SOLN A-INJ	5	PA S
REBIF REBIDOSE TITRATION PACK 6X8.8 & 6X22 MCG SOLN A-INJ	5	PA S
REBIF TITRATION PACK 6X8.8 & 6X22 MCG SOLN PRSYR	5	PA S
TASCENSO ODT 0.25 MG TAB DISP	5	QL 30 / 30 days PA S
TASCENSO ODT 0.5 MG TAB DISP	5	QL 30 / 30 days PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
teriflunomide tab 14 mg	5	PA S
teriflunomide tab 7 mg	5	PA S
VUMERITY 231 MG CAP DR	5	PA S
ZEPOSIA 0.92 MG CAP	5	PA S
ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK	5	PA S
ZEPOSIA STARTER KIT 0.23MG &0.46MG 0.92MG(21) CAP THPK	5	PA S
DENTAL AND ORAL AGENTS		
cevimeline hcl cap 30 mg	2	
chlorhexidine gluconate soln 0.12%	1	
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications
sodium fluoride cream 1.1%	1	ACA Affordable Care Act Medications
DENTA 5000 PLUS SENSITIVE 1.1-5 % GEL	2	ACA Affordable Care Act Medications
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
stannous fluoride gel 0.4%	2	ACA Affordable Care Act Medications
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications
stannous fluoride conc 0.63%	2	ACA Affordable Care Act Medications
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUORIDEX SENSITIVITY RELIEF 1.1-5 % GEL	2	ACA Affordable Care Act Medications
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications
FLUORIMAX 5000 SENSITIVE 1.1-5 % GEL	2	ACA Affordable Care Act Medications
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
stannous fluoride gel 0.4%	2	ACA Affordable Care Act Medications
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications
triamcinolone acetonide dental paste 0.1%	2	
triamcinolone acetonide dental paste 0.1%	2	
PARODONTAX 0.454 % PASTE	4	ACA Affordable Care Act Medications
chlorhexidine gluconate soln 0.12%	1	
stannous fluoride conc 0.63%	2	ACA Affordable Care Act Medications
pilocarpine hcl tab 5 mg	2	
pilocarpine hcl tab 7.5 mg	2	
PREVIDENT 0.2 % SOLUTION	4	
PREVIDENT 5000 ENAMEL PROTECT 1.1-5 % GEL	2	ACA Affordable Care Act Medications
PREVIDENT 5000 SENSITIVE 1.1-5 % GEL	2	ACA Affordable Care Act Medications
SENSODYNE COMPLETE PROTECTION 0.454 % PASTE	4	ACA Affordable Care Act Medications
SENSODYNE RAPID RELIEF 0.454 % PASTE	4	ACA Affordable Care Act Medications
SENSODYNE REPAIR & PROTECT 0.454 % PASTE	4	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
sodium fluoride cream 1.1%	1	ACA Affordable Care Act Medications
SOD FLUORIDE-POTASSIUM NITRATE 1.1-5 % GEL	2	ACA Affordable Care Act Medications
sodium fluoride rinse 0.2%	1	ACA Affordable Care Act Medications
sodium fluoride cream 1.1%	1	ACA Affordable Care Act Medications
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
SODIUM FLUORIDE 5000 ENAMEL 1.1-5 % GEL	2	ACA Affordable Care Act Medications
sodium fluoride cream 1.1%	1	ACA Affordable Care Act Medications
sodium fluoride cream 1.1%	1	ACA Affordable Care Act Medications
sodium fluoride gel 1.1% (0.5% f)	1	ACA Affordable Care Act Medications
sodium fluoride paste 1.1%	1	ACA Affordable Care Act Medications
SODIUM FLUORIDE 5000 SENSITIVE 1.1-5 % GEL	2	ACA Affordable Care Act Medications
triamcinolone acetonide dental paste 0.1%	2	
DERMATOLOGICAL AGENTS ACNE AND ROSACEA AGENTS		
isotretinoin cap 10 mg	2	
isotretinoin cap 20 mg	2	
isotretinoin cap 30 mg	2	
isotretinoin cap 40 mg	2	
acitretin cap 10 mg	2	
acitretin cap 17.5 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
acitretin cap 25 mg	2	
adapalene cream 0.1%	2	
isotretinoin cap 10 mg	2	
isotretinoin cap 20 mg	2	
isotretinoin cap 30 mg	2	
isotretinoin cap 40 mg	2	
tretinoin cream 0.025%	2	
azelaic acid gel 15%	2	
benzoyl peroxide-erythromycin gel 5-3%	2	
brimonidine tartrate gel 0.33% (base equivalent)	2	
isotretinoin cap 10 mg	2	
isotretinoin cap 20 mg	2	
isotretinoin cap 30 mg	2	
isotretinoin cap 40 mg	2	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	2	
isotretinoin cap 10 mg	2	
isotretinoin cap 20 mg	2	
isotretinoin cap 30 mg	2	
isotretinoin cap 40 mg	2	
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	2	
RHOFADE 1 % CREAM	4	
sulfacetamide sodium lotion 10% (acne)	2	
tazarotene cream 0.05%	4	
tazarotene gel 0.05%	2	
tazarotene cream 0.1%	2	
tazarotene gel 0.1%	2	
tretinoin gel 0.01%	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tretinoin cream 0.025%	2	
tretinoin cream 0.05%	2	
tretinoin cream 0.1%	2	
isotretinoin cap 10 mg	2	
isotretinoin cap 20 mg	2	
isotretinoin cap 30 mg	2	
isotretinoin cap 40 mg	2	
DERMATITIS AND PRURITUS AGENTS		
ADBRY 150 MG/ML SOLN PRSYR	5	PA S
alclometasone dipropionate cream 0.05%	2	
ALCLOMETASONE DIPROPIONATE 0.05 % OINTMENT	2	
alclometasone dipropionate oint 0.05%	2	
AMCINONIDE 0.1 % LOTION	4	
lactic acid (ammonium lactate) cream 12%	2	
lactic acid (ammonium lactate) lotion 12%	2	
hydrocortisone acetate suppos 25 mg	2	
hydrocortisone acetate suppos 25 mg	2	
betamethasone dipropionate cream 0.05%	2	
betamethasone dipropionate lotion 0.05%	2	
betamethasone dipropionate oint 0.05%	2	
betamethasone dipropionate augmented cream 0.05%	1	
BETAMETHASONE DIPROPIONATE AUG 0.05 % GEL	4	
betamethasone dipropionate augmented lotion 0.05%	2	
betamethasone dipropionate augmented oint 0.05%	2	
betamethasone valerate cream 0.1% (base equivalent)	2	
BETAMETHASONE VALERATE 0.1 % LOTION	2	
betamethasone valerate lotion 0.1% (base equivalent)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
betamethasone valerate oint 0.1% (base equivalent)	2	
BYLVAY (PELLETS) 200 MCG CAP SPRINK	5	PA S
BYLVAY (PELLETS) 600 MCG CAP SPRINK	5	PA S
BYLVAY 1200 MCG CAP	5	PA S
BYLVAY 400 MCG CAP	5	PA S
clobetasol propionate emollient base cream 0.05%	2	
clobetasol propionate cream 0.05%	2	
clobetasol propionate gel 0.05%	2	
clobetasol propionate oint 0.05%	2	
clobetasol propionate soln 0.05%	2	
clobetasol propionate emollient base cream 0.05%	2	
clocortolone pivalate cream 0.1%	2	
desonide cream 0.05%	2	
desonide oint 0.05%	2	
desoximetasone cream 0.25%	2	
desoximetasone oint 0.25%	2	
fluocinolone acetonide cream 0.01%	2	
fluocinolone acetonide soln 0.01%	2	
fluocinolone acetonide cream 0.025%	2	
fluocinolone acetonide oint 0.025%	2	
fluocinolone acetonide oil 0.01% (body oil)	2	
fluocinolone acetonide oil 0.01% (scalp oil)	2	
fluocinonide cream 0.05%	2	
fluocinonide gel 0.05%	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluocinonide oint 0.05%	2	
fluocinonide soln 0.05%	2	
fluocinonide cream 0.1%	2	
fluticasone propionate oint 0.005%	2	
fluticasone propionate cream 0.05%	1	
halobetasol propionate cream 0.05%	2	
hydrocortisone acetate suppos 25 mg	2	
HYDROCORTISONE (PERIANAL) 1 % CREAM	2	
hydrocortisone perianal cream 2.5%	2	
hydrocortisone cream 2.5%	1	
HYDROCORTISONE 2.5 % LOTION	1	
hydrocortisone lotion 2.5%	1	
hydrocortisone oint 2.5%	1	
hydrocortisone acetate suppos 25 mg	2	
mometasone furoate cream 0.1%	2	
mometasone furoate oint 0.1%	1	
mometasone furoate solution 0.1% (lotion)	2	
hydrocortisone perianal cream 2.5%	2	
PROCTOCORT 1 % CREAM	2	
hydrocortisone perianal cream 2.5%	2	
hydrocortisone perianal cream 2.5%	2	
selenium sulfide lotion 2.5%	1	
tacrolimus oint 0.03%	2	
tacrolimus oint 0.1%	2	
triamcinolone acetonide cream 0.025%	1	
triamcinolone acetonide lotion 0.025%	2	
triamcinolone acetonide oint 0.025%	1	
triamcinolone acetonide cream 0.1%	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
triamcinolone acetonide lotion 0.1%	2	
triamcinolone acetonide oint 0.1%	1	
triamcinolone acetonide cream 0.5%	1	
triamcinolone acetonide oint 0.5%	1	
triamcinolone acetonide cream 0.5%	1	
DERMATOLOGICAL AGENTS, OTHER		
ANALPRAM HC 2.5-1 % LOTION	4	
ANALPRAM-HC 2.5-1 % LOTION	4	
calcipotriene cream 0.005%	2	
CALCIPOTRIENE 0.005 % SOLUTION	2	
calcipotriene soln 0.005% (50 mcg/ml)	2	
CALCITRIOL 3 MCG/GM OINTMENT	4	
CIBINQO 100 MG TAB	5	QL 30 / 30 days PA S
CIBINQO 200 MG TAB	5	QL 30 / 30 days PA S
CIBINQO 50 MG TAB	5	QL 30 / 30 days PA S
clotrimazole w/ betamethasone cream 1-0.05%	1	
DRYSOL 20 % SOLUTION	4	
FLUOROURACIL 2 % SOLUTION	4	
fluorouracil cream 5%	2	
fluorouracil soln 5%	2	
HYFTOR 0.2 % GEL	5	PA S QLC 30 / 90 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
imiquimod cream 5%	2	
METHOXSALEN RAPID 10 MG CAP	4	
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	2	
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	2	
OPZELURA 1.5 % CREAM	5	QL 60 / 30 days PA S
OTEZLA 20 MG TAB	5	PA S
OTEZLA 30 MG TAB	5	PA S
PODOFILOX 0.5 % SOLUTION	4	
PROCTOFOAM HC 1-1 % FOAM	4	
REGRANEX 0.01 % GEL	4	
SANTYL 250 UNIT/GM OINTMENT	4	
silver sulfadiazine cream 1%	1	
silver sulfadiazine cream 1%	1	
VALCHLOR 0.016 % GEL	5	PA S
VEREGEN 15 % OINTMENT	4	
ZORYVE 0.15 % CREAM	5	QL 60 / 30 day(s) PA S
ZORYVE 0.3 % CREAM	5	QL 60 / 30 day(s) PA S
ZORYVE 0.3 % FOAM	5	QL 60 / 30 day(s) PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEDICULICIDES/SCABICIDES		
LINDANE 1 % SHAMPOO	4	
malathion lotion 0.5%	2	
NATROBA 0.9 % SUSPENSION	4	
permethrin cream 5%	2	
SOOLANTRA 1 % CREAM	2	
SPINOSAD 0.9 % SUSPENSION	4	
TOPICAL ANTI-INFECTIVES		
acyclovir oint 5%	2	
ALTABAX 1 % OINTMENT	4	
ciclopirox solution 8%	2	
ciclopirox gel 0.77%	2	
ciclopirox shampoo 1%	2	
ciclopirox solution 8%	2	
ciclopirox olamine cream 0.77% (base equiv)	2	
clindamycin phosphate swab 1%	2	
clindamycin phosphate swab 1%	2	
clindamycin phosphate gel 1% (once-daily)	2	
clindamycin phosphate gel 1% (twice-daily)	2	
clindamycin phosphate lotion 1%	2	
clindamycin phosphate soln 1%	2	
clindamycin phosphate swab 1%	2	
ERY 2 % PAD	4	
erythromycin gel 2%	2	
erythromycin soln 2%	2	
mupirocin oint 2%	1	
penciclovir cream 1%	2	
SULFAMYLON 85 MG/GM CREAM	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XEPI 1 % CREAM	4	
ELECTROLYTES/MINERALS/METALS/VITAMINS ELECTROLYTE/MINERAL REPLACEMENT		
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 300 mg/5ml (60 mg/5ml elemental fe)	2	ACA Affordable Care Act Medications
ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
FLORICAL 8.3-364 MG CAP	4	ACA Affordable Care Act Medications
FLORICAL 8.3-364 MG TAB	4	ACA Affordable Care Act Medications
FLORIVA 0.25-400 MG-UNIT/ML LIQUID	4	ACA Affordable Care Act Medications
GALZIN 25 MG CAP	4	
GALZIN 50 MG CAP	4	
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IRON UP 15 MG/0.5ML LIQUID	3	ACA Affordable Care Act Medications
KLOR-CON 10 10 MEQ TAB ER	1	STC Trial and failure of 1 therapy: generic K-Tab
potassium chloride tab er 10 meq	1	
potassium chloride powder packet 20 meq	2	
KLOR-CON 8 MEQ TAB ER	1	
potassium chloride microencapsulated crys er tab 10 meq	1	
potassium chloride microencapsulated crys er tab 15 meq	2	
potassium chloride microencapsulated crys er tab 20 meq	1	
MONOCAL 625-22.75 MG TAB	4	ACA Affordable Care Act Medications
NOVAFERRUM PEDIATRIC DROPS 15 MG/ML LIQUID	3	ACA Affordable Care Act Medications
ferrous sulfate soln 220 mg/5ml (44 mg/5ml elemental fe)	1	ACA Affordable Care Act Medications
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1	ACA Affordable Care Act Medications
potassium chloride oral soln 10% (20 meq/15ml)	2	
potassium chloride powder packet 20 meq	2	
potassium chloride oral soln 10% (20 meq/15ml)	2	
potassium chloride oral soln 20% (40 meq/15ml)	2	
potassium chloride microencapsulated crys er tab 10 meq	1	
potassium chloride microencapsulated crys er tab 15 meq	2	
potassium chloride microencapsulated crys er tab 20 meq	1	
potassium chloride cap er 10 meq	1	
potassium chloride tab er 10 meq	1	
POTASSIUM CHLORIDE ER 15 MEQ TAB ER	2	
potassium chloride tab er 20 meq (1500 mg)	1	
potassium chloride cap er 8 meq	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
potassium chloride tab er 8 meq (600 mg)	1	
POTASSIUM CHLORIDE ER 8 MEQ TAB ER	4	
potassium citrate tab er 10 meq (1080 mg)	2	
potassium citrate tab er 15 meq (1620 mg)	2	
potassium citrate tab er 5 meq (540 mg)	2	
PRENATAL 19 CHEW TAB	3	
PRENATAL 19 29-1 MG CHEW TAB	3	
PRENATAL 19 29-1 MG TAB	3	
PRENATAL PLUS 27-1 MG TAB	3	
PRENATAL-U 106.5-1 MG CAP	3	
SE-NATAL 19 29-1 MG CHEW TAB	3	
SE-NATAL 19 29-1 MG TAB	3	
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	1	ACA Affordable Care Act Medications
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)	1	ACA Affordable Care Act Medications
SODIUM FLUORIDE 1.1 (0.5 F) MG TAB	3	ACA Affordable Care Act Medications
SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION	1	ACA Affordable Care Act Medications
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	1	ACA Affordable Care Act Medications
SODIUM FLUORIDE 2.2 (1 F) MG TAB	3	ACA Affordable Care Act Medications
TRINATE TAB	3	
VINATE II 29-1 MG TAB	3	
VINATE ONE 60-1 MG TAB	3	
carbonyl iron susp 15 mg/1.25ml (elemental iron)	2	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELECTROLYTE/MINERAL/METAL MODIFIERS		
CHEMET 100 MG CAP	3	
CUPRIMINE 250 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic penicillamine
deferiprone tab 1000 mg	5	S
deferiprone tab 500 mg	5	S
EXJADE 125 MG TAB SOL	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
EXJADE 250 MG TAB SOL	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
EXJADE 500 MG TAB SOL	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
FERRIPROX 100 MG/ML SOLUTION	5	PA S
JADENU 180 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JADENU 360 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
JADENU 90 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
JADENU SPRINKLE 180 MG PACKET	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
JADENU SPRINKLE 360 MG PACKET	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
JADENU SPRINKLE 90 MG PACKET	5	PA ST S STC Trial and failure of 1 therapy: generic deferasirox
JYNARQUE 15 MG TAB	5	QL 60 / 30 day(s) PA S
JYNARQUE 15 MG TAB THPK	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JYNARQUE 30 & 15 MG TAB THPK	5	PA S
JYNARQUE 30 MG TAB	5	QL 60 / 30 day(s) PA S
JYNARQUE 45 & 15 MG TAB THPK	5	PA S
JYNARQUE 60 & 30 MG TAB THPK	5	PA S
JYNARQUE 90 & 30 MG TAB THPK	5	PA S
penicillamine tab 250 mg	5	S
SYPRINE 250 MG CAP	5	PA ST S STC Trial and failure of 1 therapy: generic Syprine
tolvaptan tab 15 mg	5	QL 60 / 30 days PA S
tolvaptan tab therapy pack 15 mg	5	PA S
tolvaptan tab therapy pack 30 & 15 mg	5	PA S
tolvaptan tab 30 mg	5	QL 60 / 30 days PA S
tolvaptan tab therapy pack 45 & 15 mg	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tolvaptan tab therapy pack 60 & 30 mg	5	PA S
tolvaptan tab therapy pack 90 & 30 mg	5	PA S
trientine hcl cap 250 mg	5	S
PHOSPHATE BINDERS		
AURYXIA 1 GM 210 MG(FE) TAB	4	
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	2	
calcium acetate (phosphate binder) tab 667 mg	2	
calcium acetate (phosphate binder) tab 667 mg	2	
FERRIC CITRATE 1 GM 210 MG(FE) TAB	4	
FOSRENOL 1000 MG PACKET	4	
FOSRENOL 750 MG PACKET	4	
lanthanum carbonate chew tab 1000 mg (elemental)	2	
lanthanum carbonate chew tab 500 mg (elemental)	2	
lanthanum carbonate chew tab 750 mg (elemental)	2	
sevelamer carbonate packet 0.8 gm	2	
sevelamer carbonate packet 2.4 gm	2	
sevelamer carbonate tab 800 mg	2	
sevelamer hcl tab 400 mg	2	
sevelamer hcl tab 800 mg	2	
VELPHORO 500 MG CHEW TAB	5	PA S
POTASSIUM BINDERS		
LOKELMA 10 GM PACKET	3	
LOKELMA 5 GM PACKET	3	
sodium polystyrene sulfonate powder*	2	
sodium polystyrene sulfonate susp 15 gm/60ml	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPS (SODIUM POLYSTYRENE SULF) 30 GM/120ML SUSPENSION	4	
VELTASSA 1 GM PACKET	5	PA S
VELTASSA 16.8 GM PACKET	5	PA S
VELTASSA 25.2 GM PACKET	5	PA S
VELTASSA 8.4 GM PACKET	5	PA S
VITAMINS		
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
cyanocobalamin inj 1000 mcg/ml	1	
cyanocobalamin inj 1000 mcg/ml	1	
folic acid cap 0.8 mg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid cap 0.8 mg	1	ACA Affordable Care Act Medications
folic acid tab 1 mg	1	
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
HYDROXOCOBALAMIN ACETATE 1000 MCG/ML SOLUTION	4	
folic acid tab 1 mg	1	
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 800 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 1 mg	1	
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
folic acid tab 400 mcg	1	ACA Affordable Care Act Medications
GASTROINTESTINAL AGENTS ANTI-CONSTIPATION AGENTS		
lactulose solution 10 gm/15ml	2	
lactulose (encephalopathy) solution 10 gm/15ml	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	2	ACA Affordable Care Act Medications
lactulose (encephalopathy) solution 10 gm/15ml	1	
lactulose solution 10 gm/15ml	2	
lactulose solution 10 gm/15ml	2	
lactulose (encephalopathy) solution 10 gm/15ml	1	
LINZESS 145 MCG CAP	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LINZESS 290 MCG CAP	3	
LINZESS 72 MCG CAP	3	
lubiprostone cap 24 mcg	2	
lubiprostone cap 8 mcg	2	
MOVANTIK 12.5 MG TAB	3	
MOVANTIK 25 MG TAB	3	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	2	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	2	ACA Affordable Care Act Medications
PEG-PREP 5-210 MG-GM KIT	4	QLC 2 / 365 days
RELISTOR 12 MG/0.6ML SOLUTION	5	PA S
RELISTOR 150 MG TAB	5	PA S
RELISTOR 8 MG/0.4ML SOLUTION	5	PA S
SUTAB 1479-225-188 MG TAB	4	
SYMPROIC 0.2 MG TAB	3	
TRULANCE 3 MG TAB	3	
ANTI-DIARRHEAL AGENTS		
diphenoxylate w/ atropine tab 2.5-0.025 mg	2	
DIPHENOXYLATE-ATROPINE 2.5-0.025 MG/5ML LIQUID	4	
VIBERZI 100 MG TAB	4	
VIBERZI 75 MG TAB	4	
XERMELO 250 MG TAB	5	PA S
ANTISPASMODICS, GASTROINTESTINAL		
dicyclomine hcl cap 10 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
dicyclomine hcl oral soln 10 mg/5ml	2	
dicyclomine hcl tab 20 mg	1	
glycopyrrolate tab 1 mg	1	
glycopyrrolate oral soln 1 mg/5ml	2	
glycopyrrolate tab 2 mg	2	
hyoscyamine sulfate sl tab 0.125 mg	2	
hyoscyamine sulfate tab 0.125 mg	2	
hyoscyamine sulfate tab disint 0.125 mg	2	
hyoscyamine sulfate elixir 0.125 mg/5ml	2	
hyoscyamine sulfate soln 0.125 mg/ml	2	
hyoscyamine sulfate tab er 12hr 0.375 mg	2	
methscopolamine bromide tab 2.5 mg	2	
methscopolamine bromide tab 5 mg	2	
GASTROINTESTINAL AGENTS, OTHER		
cromolyn sodium oral conc 100 mg/5ml	2	
GAVILYTE-C 240 GM RECON SOLN	4	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	ACA Affordable Care Act Medications
HUMATROPE 12 MG CARTRIDGE	5	PA S
HUMATROPE 24 MG CARTRIDGE	5	PA S
HUMATROPE 6 MG CARTRIDGE	5	PA S
LIVMARLI 10 MG TAB	5	PA S
LIVMARLI 15 MG TAB	5	PA S
LIVMARLI 19 MG/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIVMARLI 20 MG TAB	5	PA S
LIVMARLI 30 MG TAB	5	PA S
LIVMARLI 9.5 MG/ML SOLUTION	5	PA S
OCALIVA 10 MG TAB	5	PA S
OCALIVA 5 MG TAB	5	PA S
OMNITROPE 10 MG/1.5ML SOLN CART	5	PA S
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	ACA Affordable Care Act Medications
ursodiol tab 250 mg	2	
ursodiol cap 300 mg	2	
ursodiol tab 500 mg	2	
HISTAMINE2 (H2) RECEPTOR ANTAGONISTS		
cimetidine tab 200 mg	2	
cimetidine tab 300 mg	2	
cimetidine tab 400 mg	2	
cimetidine tab 800 mg	2	
cimetidine hcl soln 300 mg/5ml	2	
famotidine tab 20 mg	1	
famotidine tab 40 mg	1	
famotidine for susp 40 mg/5ml	2	
nizatidine cap 150 mg	4	
NIZATIDINE 300 MG CAP	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROTECTANTS		
misoprostol tab 100 mcg	1	
misoprostol tab 200 mcg	1	
sucralfate tab 1 gm	2	
PROTON PUMP INHIBITORS		
dexlansoprazole cap delayed release 30 mg	4	ST STC Trial and failure of 3 therapies: omeprazole, lansoprazole and pantoprazole
dexlansoprazole cap delayed release 60 mg	4	ST STC Trial and failure of 3 therapies: omeprazole, lansoprazole and pantoprazole
esomeprazole magnesium for delayed release susp packet 10 mg	2	
esomeprazole magnesium cap delayed release 20 mg (base eq)	2	
esomeprazole magnesium for delayed release susp packet 20 mg	2	
esomeprazole magnesium cap delayed release 40 mg (base eq)	2	
esomeprazole magnesium for delayed release susp packet 40 mg	2	
lansoprazole cap delayed release 15 mg	2	
lansoprazole cap delayed release 30 mg	1	
omeprazole cap delayed release 10 mg	1	
omeprazole cap delayed release 20 mg	1	
omeprazole cap delayed release 40 mg	1	
pantoprazole sodium ec tab 20 mg (base equiv)	1	
pantoprazole sodium ec tab 40 mg (base equiv)	1	
rabeprazole sodium ec tab 20 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT		
betaine powder for oral solution**	5	PA S
CARBAGLU 200 MG TAB SOL	5	PA S
carglumic acid soluble tab 200 mg	5	PA S
CERDELGA 84 MG CAP	5	PA S
CHOLBAM 250 MG CAP	5	PA S
CHOLBAM 50 MG CAP	5	PA S
CREON 12000-38000 UNIT CP DR PART	3	
CREON 24000-76000 UNIT CP DR PART	3	
CREON 3000-9500 UNIT CP DR PART	3	
CREON 36000-114000 UNIT CP DR PART	3	
CREON 6000-19000 UNIT CP DR PART	3	
CYSTADANE POWDER	5	PA S
CYSTADROPS 0.37 % SOLUTION	5	PA S
CYSTAGON 150 MG CAP	5	PA S
CYSTAGON 50 MG CAP	5	PA S
CYSTARAN 0.44 % SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DAYBUE 200 MG/ML SOLUTION	5	PA S
dichlorphenamide tab 50 mg	5	PA S
DROXIA 200 MG CAP	5	PA S
DROXIA 300 MG CAP	5	PA S
DROXIA 400 MG CAP	5	PA S
ENDARI 5 GM PACKET	5	PA S
EVRYSDI 0.75 MG/ML RECON SOLN	5	PA S
EVRYSDI 5 MG TAB	5	PA S
GALAFOLD 123 MG CAP	5	PA S
sapropterin dihydrochloride powder packet 100 mg	5	PA S
sapropterin dihydrochloride tab 100 mg	5	PA S
sapropterin dihydrochloride powder packet 500 mg	5	PA S
JOENJA 70 MG TAB	5	PA S
KEVEYIS 50 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KUVAN 100 MG PACKET	5	PA S
KUVAN 100 MG TAB	5	PA S
KUVAN 500 MG PACKET	5	PA S
levocarnitine oral soln 1 gm/10ml (10%)	2	
levocarnitine tab 330 mg	2	
levocarnitine oral soln 1 gm/10ml (10%)	2	
MYALEPT 11.3 MG RECON SOLN	5	PA S
nitisinone cap 10 mg	5	PA S
nitisinone cap 2 mg	5	PA S
nitisinone cap 20 mg	5	PA S
nitisinone cap 5 mg	5	PA S
NITYR 10 MG TAB	5	PA S
NITYR 2 MG TAB	5	PA S
NITYR 5 MG TAB	5	PA S
ORFADIN 10 MG CAP	5	PA S
ORFADIN 2 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORFADIN 20 MG CAP	5	PA S
ORFADIN 4 MG/ML SUSPENSION	5	PA S
ORFADIN 5 MG CAP	5	PA S
dichlorphenamide tab 50 mg	5	PA S
PALYNZIQ 10 MG/0.5ML SOLN PRSYR	5	PA S
PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR	5	PA S
PALYNZIQ 20 MG/ML SOLN PRSYR	5	PA S
PHEBURANE 483 MG/GM PELLET	5	PA S
PROCYSBI 25 MG CAP DR	5	PA S
PROCYSBI 75 MG CAP DR	5	PA S
PYRUKYND 20 MG TAB	5	PA S
PYRUKYND 5 MG TAB	5	PA S
PYRUKYND 50 MG TAB	5	PA S
RAVICTI 1.1 GM/ML LIQUID	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
sapropterin dihydrochloride powder packet 100 mg	5	PA S
sapropterin dihydrochloride tab 100 mg	5	PA S
sapropterin dihydrochloride powder packet 500 mg	5	PA S
SKYCLARYS 50 MG CAP	5	PA S
sodium phenylbutyrate oral powder 3 gm/teaspoonful	5	PA S
sodium phenylbutyrate tab 500 mg	5	PA S
SOHONOS 1 MG CAP	5	PA S
SOHONOS 1.5 MG CAP	5	PA S
SOHONOS 10 MG CAP	5	PA S
SOHONOS 2.5 MG CAP	5	PA S
SOHONOS 5 MG CAP	5	PA S
STRENSIQ 18 MG/0.45ML SOLUTION	5	PA S
STRENSIQ 28 MG/0.7ML SOLUTION	5	PA S
STRENSIQ 40 MG/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STRENSIQ 80 MG/0.8ML SOLUTION	5	PA S
SUCRAID 8500 UNIT/ML SOLUTION	5	PA S
VOXZOGO 0.4 MG RECON SOLN	5	PA S
VOXZOGO 0.56 MG RECON SOLN	5	PA S
VOXZOGO 1.2 MG RECON SOLN	5	PA S
VYNDAMAX 61 MG CAP	5	PA S
VYNDAQEL 20 MG CAP	5	PA S
XURIDEN 2 GM PACKET	5	PA S
ZENPEP 10000-32000 UNIT CP DR PART	3	
ZENPEP 15000-47000 UNIT CP DR PART	3	
ZENPEP 20000-63000 UNIT CP DR PART	3	
ZENPEP 25000-79000 UNIT CP DR PART	3	
ZENPEP 3000-10000 UNIT CP DR PART	3	
ZENPEP 40000-126000 UNIT CP DR PART	3	
ZENPEP 5000-24000 UNIT CP DR PART	3	
ZENPEP 60000-189600 UNIT CP DR PART	3	
ZOKINVY 50 MG CAP	5	PA S
ZOKINVY 75 MG CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENITOURINARY AGENTS ANTISPASMODICS, URINARY		
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	2	
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	2	
flavoxate hcl tab 100 mg	2	
MYRBETRIQ 25 MG TAB ER 24H	3	
MYRBETRIQ 50 MG TAB ER 24H	3	
MYRBETRIQ 8 MG/ML SRER	3	
oxybutynin chloride tab 5 mg	1	
oxybutynin chloride solution 5 mg/5ml	1	
oxybutynin chloride tab er 24hr 10 mg	1	
oxybutynin chloride tab er 24hr 15 mg	1	
oxybutynin chloride tab er 24hr 5 mg	1	
solifenacin succinate tab 10 mg	1	
solifenacin succinate tab 5 mg	1	
tolterodine tartrate tab 1 mg	2	
tolterodine tartrate tab 2 mg	2	
tolterodine tartrate cap er 24hr 2 mg	2	
tolterodine tartrate cap er 24hr 4 mg	2	
trospium chloride tab 20 mg	2	
trospium chloride cap er 24hr 60 mg	2	
BENIGN PROSTATIC HYPERTROPHY AGENTS		
alfuzosin hcl tab er 24hr 10 mg	1	
CARDURA XL 4 MG TAB ER 24H	4	
dutasteride cap 0.5 mg	1	
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	2	
finasteride tab 5 mg	1	
silodosin cap 4 mg	2	
silodosin cap 8 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tamsulosin hcl cap 0.4 mg	1	
GENITOURINARY AGENTS, OTHER		
ADDYI 100 MG TAB	4	
bethanechol chloride tab 10 mg	2	
bethanechol chloride tab 25 mg	2	
bethanechol chloride tab 5 mg	2	
bethanechol chloride tab 50 mg	2	
ELMIRON 100 MG CAP	4	
ENCARE 100 MG SUPPOS	3	PV Preventive ACA Affordable Care Act Medications
FILSPARI 200 MG TAB	5	QL 30 / 30 days PA S
FILSPARI 400 MG TAB	5	QL 30 / 30 days PA S
INTRAROSA 6.5 MG INSERT	4	
K-PHOS NO 2 305-700 MG TAB	3	
LITHOSTAT 250 MG TAB	4	
OPTIONS GYNOL II CONTRACEPTIVE 3 % GEL	3	PV Preventive ACA Affordable Care Act Medications
PHEXXI 1.8-1-0.4 % GEL	4	PV Preventive ACA Affordable Care Act Medications
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2	
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2	
potassium phosphate monobasic tab 500 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2	
sodium citrate & citric acid soln 500-334 mg/5ml	2	
sodium citrate & citric acid soln 500-334 mg/5ml	2	
sodium citrate & citric acid soln 500-334 mg/5ml	2	
TODAY SPONGE 1000 MG MISC	4	PV Preventive ACA Affordable Care Act Medications
VCF VAGINAL CONTRACEPTIVE 12.5 % FOAM	4	PV Preventive ACA Affordable Care Act Medications
VCF VAGINAL CONTRACEPTIVE 28 % FILM	4	PV Preventive ACA Affordable Care Act Medications
VCF VAGINAL CONTRACEPTIVE 4 % GEL	4	PV Preventive ACA Affordable Care Act Medications
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	2	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
dexamethasone tab 0.5 mg	2	
dexamethasone elixir 0.5 mg/5ml	2	
DEXAMETHASONE 0.5 MG/5ML SOLUTION	4	
dexamethasone tab 0.75 mg	2	
dexamethasone tab 1 mg	2	
dexamethasone tab 1.5 mg	1	
dexamethasone tab 2 mg	2	
dexamethasone tab 4 mg	1	
dexamethasone tab 6 mg	1	
DEXAMETHASONE INTENSOL 1 MG/ML CONC	4	
fludrocortisone acetate tab 0.1 mg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
methylprednisolone tab 16 mg	1	
methylprednisolone tab 32 mg	1	
methylprednisolone tab 4 mg	1	
methylprednisolone tab therapy pack 4 mg (21)	1	
methylprednisolone tab 8 mg	2	
prednisolone soln 15 mg/5ml	2	
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1	
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	2	
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	2	
prednisone tab 1 mg	1	
prednisone tab therapy pack 10 mg (21)	1	
prednisone tab therapy pack 10 mg (48)	2	
prednisone tab 10 mg	1	
prednisone tab 2.5 mg	1	
prednisone tab 20 mg	1	
prednisone tab therapy pack 5 mg (21)	1	
prednisone tab therapy pack 5 mg (48)	1	
prednisone tab 5 mg	1	
PREDNISONE 5 MG/5ML SOLUTION	3	
prednisone tab 50 mg	1	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)		
desmopressin acetate nasal spray soln 0.01% (refrigerated)	2	
desmopressin acetate tab 0.1 mg	2	
desmopressin acetate tab 0.2 mg	2	
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desmopressin acetate inj 4 mcg/ml	2	
desmopressin acetate preservative free (pf) inj 4 mcg/ml	2	
desmopressin acetate nasal spray soln 0.01%	2	
DESMOPRESSIN ACETATE SPRAY 0.01 % SOLUTION	2	
GENOTROPIN 12 MG CARTRIDGE	5	PA S
GENOTROPIN 5 MG CARTRIDGE	5	PA S
GENOTROPIN MINIQUICK 0.2 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 0.4 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 0.6 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 0.8 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 1 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 1.2 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 1.4 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 1.6 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 1.8 MG PRSYR	5	PA S
GENOTROPIN MINIQUICK 2 MG PRSYR	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCRELEX 40 MG/4ML SOLUTION	5	PA S
ISTURISA 1 MG TAB	5	PA S
ISTURISA 5 MG TAB	5	PA S
MYFEMBREE 40-1-0.5 MG TAB	5	PA S
NGENLA 24 MG/1.2ML SOLN PEN	5	PA S
NGENLA 60 MG/1.2ML SOLN PEN	5	PA S
NORDITROPIN FLEXPRO 10 MG/1.5ML SOLN PEN	5	PA S
NORDITROPIN FLEXPRO 15 MG/1.5ML SOLN PEN	5	PA S
NORDITROPIN FLEXPRO 30 MG/3ML SOLN PEN	5	PA S
NORDITROPIN FLEXPRO 5 MG/1.5ML SOLN PEN	5	PA S
NUTROPIN AQ NUSPIN 10 10 MG/2ML SOLN PEN	5	PA S
NUTROPIN AQ NUSPIN 20 20 MG/2ML SOLN PEN	5	PA S
NUTROPIN AQ NUSPIN 5 5 MG/2ML SOLN PEN	5	PA S
OMNITROPE 5 MG/1.5ML SOLN CART	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNITROPE 5.8 MG RECON SOLN	5	PA S
SAIZEN 5 MG RECON SOLN	5	PA S
SAIZEN 8.8 MG RECON SOLN	5	PA S
SEROSTIM 4 MG RECON SOLN	5	PA S
SEROSTIM 5 MG RECON SOLN	5	PA S
SEROSTIM 6 MG RECON SOLN	5	PA S
SKYTROFA 11 MG CARTRIDGE	5	PA S
SKYTROFA 13.3 MG CARTRIDGE	5	PA S
SKYTROFA 3 MG CARTRIDGE	5	PA S
SKYTROFA 3.6 MG CARTRIDGE	5	PA S
SKYTROFA 4.3 MG CARTRIDGE	5	PA S
SKYTROFA 5.2 MG CARTRIDGE	5	PA S
SKYTROFA 6.3 MG CARTRIDGE	5	PA S
SKYTROFA 7.6 MG CARTRIDGE	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYTROFA 9.1 MG CARTRIDGE	5	PA S
SOGROYA 10 MG/1.5ML SOLN PEN	5	PA S
SOGROYA 15 MG/1.5ML SOLN PEN	5	PA S
SOGROYA 5 MG/1.5ML SOLN PEN	5	PA S
ZOMACTON 10 MG RECON SOLN	5	PA S
ZOMACTON 5 MG RECON SOLN	5	PA S
ZORBTIVE 8.8 MG RECON SOLN	5	PA S
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PROSTAGLANDINS)		
CERVIDIL 10 MG INSERT	4	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS) ANDROGENS		
danazol cap 100 mg	2	
danazol cap 200 mg	2	
danazol cap 50 mg	2	
testosterone cypionate im inj in oil 100 mg/ml	1	QL 10 / 28 day(s) ST STC Trial and failure of 1 therapy: generic Depo-testosterone
testosterone cypionate im inj in oil 200 mg/ml	2	QL 10 / 28 day(s) ST STC Trial and failure of 1 therapy: generic Depo-testosterone

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
METHITEST 10 MG TAB	4	
testosterone td gel 20.25 mg/act (1.62%)	2	QL 150 / 30 days
testosterone td gel 12.5 mg/act (1%)	2	QL 300 / 30 day(s)
testosterone td gel 20.25 mg/act (1.62%)	2	QL 150 / 30 days
testosterone td gel 25 mg/2.5gm (1%)	2	QL 150 / 30 days
testosterone td soln 30 mg/act	2	QL 150 / 30 days
testosterone td gel 50 mg/5gm (1%)	2	QL 150 / 30 days
testosterone cypionate im inj in oil 100 mg/ml	1	QL 10 / 28 day(s)
testosterone cypionate im inj in oil 200 mg/ml	2	QL 10 / 28 day(s)
TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION	4	QL 10 / 30 days
VOGELXO 50 MG/5GM (1%) GEL	2	QL 150 / 30 days
VOGELXO PUMP 12.5 MG/ACT (1%) GEL	2	QL 300 / 30 day(s)
ESTROGENS		
estradiol & norethindrone acetate tab 1-0.5 mg	2	
estradiol & norethindrone acetate tab 0.5-0.1 mg	2	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
estradiol & norethindrone acetate tab 0.5-0.1 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol & norethindrone acetate tab 1-0.5 mg	2	
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	PV Preventive ACA Affordable Care Act Medications
ANGELIQ 0.25-0.5 MG TAB	4	
ANGELIQ 0.5-1 MG TAB	4	
ANNOVERA 0.013-0.15 MG/24HR RING	4	ST QLC 1 / 364 days STC Trial and failure of either Nuvaring or Eluryng PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
CLIMARA PRO 0.045-0.015 MG/DAY PATCH WK	4	
COMBIPATCH 0.05-0.14 MG/DAY PATCH TW	4	
COMBIPATCH 0.05-0.25 MG/DAY PATCH TW	4	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
DEPO-ESTRADIOL 5 MG/ML OIL	4	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIVIGEL 0.25 MG/0.25GM GEL	4	
DIVIGEL 0.5 MG/0.5GM GEL	4	
DIVIGEL 0.75 MG/0.75GM GEL	4	
DIVIGEL 1 MG/GM GEL	4	
DIVIGEL 1.25 MG/1.25GM GEL	4	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	PV Preventive ACA Affordable Care Act Medications
estradiol td patch twice weekly 0.025 mg/24hr	2	
estradiol td patch twice weekly 0.0375 mg/24hr	2	
estradiol td patch twice weekly 0.05 mg/24hr	2	
estradiol td patch twice weekly 0.075 mg/24hr	2	
estradiol td patch twice weekly 0.1 mg/24hr	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.03 mg	1	PV Preventive ACA Affordable Care Act Medications
ELESTRIN 0.52 MG/0.87 GM (0.06%) GEL	4	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications
etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
estradiol td patch twice weekly 0.025 mg/24hr	2	
estradiol td patch weekly 0.025 mg/24hr	2	
estradiol td patch twice weekly 0.0375 mg/24hr	2	
estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)	2	
estradiol td patch twice weekly 0.05 mg/24hr	2	
estradiol td patch weekly 0.05 mg/24hr	2	
estradiol td patch weekly 0.06 mg/24hr	2	
estradiol td patch twice weekly 0.075 mg/24hr	2	
estradiol td patch weekly 0.075 mg/24hr	2	
estradiol td patch twice weekly 0.1 mg/24hr	2	
estradiol td patch weekly 0.1 mg/24hr	2	
estradiol vaginal cream 0.1 mg/gm	2	
estradiol td gel 0.25 mg/0.25gm (0.1%)	2	
estradiol tab 0.5 mg	1	
estradiol td gel 0.5 mg/0.5gm (0.1%)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol td gel 0.75 mg/0.75gm (0.1%)	2	
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	4	
estradiol tab 1 mg	1	
estradiol td gel 1 mg/gm (0.1%)	2	
estradiol td gel 1.25 mg/1.25gm (0.1%)	2	
estradiol vaginal tab 10 mcg	2	
estradiol tab 2 mg	1	
estradiol valerate im in oil 10 mg/ml	2	
estradiol valerate im in oil 20 mg/ml	2	
estradiol valerate im in oil 40 mg/ml	2	
estradiol & norethindrone acetate tab 0.5-0.1 mg	2	
estradiol & norethindrone acetate tab 1-0.5 mg	2	
ESTRING 7.5 MCG/24HR RING	4	
ESTROGEL 0.75 MG/1.25 GM (0.06%) GEL	4	
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	2	PV Preventive ACA Affordable Care Act Medications
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications
etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications
EVAMIST 1.53 MG/SPRAY SOLUTION	4	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	2	ACA Affordable Care Act Medications
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2	ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2	ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	2	PV Preventive ACA Affordable Care Act Medications
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB	4	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
estradiol td patch twice weekly 0.025 mg/24hr	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol td patch twice weekly 0.0375 mg/24hr	2	
estradiol td patch twice weekly 0.05 mg/24hr	2	
estradiol td patch twice weekly 0.075 mg/24hr	2	
estradiol td patch twice weekly 0.1 mg/24hr	2	
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
MENEST 0.3 MG TAB	4	
MENEST 0.625 MG TAB	4	
MENEST 1.25 MG TAB	4	
MENEST 2.5 MG TAB	4	
MENOSTAR 14 MCG/24HR PATCH WK	4	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estradiol & norethindrone acetate tab 1-0.5 mg	2	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
NATAZIA 3/2-2/2-3/1 MG TAB	4	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	2	ACA Affordable Care Act Medications
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	2	ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
NUVARING 0.12-0.015 MG/24HR RING	2	ST STC Trial and failure of 1 therapy: generic NuvaRing PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.03 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
PREMARIN 0.3 MG TAB	4	
PREMARIN 0.45 MG TAB	4	
PREMARIN 0.625 MG TAB	4	
PREMARIN 0.625 MG/GM CREAM	4	
PREMARIN 0.9 MG TAB	4	
PREMARIN 1.25 MG TAB	4	
PREMPHASE 0.625-5 MG TAB	4	
PREMPRO 0.3-1.5 MG TAB	4	
PREMPRO 0.45-1.5 MG TAB	4	
PREMPRO 0.625-2.5 MG TAB	4	
PREMPRO 0.625-5 MG TAB	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	PV Preventive ACA Affordable Care Act Medications
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.03 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	1	PV Preventive ACA Affordable Care Act Medications
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	1	PV Preventive ACA Affordable Care Act Medications
TYBLUME 0.1-20 MG-MCG CHEW TAB	4	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	2	PV Preventive ACA Affordable Care Act Medications
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	2	PV Preventive ACA Affordable Care Act Medications
VELIVET 0.1/0.125/0.15 -0.025 MG TAB	4	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	1	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	1	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2	PV Preventive ACA Affordable Care Act Medications
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	PV Preventive ACA Affordable Care Act Medications
estradiol vaginal tab 10 mcg	2	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	PV Preventive ACA Affordable Care Act Medications
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	1	PV Preventive ACA Affordable Care Act Medications
drospirenone-ethinyl estradiol tab 3-0.03 mg	1	PV Preventive ACA Affordable Care Act Medications
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS), OTHER		
PREFEST 1/1-0.09 MG (15/15) TAB	4	
PROGESTINS		
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR	4	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
ELLA 30 MG TAB	3	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone acetate tab 5 mg	2	
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
medroxyprogesterone acetate tab 10 mg	1	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	1	PV Preventive ACA Affordable Care Act Medications
medroxyprogesterone acetate im susp 150 mg/ml	1	PV Preventive ACA Affordable Care Act Medications
medroxyprogesterone acetate tab 2.5 mg	1	
medroxyprogesterone acetate tab 5 mg	1	
megestrol acetate tab 20 mg	1	
megestrol acetate tab 40 mg	1	
megestrol acetate susp 40 mg/ml	2	
megestrol acetate susp 40 mg/ml	2	
megestrol acetate susp 40 mg/ml	2	
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
norethindrone acetate tab 5 mg	2	
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
progesterone cap 100 mg	2	
progesterone cap 200 mg	2	
progesterone im in oil 50 mg/ml	2	
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications
norethindrone tab 0.35 mg	1	PV Preventive ACA Affordable Care Act Medications
levonorgestrel tab 1.5 mg	2	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE ESTROGEN RECEPTOR MODIFYING AGENTS		
DUAVEE 0.45-20 MG TAB	4	
OSPHENA 60 MG TAB	4	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)		
ADTHYZA 120 MG TAB	4	
ADTHYZA 130 MG TAB	4	
ADTHYZA 15 MG TAB	4	
ADTHYZA 16.25 MG TAB	4	
ADTHYZA 30 MG TAB	4	
ADTHYZA 32.5 MG TAB	4	
ADTHYZA 60 MG TAB	4	
ADTHYZA 65 MG TAB	4	
ADTHYZA 90 MG TAB	4	
ADTHYZA 97.5 MG TAB	4	
ARMOUR THYROID 120 MG TAB	4	
ARMOUR THYROID 15 MG TAB	4	
ARMOUR THYROID 180 MG TAB	4	
ARMOUR THYROID 240 MG TAB	4	
ARMOUR THYROID 30 MG TAB	4	
ARMOUR THYROID 300 MG TAB	4	
ARMOUR THYROID 60 MG TAB	4	
ARMOUR THYROID 90 MG TAB	4	
ERMEZA 150 MCG/5ML SOLUTION	4	
levothyroxine sodium tab 100 mcg	1	
levothyroxine sodium tab 112 mcg	1	
levothyroxine sodium tab 125 mcg	1	
levothyroxine sodium tab 137 mcg	1	
levothyroxine sodium tab 150 mcg	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium tab 175 mcg	1	
levothyroxine sodium tab 200 mcg	1	
levothyroxine sodium tab 25 mcg	1	
levothyroxine sodium tab 50 mcg	1	
levothyroxine sodium tab 75 mcg	1	
levothyroxine sodium tab 88 mcg	1	
levothyroxine sodium tab 100 mcg	1	
levothyroxine sodium tab 112 mcg	1	
levothyroxine sodium tab 125 mcg	1	
levothyroxine sodium tab 137 mcg	1	
levothyroxine sodium tab 150 mcg	1	
levothyroxine sodium tab 175 mcg	1	
levothyroxine sodium tab 200 mcg	1	
levothyroxine sodium tab 25 mcg	1	
levothyroxine sodium tab 300 mcg	1	
levothyroxine sodium tab 50 mcg	1	
levothyroxine sodium tab 75 mcg	1	
levothyroxine sodium tab 88 mcg	1	
LEVOTHYROXINE SODIUM 100 MCG CAP	4	
levothyroxine sodium tab 100 mcg	1	
LEVOTHYROXINE SODIUM 112 MCG CAP	4	
levothyroxine sodium tab 112 mcg	1	
LEVOTHYROXINE SODIUM 125 MCG CAP	4	
levothyroxine sodium tab 125 mcg	1	
LEVOTHYROXINE SODIUM 13 MCG CAP	4	
LEVOTHYROXINE SODIUM 137 MCG CAP	4	
levothyroxine sodium tab 137 mcg	1	
LEVOTHYROXINE SODIUM 150 MCG CAP	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium tab 150 mcg	1	
LEVOTHYROXINE SODIUM 175 MCG CAP	4	
levothyroxine sodium tab 175 mcg	1	
LEVOTHYROXINE SODIUM 200 MCG CAP	4	
levothyroxine sodium tab 200 mcg	1	
LEVOTHYROXINE SODIUM 25 MCG CAP	4	
levothyroxine sodium tab 25 mcg	1	
levothyroxine sodium tab 300 mcg	1	
LEVOTHYROXINE SODIUM 50 MCG CAP	4	
levothyroxine sodium tab 50 mcg	1	
LEVOTHYROXINE SODIUM 75 MCG CAP	4	
levothyroxine sodium tab 75 mcg	1	
LEVOTHYROXINE SODIUM 88 MCG CAP	4	
levothyroxine sodium tab 88 mcg	1	
levothyroxine sodium tab 100 mcg	1	
levothyroxine sodium tab 112 mcg	1	
levothyroxine sodium tab 125 mcg	1	
levothyroxine sodium tab 137 mcg	1	
levothyroxine sodium tab 150 mcg	1	
levothyroxine sodium tab 175 mcg	1	
levothyroxine sodium tab 200 mcg	1	
levothyroxine sodium tab 25 mcg	1	
levothyroxine sodium tab 50 mcg	1	
levothyroxine sodium tab 75 mcg	1	
levothyroxine sodium tab 88 mcg	1	
liothyronine sodium tab 25 mcg	2	
liothyronine sodium tab 5 mcg	2	
liothyronine sodium tab 50 mcg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
liothyronine sodium tab 25 mcg	2	
liothyronine sodium tab 5 mcg	2	
liothyronine sodium tab 50 mcg	2	
NIVA THYROID 120 MG TAB	4	
NIVA THYROID 15 MG TAB	4	
NIVA THYROID 30 MG TAB	4	
NIVA THYROID 60 MG TAB	4	
NIVA THYROID 90 MG TAB	4	
NP THYROID 120 MG TAB	4	
NP THYROID 15 MG TAB	4	
NP THYROID 30 MG TAB	4	
NP THYROID 60 MG TAB	4	
NP THYROID 90 MG TAB	4	
RENTHYROID 120 MG TAB	4	
RENTHYROID 15 MG TAB	4	
RENTHYROID 30 MG TAB	4	
RENTHYROID 60 MG TAB	4	
RENTHYROID 90 MG TAB	4	
REZDIFFRA 100 MG TAB	5	QL 30 / 30 day(s) PA S
REZDIFFRA 60 MG TAB	5	QL 30 / 30 day(s) PA S
REZDIFFRA 80 MG TAB	5	QL 30 / 30 day(s) PA S
SYNTHROID 100 MCG TAB	3	
SYNTHROID 112 MCG TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNTHROID 125 MCG TAB	3	
SYNTHROID 137 MCG TAB	3	
SYNTHROID 150 MCG TAB	3	
SYNTHROID 175 MCG TAB	3	
SYNTHROID 200 MCG TAB	3	
SYNTHROID 25 MCG TAB	3	
SYNTHROID 300 MCG TAB	3	
SYNTHROID 50 MCG TAB	3	
SYNTHROID 75 MCG TAB	3	
SYNTHROID 88 MCG TAB	3	
THYQUIDITY 100 MCG/5ML SOLUTION	4	
THYROID 120 MG TAB	4	
THYROID 15 MG TAB	4	
THYROID 30 MG TAB	4	
THYROID 60 MG TAB	4	
THYROID 90 MG TAB	4	
TIROSINT 100 MCG CAP	4	
TIROSINT 112 MCG CAP	4	
TIROSINT 125 MCG CAP	4	
TIROSINT 13 MCG CAP	4	
TIROSINT 137 MCG CAP	4	
TIROSINT 150 MCG CAP	4	
TIROSINT 175 MCG CAP	4	
TIROSINT 200 MCG CAP	4	
TIROSINT 25 MCG CAP	4	
TIROSINT 37.5 MCG CAP	4	
TIROSINT 44 MCG CAP	4	
TIROSINT 50 MCG CAP	4	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TIROSINT 62.5 MCG CAP	4	
TIROSINT 75 MCG CAP	4	
TIROSINT 88 MCG CAP	4	
TIROSINT-SOL 100 MCG/ML SOLUTION	4	
TIROSINT-SOL 112 MCG/ML SOLUTION	4	
TIROSINT-SOL 125 MCG/ML SOLUTION	4	
TIROSINT-SOL 13 MCG/ML SOLUTION	4	
TIROSINT-SOL 137 MCG/ML SOLUTION	4	
TIROSINT-SOL 150 MCG/ML SOLUTION	4	
TIROSINT-SOL 175 MCG/ML SOLUTION	4	
TIROSINT-SOL 200 MCG/ML SOLUTION	4	
TIROSINT-SOL 25 MCG/ML SOLUTION	4	
TIROSINT-SOL 37.5 MCG/ML SOLUTION	4	
TIROSINT-SOL 44 MCG/ML SOLUTION	4	
TIROSINT-SOL 50 MCG/ML SOLUTION	4	
TIROSINT-SOL 62.5 MCG/ML SOLUTION	4	
TIROSINT-SOL 75 MCG/ML SOLUTION	4	
TIROSINT-SOL 88 MCG/ML SOLUTION	4	
levothyroxine sodium tab 100 mcg	3	
levothyroxine sodium tab 112 mcg	3	
levothyroxine sodium tab 125 mcg	3	
levothyroxine sodium tab 137 mcg	3	
levothyroxine sodium tab 150 mcg	3	
levothyroxine sodium tab 175 mcg	3	
levothyroxine sodium tab 200 mcg	3	
levothyroxine sodium tab 25 mcg	3	
levothyroxine sodium tab 300 mcg	3	
levothyroxine sodium tab 50 mcg	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
levothyroxine sodium tab 75 mcg	3	
levothyroxine sodium tab 88 mcg	3	
YORVIPATH 168 MCG/0.56ML SOLN PEN	5	PA S
YORVIPATH 294 MCG/0.98ML SOLN PEN	5	PA S
YORVIPATH 420 MCG/1.4ML SOLN PEN	5	PA S
HORMONAL AGENTS, SUPPRESSANT (ADRENAL OR PITUITARY)		
cabergoline tab 0.5 mg	2	
ELIGARD 22.5 MG KIT	5	PA S
ELIGARD 30 MG KIT	5	PA S
ELIGARD 45 MG KIT	5	PA S
ELIGARD 7.5 MG KIT	5	PA S
KORLYM 300 MG TAB	5	PA S
LANREOTIDE ACETATE 120 MG/0.5ML SOLUTION	5	PA S
lanreotide acetate extended release inj 120 mg/0.5ml	5	PA S
LEUPROLIDE ACETATE (3 MONTH) 22.5 MG INJECTABLE	5	PA S
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
leuprolide acetate inj kit 5 mg/ml	5	PA S
LUPRON DEPOT (1-MONTH) 3.75 MG KIT	5	PA S
LUPRON DEPOT (1-MONTH) 7.5 MG KIT	5	PA S
LUPRON DEPOT (3-MONTH) 11.25 MG KIT	5	PA S
LUPRON DEPOT (3-MONTH) 22.5 MG KIT	5	PA S
LUPRON DEPOT (4-MONTH) 30 MG KIT	5	PA S
LUPRON DEPOT (6-MONTH) 45 MG KIT	5	PA S
LUPRON DEPOT-PED (1-MONTH) 11.25 MG KIT	5	PA S
LUPRON DEPOT-PED (1-MONTH) 15 MG KIT	5	PA S
LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT	5	PA S
LUPRON DEPOT-PED (3-MONTH) 11.25 MG (PED) KIT	5	PA S
LUPRON DEPOT-PED (3-MONTH) 30 MG KIT	5	PA S
LUPRON DEPOT-PED (6-MONTH) 45 MG KIT	5	PA S
LUTRATE DEPOT 22.5 MG INJECTABLE	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mifepristone tab 300 mg	5	PA S
MYCAPSSA 20 MG CAP DR	5	PA S
octreotide acetate for im inj kit 10 mg	5	PA S
OCTREOTIDE ACETATE 100 MCG/ML SOLN PRSYR	5	PA S
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	5	PA S
octreotide acetate inj 1000 mcg/ml (1 mg/ml)	5	PA S
octreotide acetate for im inj kit 20 mg	5	PA S
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	5	PA S
octreotide acetate for im inj kit 30 mg	5	PA S
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR	5	PA S
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	5	PA S
OCTREOTIDE ACETATE 500 MCG/ML SOLN PRSYR	5	PA S
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	5	PA S
ORGOVYX 120 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORIAHNN 300-1-0.5 & 300 MG CAP THPK	5	PA S
ORILISSA 150 MG TAB	5	PA S
ORILISSA 200 MG TAB	5	PA S
SANDOSTATIN 100 MCG/ML SOLUTION	5	PA S
SANDOSTATIN 50 MCG/ML SOLUTION	5	PA S
SANDOSTATIN 500 MCG/ML SOLUTION	5	PA S
SANDOSTATIN LAR DEPOT 10 MG KIT	5	PA S
SANDOSTATIN LAR DEPOT 20 MG KIT	5	PA S
SANDOSTATIN LAR DEPOT 30 MG KIT	5	PA S
SIGNIFOR 0.3 MG/ML SOLUTION	5	PA S
SIGNIFOR 0.6 MG/ML SOLUTION	5	PA S
SIGNIFOR 0.9 MG/ML SOLUTION	5	PA S
SOMATULINE DEPOT 120 MG/0.5ML SOLUTION	5	PA S
SOMATULINE DEPOT 60 MG/0.2ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOMATULINE DEPOT 90 MG/0.3ML SOLUTION	5	PA S
SOMAVERT 10 MG RECON SOLN	5	PA S
SOMAVERT 15 MG RECON SOLN	5	PA S
SOMAVERT 20 MG RECON SOLN	5	PA S
SOMAVERT 25 MG RECON SOLN	5	PA S
SOMAVERT 30 MG RECON SOLN	5	PA S
SYNAREL 2 MG/ML SOLUTION	5	PA S
ZOLADEX 10.8 MG IMPLANT	5	PA S
ZOLADEX 3.6 MG IMPLANT	5	PA S
HORMONAL AGENTS, SUPPRESSANT (THYROID) ANTITHYROID AGENTS		
methimazole tab 10 mg	1	
methimazole tab 5 mg	1	
propylthiouracil tab 50 mg	2	
IMMUNOLOGICAL AGENTS ANGIOEDEMA AGENTS		
HAEGARDA 2000 UNIT RECON SOLN	5	PA S
HAEGARDA 3000 UNIT RECON SOLN	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
icatibant acetate subcutaneous soln pref syr 30 mg/3ml	5	QL 9 / 30 days PA S
ORLADEYO 110 MG CAP	5	PA S
ORLADEYO 150 MG CAP	5	PA S
icatibant acetate subcutaneous soln pref syr 30 mg/3ml	5	QL 9 / 30 days PA S
TAKHZYRO 150 MG/ML SOLN PRSYR	5	PA S
TAKHZYRO 300 MG/2ML SOLN PRSYR	5	PA S
TAKHZYRO 300 MG/2ML SOLUTION	5	PA S
IMMUNOLOGICAL AGENTS, OTHER		
ACTEMRA 162 MG/0.9ML SOLN PRSYR	5	PA S
ACTEMRA 200 MG/10ML SOLUTION	5	PA S
ACTEMRA 400 MG/20ML SOLUTION	5	PA S
ACTEMRA 80 MG/4ML SOLUTION	5	PA S
ACTEMRA ACTPEN 162 MG/0.9ML SOLN A-INJ	5	PA S
ARCALYST 220 MG RECON SOLN	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AURANOFIN 3 MG CAP	4	
BENLYSTA 120 MG RECON SOLN	5	PA S
BENLYSTA 200 MG/ML SOLN A-INJ	5	PA S
BENLYSTA 200 MG/ML SOLN PRSYR	5	PA S
BENLYSTA 400 MG RECON SOLN	5	PA S
BIMZELX 160 MG/ML SOLN A-INJ	5	PA S
BIMZELX 160 MG/ML SOLN PRSYR	5	PA S
BIMZELX 320 MG/2ML SOLN A-INJ	5	PA S
BIMZELX 320 MG/2ML SOLN PRSYR	5	PA S
COSENTYX (300 MG DOSE) 150 MG/ML SOLN PRSYR	5	PA S
COSENTYX 150 MG/ML SOLN PRSYR	5	PA S
COSENTYX 75 MG/0.5ML SOLN PRSYR	5	PA S
COSENTYX SENSOREADY (300 MG) 150 MG/ML SOLN A-INJ	5	PA S
COSENTYX SENSOREADY PEN 150 MG/ML SOLN A-INJ	5	PA S
COSENTYX UNOREADY 300 MG/2ML SOLN A-INJ	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 100 MG/0.67ML SOLN PRSYR	5	PA S
DUPIXENT 200 MG/1.14ML SOLN A-INJ	5	PA S
DUPIXENT 200 MG/1.14ML SOLN PRSYR	5	PA S
DUPIXENT 300 MG/2ML SOLN A-INJ	5	PA S
DUPIXENT 300 MG/2ML SOLN PRSYR	5	PA S
ENSPRYNG 120 MG/ML SOLN PRSYR	5	PA S
ENTYVIO 300 MG RECON SOLN	5	PA S
ENTYVIO PEN 108 MG/0.68ML SOLN A-INJ	5	PA S
GRASTEK 2800 BAU SL TAB	4	
ILUMYA 100 MG/ML SOLN PRSYR	5	PA S
KEVZARA 150 MG/1.14ML SOLN A-INJ	5	PA S
KEVZARA 150 MG/1.14ML SOLN PRSYR	5	PA S
KEVZARA 200 MG/1.14ML SOLN A-INJ	5	PA S
KEVZARA 200 MG/1.14ML SOLN PRSYR	5	PA S
KINERET 100 MG/0.67ML SOLN PRSYR	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEMLUVIO 30 MG A-INJ	5	PA S
ODACTRA 12 SQ-HDM SL TAB	4	
OLUMIANT 1 MG TAB	5	PA S
OLUMIANT 2 MG TAB	5	PA S
OLUMIANT 4 MG TAB	5	PA S
ORENCIA 125 MG/ML SOLN PRSYR	5	PA S
ORENCIA 50 MG/0.4ML SOLN PRSYR	5	PA S
ORENCIA 87.5 MG/0.7ML SOLN PRSYR	5	PA S
ORENCIA CLICKJECT 125 MG/ML SOLN A-INJ	5	PA S
OTEZLA 10 & 20 & 30 MG TAB THPK	5	PA S
OTEZLA 4 X 10 & 51 X20 MG TAB THPK	5	PA S
OTULFI 45 MG/0.5ML SOLN PRSYR	5	PA S QLC 0.5 / 84 days
OTULFI 90 MG/ML SOLN PRSYR	5	PA S QLC 1 / 56 days
PALFORZIA (1 MG DAILY DOSE) 1 X 1 MG CSPK	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA (12 MG DAILY DOSE) 2 X 1 MG & 10 MG CSPK	5	PA S
PALFORZIA (120 MG DAILY DOSE) 20 MG & 100 MG CSPK	5	PA S
PALFORZIA (160 MG DAILY DOSE) 3 X 20 MG & 100 MG CSPK	5	PA S
PALFORZIA (20 MG DAILY DOSE) 20 MG CSPK	5	PA S
PALFORZIA (200 MG DAILY DOSE) 2 X 100 MG CSPK	5	PA S
PALFORZIA (240 MG DAILY DOSE) 2 X 20 MG & 2 X 100 MG CSPK	5	PA S
PALFORZIA (3 MG DAILY DOSE) 3 X 1 MG CSPK	5	PA S
PALFORZIA (300 MG MAINTENANCE) 300 MG PACKET	5	PA S
PALFORZIA (300 MG TITRATION) 300 MG PACKET	5	PA S
PALFORZIA (40 MG DAILY DOSE) 2 X 20 MG CSPK	5	PA S
PALFORZIA (6 MG DAILY DOSE) 6 X 1 MG CSPK	5	PA S
PALFORZIA (80 MG DAILY DOSE) 4 X 20 MG CSPK	5	PA S
PALFORZIA INITIAL DOSE 1-3YRS 0.5 & 1 & 1.5 & 3 MG CSPK	5	PA S
PALFORZIA INITIAL DOSE 4-17YRS 0.5 & 1 & 1.5 & 3 & 6 MG CSPK	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA INITIAL ESCALATION 0.5 & 1 & 1.5 & 3 & 6 MG CSPK	5	PA S
RAGWITEK 12 AMB A 1-U SL TAB	4	
REZUROCK 200 MG TAB	5	PA S
RIDAURA 3 MG CAP	4	
RINVOQ 15 MG TAB ER 24H	5	PA S
RINVOQ 30 MG TAB ER 24H	5	PA S
RINVOQ 45 MG TAB ER 24H	5	PA S
SAPHNELO 300 MG/2ML SOLUTION	5	PA S
SELARSDI 45 MG/0.5ML SOLN PRSYR	5	QL 0.5 / 84 day(s) PA S
SELARSDI 90 MG/ML SOLN PRSYR	5	QL 1 / 56 day(s) PA S
SKYRIZI 150 MG/ML SOLN PRSYR	5	PA S
SKYRIZI 180 MG/1.2ML SOLN CART	5	PA S
SKYRIZI 360 MG/2.4ML SOLN CART	5	PA S
SKYRIZI 600 MG/10ML SOLUTION	5	PA S
SKYRIZI PEN 150 MG/ML SOLN A-INJ	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOTYKTU 6 MG TAB	5	QL 30 / 30 days PA S
TALTZ 80 MG/ML SOLN A-INJ	5	PA S
TALTZ 80 MG/ML SOLN PRSYR	5	PA S
TAVNEOS 10 MG CAP	5	QL 60 / 30 days PA S
TREMFYA 100 MG/ML SOLN PRSYR	5	PA S
TREMFYA 200 MG/2ML SOLN PRSYR	5	PA S
TREMFYA CROHNS INDUCTION 200 MG/2ML SOLN A-INJ	5	PA S
TREMFYA ONE-PRESS 100 MG/ML SOLN A-INJ	5	PA S
TREMFYA PEN 100 MG/ML SOLN A-INJ	5	PA S
TREMFYA PEN 200 MG/2ML SOLN A-INJ	5	PA S
TYENNE 162 MG/0.9ML SOLN A-INJ	5	PA S
TYENNE 162 MG/0.9ML SOLN PRSYR	5	PA S
USTEKINUMAB 45 MG/0.5ML SOLUTION	5	PA S
VELSIPITY 2 MG TAB	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XELJANZ 1 MG/ML SOLUTION	5	PA S
XELJANZ 10 MG TAB	5	PA S
XELJANZ 5 MG TAB	5	PA S
XELJANZ XR 11 MG TAB ER 24H	5	PA S
XELJANZ XR 22 MG TAB ER 24H	5	PA S
XOLAIR 150 MG RECON SOLN	5	PA S
XOLAIR 150 MG/ML SOLN A-INJ	5	PA S
XOLAIR 150 MG/ML SOLN PRSYR	5	PA S
XOLAIR 300 MG/2ML SOLN A-INJ	5	PA S
XOLAIR 300 MG/2ML SOLN PRSYR	5	PA S
XOLAIR 75 MG/0.5ML SOLN A-INJ	5	PA S
XOLAIR 75 MG/0.5ML SOLN PRSYR	5	PA S
IMMUNOSTIMULANTS		
ACTIMMUNE 100 MCG/0.5ML SOLUTION	5	PA S
BESREMI 500 MCG/ML SOLN PRSYR	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEGASYS 180 MCG/0.5ML SOLN PRSYR	5	PA S
PEGASYS 180 MCG/ML SOLUTION	5	PA S
IMMUNOSUPPRESSANTS		
ADALIMUMAB-AACF (2 PEN) 40 MG/0.8ML AUT-IJ KIT	5	PA S
ADALIMUMAB-AACF (2 SYRINGE) 40 MG/0.8ML PREF SY KT	5	PA S
ADALIMUMAB-AACF(CD/UC/HS STRT) 40 MG/0.8ML AUT-IJ KIT	5	PA S
ADALIMUMAB-AACF(PS/UV STARTER) 40 MG/0.8ML AUT-IJ KIT	5	PA S
ASTAGRAF XL 0.5 MG CAP ER 24H	4	
ASTAGRAF XL 1 MG CAP ER 24H	4	
ASTAGRAF XL 5 MG CAP ER 24H	4	
azathioprine tab 50 mg	2	
CIMZIA (2 SYRINGE) 200 MG/ML PREF SY KT	5	PA S
CIMZIA 2 X 200 MG KIT	5	PA S
CIMZIA-STARTER 200 MG/ML PREF SY KT	5	PA S
cyclosporine cap 100 mg	2	
cyclosporine cap 25 mg	2	
cyclosporine modified cap 100 mg	2	
cyclosporine modified oral soln 100 mg/ml	2	
cyclosporine modified cap 25 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
cyclosporine modified cap 50 mg	2	
ENBREL 25 MG/0.5ML SOLN PRSYR	5	PA S
ENBREL 25 MG/0.5ML SOLUTION	5	PA S
ENBREL 50 MG/ML SOLN PRSYR	5	PA S
ENBREL MINI 50 MG/ML SOLN CART	5	PA S
ENBREL SURECLICK 50 MG/ML SOLN A-INJ	5	PA S
ENVARSUS XR 0.75 MG TAB ER 24H	4	ST STC Trial and failure of 1 therapy: generic Envarsus
ENVARSUS XR 1 MG TAB ER 24H	4	ST STC Trial and failure of 1 therapy: generic Envarsus
ENVARSUS XR 4 MG TAB ER 24H	4	ST STC Trial and failure of 1 therapy: generic Envarsus
everolimus tab 0.25 mg	2	PA
everolimus tab 0.5 mg	2	PA
everolimus tab 0.75 mg	2	PA
everolimus tab 1 mg	2	PA
cyclosporine modified cap 100 mg	2	
cyclosporine modified oral soln 100 mg/ml	2	
cyclosporine modified cap 25 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HADLIMA 40 MG/0.4ML SOLN PRSYR	5	PA S
HADLIMA 40 MG/0.8ML SOLN PRSYR	5	PA S
HADLIMA PUSHTOUCH 40 MG/0.4ML SOLN A-INJ	5	PA S
HADLIMA PUSHTOUCH 40 MG/0.8ML SOLN A-INJ	5	PA S
INFLIXIMAB 100 MG RECON SOLN	5	PA S
leflunomide tab 10 mg	2	
leflunomide tab 20 mg	2	
LUPKYNIS 7.9 MG CAP	5	PA S
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	2	
METHOTREXATE SODIUM (PF) 1 GM/40ML SOLUTION	2	
METHOTREXATE SODIUM (PF) 1000 MG/40ML SOLUTION	2	
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)	1	
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)	1	
methotrexate sodium for inj 1 gm	2	
methotrexate sodium tab 2.5 mg (base equiv)	1	
METHOTREXATE SODIUM 250 MG/10ML SOLUTION	4	
METHOTREXATE SODIUM 50 MG/2ML SOLUTION	1	
mycophenolate mofetil for oral susp 200 mg/ml	2	
mycophenolate mofetil cap 250 mg	2	
mycophenolate mofetil tab 500 mg	2	
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)	2	
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)	2	
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)	2	
NEORAL 100 MG CAP	4	
NEORAL 100 MG/ML SOLUTION	4	
NEORAL 25 MG CAP	4	
ORENCIA 250 MG RECON SOLN	5	PA S
OTREXUP 10 MG/0.4ML SOLN A-INJ	3	
OTREXUP 12.5 MG/0.4ML SOLN A-INJ	3	
OTREXUP 15 MG/0.4ML SOLN A-INJ	3	
OTREXUP 17.5 MG/0.4ML SOLN A-INJ	3	
OTREXUP 20 MG/0.4ML SOLN A-INJ	3	ST STC Trial and failure of 1 therapy: methotrexate tablets or methotrexate IM injection
OTREXUP 22.5 MG/0.4ML SOLN A-INJ	3	
OTREXUP 25 MG/0.4ML SOLN A-INJ	3	
PROGRAF 0.5 MG CAP	4	
PROGRAF 1 MG CAP	4	
PROGRAF 5 MG CAP	4	
RAPAMUNE 0.5 MG TAB	4	
RAPAMUNE 1 MG TAB	4	
RAPAMUNE 1 MG/ML SOLUTION	4	
RAPAMUNE 2 MG TAB	4	
REDITREX 12.5 MG/0.5ML SOLN PRSYR	3	
REDITREX 15 MG/0.6ML SOLN PRSYR	3	
REDITREX 17.5 MG/0.7ML SOLN PRSYR	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REDITREX 20 MG/0.8ML SOLN PRSYR	3	
REDITREX 22.5 MG/0.9ML SOLN PRSYR	3	
REDITREX 25 MG/ML SOLN PRSYR	3	
REDITREX 7.5 MG/0.3ML SOLN PRSYR	3	
REMICADE 100 MG RECON SOLN	5	PA S
RENFLEXIS 100 MG RECON SOLN	5	PA S
SANDIMMUNE 100 MG CAP	4	
SANDIMMUNE 100 MG/ML SOLUTION	4	
SANDIMMUNE 25 MG CAP	4	
SIMLANDI (1 PEN) 40 MG/0.4ML AUT-IJ KIT	5	PA S
SIMLANDI (1 PEN) 80 MG/0.8ML AUT-IJ KIT	5	PA S
SIMLANDI (1 SYRINGE) 80 MG/0.8ML PREF SY KT	5	PA S
SIMLANDI (2 PEN) 40 MG/0.4ML AUT-IJ KIT	5	PA S
SIMLANDI (2 SYRINGE) 20 MG/0.2ML PREF SY KT	5	PA S
SIMLANDI (2 SYRINGE) 40 MG/0.4ML PREF SY KT	5	PA S
SIMPONI 100 MG/ML SOLN A-INJ	5	PA S
SIMPONI 100 MG/ML SOLN PRSYR	5	PA S
SIMPONI 50 MG/0.5ML SOLN A-INJ	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMPONI 50 MG/0.5ML SOLN PRSYR	5	PA S
sirolimus tab 0.5 mg	2	
sirolimus tab 1 mg	2	
sirolimus oral soln 1 mg/ml	2	
sirolimus tab 2 mg	2	
tacrolimus cap 0.5 mg	2	
tacrolimus cap 1 mg	2	
tacrolimus cap 5 mg	2	
ZORTRESS 0.25 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Zortress
ZORTRESS 0.5 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Zortress
ZORTRESS 0.75 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Zortress
ZORTRESS 1 MG TAB	5	PA ST S STC Trial and failure of 1 therapy: generic Zortress

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VACCINES		
ABRYSVO 120 MCG/0.5ML RECON SOLN	3	ACA Affordable Care Act Medications
ACTHIB RECON SOLN	3	ACA Affordable Care Act Medications
ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION	3	ACA Affordable Care Act Medications
AFLURIA SUSPENSION	3	ACA Affordable Care Act Medications
AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
AFLURIA QUADRIVALENT SUSPENSION	3	ACA Affordable Care Act Medications
AFLURIA QUADRIVALENT 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
AREXVY 120 MCG/0.5ML RECON SUSP	3	AL1 At least 60 yrs old ACA Affordable Care Act Medications
BEXSERO SUSP PRSYR	3	ACA Affordable Care Act Medications
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	3	ACA Affordable Care Act Medications
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION	3	ACA Affordable Care Act Medications
CAPVAXIVE 0.5 ML SOLN PRSYR	3	ACA Affordable Care Act Medications
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	3	
COMIRNATY 30 MCG/0.3ML SUSPENSION	3	
COMIRNATY 5-11 YEARS 10 MCG/0.3ML SUSPENSION	3	
DAPTACEL 23-15-5 SUSPENSION	3	ACA Affordable Care Act Medications
ENGERIX-B 10 MCG/0.5ML SUSP PRSYR	3	ACA Affordable Care Act Medications
ENGERIX-B 20 MCG/ML SUSP PRSYR	3	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENGERIX-B 20 MCG/ML SUSPENSION	3	ACA Affordable Care Act Medications
FLUAD 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUAD QUADRIVALENT 0.5 ML PRSYR	3	ACA Affordable Care Act Medications
FLUARIX 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUARIX QUADRIVALENT 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUBLOK 0.5 ML SOLN PRSYR	3	ACA Affordable Care Act Medications
FLUBLOK QUADRIVALENT 0.5 ML SOLN PRSYR	3	ACA Affordable Care Act Medications
FLUCELVAX SUSPENSION	3	ACA Affordable Care Act Medications
FLUCELVAX 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUCELVAX QUADRIVALENT SUSPENSION	3	ACA Affordable Care Act Medications
FLUCELVAX QUADRIVALENT 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLULAVAL 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLULAVAL QUADRIVALENT 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUMIST LIQUID	3	ACA Affordable Care Act Medications
FLUMIST QUADRIVALENT SUSPENSION	3	ACA Affordable Care Act Medications
FLUZONE SUSPENSION	3	ACA Affordable Care Act Medications
FLUZONE 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUZONE HIGH-DOSE QUADRIVALENT 0.7 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
FLUZONE QUADRIVALENT SUSPENSION	3	ACA Affordable Care Act Medications
FLUZONE QUADRIVALENT 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
GARDASIL 9 SUSP PRSYR	3	ACA Affordable Care Act Medications
GARDASIL 9 SUSPENSION	3	ACA Affordable Care Act Medications
HAVRIX 1440 EL U/ML SUSPENSION	3	ACA Affordable Care Act Medications
HAVRIX 720 EL U/0.5ML SUSP PRSYR	3	ACA Affordable Care Act Medications
HAVRIX 720 EL U/0.5ML SUSPENSION	3	ACA Affordable Care Act Medications
HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR	3	ACA Affordable Care Act Medications
HIBERIX 10 MCG RECON SOLN	3	ACA Affordable Care Act Medications
IMOVAX RABIES 2.5 UNIT/ML RECON SUSP	3	
INFANRIX 25-58-10 SUSPENSION	3	ACA Affordable Care Act Medications
IPOL INJECTABLE	3	ACA Affordable Care Act Medications
KINRIX 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
M-M-R II RECON SOLN	3	ACA Affordable Care Act Medications
MENACTRA SOLUTION	3	ACA Affordable Care Act Medications
MENQUADFI SOLUTION	3	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MENVEO RECON SOLN	3	ACA Affordable Care Act Medications
MENVEO SOLUTION	3	ACA Affordable Care Act Medications
MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION	3	ACA Affordable Care Act Medications
MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION	3	ACA Affordable Care Act Medications
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSP PRSYR	3	
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSPENSION	3	
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION	3	ACA Affordable Care Act Medications
PEDIARIX SUSP PRSYR	4	ACA Affordable Care Act Medications
PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION	4	ACA Affordable Care Act Medications
PENTACEL RECON SUSP	4	ACA Affordable Care Act Medications
PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION	3	ACA Affordable Care Act Medications
PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION	3	ACA Affordable Care Act Medications
PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION	3	ACA Affordable Care Act Medications
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	3	
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	3	
PNEUMOVAX 23 25 MCG/0.5ML SOLN PRSYR	4	ACA Affordable Care Act Medications
PNEUMOVAX 23 25 MCG/0.5ML SOLUTION	4	ACA Affordable Care Act Medications
PREHEVBRIO 10 MCG/ML SUSPENSION	3	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVNAR 13 SUSPENSION	4	ACA Affordable Care Act Medications
PREVNAR 20 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
PRIORIX RECON SUSP	3	ACA Affordable Care Act Medications
PROQUAD RECON SUSP	4	ACA Affordable Care Act Medications
QUADRACEL SUSPENSION	4	ACA Affordable Care Act Medications
QUADRACEL 0.5 ML SUSP PRSYR	4	ACA Affordable Care Act Medications
RABAVERT RECON SUSP	4	
RECOMBIVAX HB 10 MCG/ML SUSP PRSYR	4	ACA Affordable Care Act Medications
RECOMBIVAX HB 10 MCG/ML SUSPENSION	4	ACA Affordable Care Act Medications
RECOMBIVAX HB 40 MCG/ML SUSPENSION	4	ACA Affordable Care Act Medications
RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR	4	ACA Affordable Care Act Medications
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION	4	ACA Affordable Care Act Medications
ROTARIX RECON SUSP	4	ACA Affordable Care Act Medications
ROTARIX SUSPENSION	4	ACA Affordable Care Act Medications
ROTATEQ SOLUTION	4	ACA Affordable Care Act Medications
SHINGRIX 50 MCG/0.5ML RECON SUSP	3	ACA Affordable Care Act Medications
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	3	
SPIKEVAX 50 MCG/0.5ML SUSPENSION	3	
TDVAX 2-2 LF/0.5ML SUSPENSION	4	ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TENIVAC 5-2 LFU INJECTABLE	4	ACA Affordable Care Act Medications
TETANUS-DIPHTHERIA TOXOIDS TD 2-2 LF/0.5ML SUSPENSION	4	ACA Affordable Care Act Medications
TRUMENBA SUSP PRSYR	4	ACA Affordable Care Act Medications
TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR	4	ACA Affordable Care Act Medications
VAQTA 25 UNIT/0.5ML SUSPENSION	4	ACA Affordable Care Act Medications
VAQTA 50 UNIT/ML SUSPENSION	4	ACA Affordable Care Act Medications
VARIVAX 1350 PFU/0.5ML RECON SUSP	4	ACA Affordable Care Act Medications
VAXELIS SUSP PRSYR	3	ACA Affordable Care Act Medications
VAXELIS SUSPENSION	3	ACA Affordable Care Act Medications
VAXNEUVANCE 0.5 ML SUSP PRSYR	3	ACA Affordable Care Act Medications
INFLAMMATORY BOWEL DISEASE AGENTS AMINOSALICYLATES		
balsalazide disodium cap 750 mg	2	
DIPENTUM 250 MG CAP	4	
mesalamine tab delayed release 1.2 gm	2	
mesalamine suppos 1000 mg	2	
mesalamine enema 4 gm	2	
mesalamine cap dr 400 mg	2	
mesalamine tab delayed release 800 mg	2	
mesalamine cap er 24hr 0.375 gm	2	
sulfasalazine tab 500 mg	2	
sulfasalazine tab delayed release 500 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLUCOCORTICOIDS		
budesonide delayed release particles cap 3 mg	2	
CORTIFOAM 10 % FOAM	4	
hydrocortisone tab 10 mg	2	
hydrocortisone enema 100 mg/60ml	2	
hydrocortisone tab 20 mg	2	
hydrocortisone tab 5 mg	2	
UCERIS 2 MG/ACT FOAM	5	PA S
METABOLIC BONE DISEASE AGENTS		
alendronate sodium tab 10 mg	1	PV Preventive
alendronate sodium tab 35 mg	1	PV Preventive
alendronate sodium tab 70 mg	1	PV Preventive
alendronate sodium oral soln 70 mg/75ml	2	PV Preventive
BONSITY 560 MCG/2.24ML SOLN PEN	5	PA S
calcitonin (salmon) nasal soln 200 unit/act	2	PV Preventive
calcitonin (salmon) inj 200 unit/ml	2	PV Preventive
calcitriol cap 0.25 mcg	1	
calcitriol cap 0.5 mcg	2	
cinacalcet hcl tab 30 mg (base equiv)	5	S
cinacalcet hcl tab 60 mg (base equiv)	5	S
cinacalcet hcl tab 90 mg (base equiv)	5	S
cholecalciferol cap 1.25 mg (50000 unit)	1	
ergocalciferol cap 1.25 mg (50000 unit)	1	
EVENITY 105 MG/1.17ML SOLN PRSYR	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FORTEO 560 MCG/2.24ML SOLN PEN	5	PA S
ibandronate sodium tab 150 mg (base equivalent)	1	PV Preventive
paricalcitol cap 1 mcg	2	
paricalcitol cap 2 mcg	2	
paricalcitol cap 4 mcg	2	
PROLIA 60 MG/ML SOLN PRSYR	5	PA S
raloxifene hcl tab 60 mg	2	ACA Affordable Care Act Medications
risedronate sodium tab 150 mg	2	PV Preventive
risedronate sodium tab 30 mg	2	PV Preventive
risedronate sodium tab 35 mg	2	PV Preventive
risedronate sodium tab 5 mg	2	PV Preventive
TERIPARATIDE 560 MCG/2.24ML SOLN PEN	5	PA S
teriparatide soln pen-inj 560 mcg/2.24ml	5	PA S
TYMLOS 3120 MCG/1.56ML SOLN PEN	5	PA S
ergocalciferol cap 1.25 mg (50000 unit)	1	
ergocalciferol cap 1.25 mg (50000 unit)	1	
cholecalciferol cap 1.25 mg (50000 unit)	1	
cholecalciferol cap 1.25 mg (50000 unit)	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
1ST TIER UNIFINE PENTIPS 29G X 12MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS 31G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
1ST TIER UNIFINE PENTIPS 31G X 6 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS 31G X 8 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS 32G X 4 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS 32G X 6 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS 33G X 4 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 29G X 12MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 31G X 5 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 31G X 6 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 31G X 8 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
1ST TIER UNIFINE PENTIPS PLUS 33G X 4 MM MISC	3	PV Preventive
ABOUTTIME PEN NEEDLE 30G X 8 MM MISC	3	PV Preventive
ABOUTTIME PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
ABOUTTIME PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
ABOUTTIME PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
ACCU-CHEK FASTCLIX LANCET KIT	3	QL 120 / 30 days PV Preventive
ACCU-CHEK FASTCLIX LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ACCU-CHEK SAFE-T PRO LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ACCU-CHEK SOFTCLIX LANCET DEV KIT	3	QL 120 / 30 days PV Preventive
ACCU-CHEK SOFTCLIX LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACTI-LANCE 28G MISC	3	QL 120 / 30 day(s) PV Preventive
ACTI-LANCE LITE LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
ACTI-LANCE SPECIAL LANCETS 17G MISC	3	QL 120 / 30 day(s) PV Preventive
ACTI-LANCE UNIVERSAL 23G MISC	3	QL 120 / 30 day(s) PV Preventive
ADJUSTABLE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
ADVANCED MOBILE LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
ADVOCATE INSULIN PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ADVOCATE INSULIN PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ADVOCATE INSULIN PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ADVOCATE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVOCATE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ADVOCATE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ADVOCATE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
ADVOCATE RAPID-SAFE LANCING MISC	3	QL 120 / 30 days PV Preventive
ADVOCATE SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE SAFETY LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE SAFETY LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE SAFETY LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
ADVOCATE SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
AGAMATRIX ULTRA-THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AIMSCO TWIST LANCETS 32G MISC	3	QL 120 / 30 day(s) PV Preventive
AIMSCO TWIST LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
AQ INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
AQ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
AQ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
AQINJECT PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
AQINJECT PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
AQUALANCE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE COMFORT LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE HAEMOLANCE PLUS HIGH MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE HAEMOLANCE PLUS LOW MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE HAEMOLANCE PLUS MICRO MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE HAEMOLANCE PLUS NORMAL MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE HAEMOLANCE PLUS PED MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASSURE ID INSULIN SAFETY SYR 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ASSURE ID PRO PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
ASSURE ID SAFETY PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
ASSURE LANCE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE LANCE LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE LANCE PLUS SAFETY 25G MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE LANCE PLUS SAFETY 30G MISC	3	QL 120 / 30 day(s) PV Preventive
ASSURE LANCE SAFETY LANCET 28G MISC	3	QL 120 / 30 day(s) PV Preventive
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM MISC	3	PV Preventive
AUM INSULIN SAFETY PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 32G X 5 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 32G X 8 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 33G X 4 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 33G X 5 MM MISC	3	PV Preventive
AUM MINI INSULIN PEN NEEDLE 33G X 6 MM MISC	3	PV Preventive
AUM PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
AUM PEN NEEDLE 32G X 5 MM MISC	3	PV Preventive
AUM PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUM PEN NEEDLE 33G X 4 MM MISC	3	PV Preventive
AUM PEN NEEDLE 33G X 5 MM MISC	3	PV Preventive
AUM PEN NEEDLE 33G X 6 MM MISC	3	PV Preventive
AUM READYGARD DUO PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
AUM SAFETY PEN NEEDLE 31G X 4 MM MISC	3	PV Preventive
AUM SAFETY PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
AURORA LANCET SUPER THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
AURORA LANCET THIN 23G MISC	3	QL 120 / 30 day(s) PV Preventive
AURORA PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
AURORA PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
AURORA PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
AUTO-LANCET MISC	3	QL 120 / 30 days PV Preventive
AUTO-LANCET MINI MISC	3	QL 120 / 30 days PV Preventive
AUTOLET II CLINISAFE KIT	3	QL 120 / 30 days PV Preventive
AUTOLET LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
AUTOLET LITE CLINISAFE KIT	3	QL 120 / 30 days PV Preventive
AUTOLET LITE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
AUTOLET LITE STARTER PACK KIT	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUTOLET MINI MISC	3	QL 120 / 30 days PV Preventive
AUTOLET PLATFORMS MISC	3	QL 120 / 30 days PV Preventive
AUTOLET PLUS MISC	3	QL 120 / 30 days PV Preventive
AUTOPEN DEVICE	3	PV Preventive
BARDIA BULB IRRIGATION SYRINGE 60 ML MISC	3	QL 120 / 30 days
BARDIA PISTON IRRIGATION SYR 60 ML MISC	3	QL 120 / 30 days
BD ALLERGIST TRAY 27G X 1/2" 1 ML KIT	3	QL 120 / 30 days
BD ALLERGY SYRINGE 27G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days
BD ALLERGY SYRINGE 27G X 3/8" 0.5 ML MISC	3	QL 120 / 30 days
BD ALLERGY SYRINGE 27G X 3/8" 1 ML MISC	3	QL 120 / 30 days
BD ALLERGY SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
BD AUTOSHIELD DUO 30G X 5 MM MISC	3	PV Preventive
BD BLUNT FILL NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD BLUNT FILL NEEDLE W/FILTER 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD CONTROL SYRING LUER-LOK 10 ML MISC	3	QL 120 / 30 day(s)
BD DISP NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
BD DISP NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 16G X 1-1/2" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 19G X 1" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 20G X 1" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 20G X 1-1/2" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD DISP NEEDLES 21G X 1-1/2" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 22G X 1-1/2" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 25G X 5/8" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 25G X 7/8" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 27G X 1/2" MISC	3	QL 120 / 30 days
BD DISP NEEDLES 30G X 1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE LUER-LOK NEEDLE 30G X 1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
BD ECLIPSE NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE SHIELDED NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE/NEEDLE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE/NEEDLE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE/NEEDLE 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD ECLIPSE SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD FILTER NEEDLE/5 MICRON MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 16G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 19G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 19G X 1-1/2" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 21G X 2" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 23G X 3/4" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
BD HYPODERMIC NEEDLE 26G X 1/2" MISC	3	QL 120 / 30 days
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE 27.5G X 5/8" 2 ML MISC	3	PV Preventive
BD INSULIN SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE HALF-UNIT 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE MICROFINE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE U-100 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE U/F 1/2UNIT 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD INSULIN SYRINGE ULTRAFINE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD INSULIN SYRINGE ULTRAFINE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD INTEGRA NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
BD INTEGRA SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD INTEGRA SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD INTEGRA SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
BD INTEGRA SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
BD INTEGRA SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 10 ML MISC	3	QL 120 / 30 day(s)
BD LUER-LOK SYRINGE 18G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1" 1 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1" 10 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 20G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1" 10 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 22G X 1" 10 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD LUER-LOK SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 22G X 1" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
BD LUER-LOK SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
BD LUER-LOK SYRINGE 26G X 5/8" 3 ML MISC	3	QL 120 / 30 days
BD MICROTAINER LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
BD PEN MISC	3	PV Preventive
BD PEN MINI MISC	3	PV Preventive
BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM MISC	3	PV Preventive
BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM MISC	3	PV Preventive
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM MISC	3	PV Preventive
BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM MISC	3	PV Preventive
BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM MISC	3	PV Preventive
BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM MISC	3	PV Preventive
BD PLASTIPAK SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
BD PLASTIPAK SYRINGE 3 ML MISC	3	QL 120 / 30 day(s)
BD PRECISIONGLIDE NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD PRECISIONGLIDE NEEDLE 27G X 1-1/2" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
BD SAFETYGLIDE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
BD SAFETYGLIDE NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE NEEDLE 27G X 5/8" MISC	3	
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE SHIELDED NEEDLE 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SAFETYGLIDE SHIELDED NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
BD SAFETYGLIDE SYRINGE/NEEDLE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 3/8" 1 ML MISC	3	QL 120 / 30 days
BD SAFETYGLIDE SYRINGE/NEEDLE 27G X 5/8" 1 ML MISC	3	QL 120 / 30 days
BD SYRINGE 50 ML MISC	3	
BD SYRINGE BLUNT CANNULA 17G 10 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE DISPOSABLE 50 ML MISC	3	
BD SYRINGE DUAL CANNULA 10 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE LUER SLIP TIP 5 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE LUER SLIP TIP 50 ML MISC	3	
BD SYRINGE LUER-LOK 1 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE LUER-LOK 10 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE LUER-LOK 20 ML MISC	3	QL 120 / 30 days
BD SYRINGE LUER-LOK 3 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE LUER-LOK 30 ML MISC	3	QL 120 / 30 days
BD SYRINGE LUER-LOK 5 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE SLIP TIP 1 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE SLIP TIP 10 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE SLIP TIP 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
BD SYRINGE SLIP TIP 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
BD SYRINGE SLIP TIP 26G X 5/8" 1 ML MISC	3	QL 120 / 30 days
BD SYRINGE SLIP TIP 3 ML MISC	3	QL 120 / 30 day(s)
BD SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
BD SYRINGE/NEEDLE 23G X 1" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD SYRINGE/NEEDLE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
BD SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
BD TB SYRINGE 21G X 1" 1 ML MISC	3	QL 120 / 30 days
BD TB SYRINGE 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
BD TB SYRINGE 27G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days
BD TB SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
BD TB SYRINGE 27G X 3/8" 1 ML MISC	3	QL 120 / 30 days
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CARDIOCOM LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
CAREFINE PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
CAREFINE PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
CAREONE ADVANCED LANCING DEV MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
CAREONE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
CAREONE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CAREONE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
CAREONE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
CAREONE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CAREONE LANCET SUPER THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CAREONE LANCET THIN 23G MISC	3	QL 120 / 30 day(s) PV Preventive
CAREONE UNIFINE PENTIPS PLUS 29G X 12MM MISC	3	PV Preventive
CAREONE UNIFINE PENTIPS PLUS 31G X 5 MM MISC	3	PV Preventive
CAREONE UNIFINE PENTIPS PLUS 31G X 6 MM MISC	3	PV Preventive
CAREONE UNIFINE PENTIPS PLUS 31G X 8 MM MISC	3	PV Preventive
CAREONE UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
CAREONE UNIFINE PENTIPS PLUS 33G X 4 MM MISC	3	PV Preventive
CAREPOINT POLY HUB NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 21G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREPOINT POLY HUB NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
CAREPOINT POLY HUB NEEDLE 30G X 1/2" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY 1ST NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY 1ST NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY 1ST NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY 1ST NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY 1ST NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 1 ML MISC	3	QL 120 / 30 days
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE CATHETER TIP 60 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 1 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER LOCK 10 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER LOCK 20 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREPOINT SYRINGE LUER LOCK 20G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 22G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 23G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 25G X 1" 3 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER LOCK 3 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER LOCK 30 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER LOCK 5 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER LOCK 60 ML MISC	3	QL 120 / 30 days
CAREPOINT SYRINGE LUER SLIP 1 ML MISC	3	QL 120 / 30 day(s)
CAREPOINT SYRINGE LUER SLIP 60 ML MISC	3	QL 120 / 30 days
CAREPOINT TUBERCLN SYR/LUER SL 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
CARESENS LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
CARESENS LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH CATHETER TIP SYRINGE 60 ML MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 23G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH HYPODERMIC NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 26G X 1" MISC	3	QL 120 / 30 days
CARETOUCH HYPODERMIC NEEDLE 27G X 1-1/2" MISC	3	QL 120 / 30 days
CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CARETOUCH INSULIN SYRINGE 29G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CARETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
CARETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
CARETOUCH LANCING/EJECTOR MISC	3	QL 120 / 30 days PV Preventive
CARETOUCH LUER LOCK 1 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER LOCK 10 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER LOCK 23G X 1" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER LOCK 3 ML MISC	3	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH LUER LOCK 5 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER LOCK SYR/NEEDLE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER LOCK SYR/NEEDLE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER LOCK SYR/NEEDLE 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER LOCK SYR/NEEDLE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
CARETOUCH LUER SLIP 1 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER SLIP 10 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER SLIP 3 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH LUER SLIP 5 ML MISC	3	QL 120 / 30 day(s)
CARETOUCH PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
CARETOUCH PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
CARETOUCH SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH SAFETY LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH TWIST LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARETOUCH TWIST LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH TWIST LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
CARETOUCH TWIST MC LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CAYA DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
CEQUR SIMPLICITY 2U DEVICE	3	PV Preventive
CHOSEN LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CHOSEN LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
CHOSEN SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
CLEANLET LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
CLEVER CHEK LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
CLEVER CHOICE COMFORT EZ MISC	3	QL 120 / 30 day(s) PV Preventive
CLEVER CHOICE COMFORT EZ 29G X 12MM MISC	3	PV Preventive
CLEVER CHOICE COMFORT EZ 33G X 4 MM MISC	3	PV Preventive
CLEVER CHOICE LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
CLEVER CHOICE LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLEVER CHOICE LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
CLICKFINE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
CLICKFINE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
CLICKFINE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
CLICKFINE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
COAGUCHEK LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT ASSIST INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT ASSURED LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT ASSURED LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT EZ INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
COMFORT EZ MICRO PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT EZ PEN NEEDLES 32G X 8 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 33G X 5 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 33G X 6 MM MISC	3	PV Preventive
COMFORT EZ PEN NEEDLES 33G X 8 MM MISC	3	PV Preventive
COMFORT EZ PRO PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
COMFORT EZ PRO PEN NEEDLES 31G X 4 MM MISC	3	PV Preventive
COMFORT EZ PRO PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
COMFORT EZ SHORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 31G X 4 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 31G X 5 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 31G X 6 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 31G X 8 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 32G X 4 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 32G X 5 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 32G X 6 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 32G X 8 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 33G X 4 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 33G X 5 MM MISC	3	PV Preventive
COMFORT TOUCH INSULIN PEN NEED 33G X 6 MM MISC	3	PV Preventive
COMFORT TOUCH LANCETS 31G MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT TOUCH PLUS LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
COMFORT TOUCH PLUS LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMFORT TOUCH TWIST LANCET 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CONDOMS MISC	3	PV Preventive ACA Affordable Care Act Medications
CONTOUR CONTROL HIGH LIQUID	3	PV Preventive
CONTOUR CONTROL LOW LIQUID	3	PV Preventive
CONTOUR CONTROL NORMAL LIQUID	3	PV Preventive
CONTOUR NEXT CONTROL LOW SOLUTION	3	PV Preventive
CONTOUR NEXT CONTROL NORMAL SOLUTION	3	PV Preventive
CONTOUR NEXT EZ W/DEVICE KIT	3	QLC 1 / 365 days PV Preventive
CONTOUR NEXT GEN MONITOR W/DEVICE KIT	3	QLC 1 / 365 days PV Preventive
CONTOUR NEXT MONITOR W/DEVICE KIT	3	QLC 1 / 365 days PV Preventive
CONTOUR NEXT ONE DEVICE	3	QLC 1 / 365 days PV Preventive
CONTOUR NEXT ONE KIT	3	PV Preventive
CONTOUR NEXT TEST STRIP	3	QL 400 / 100 days PV Preventive
CONTOUR TEST STRIP	3	QL 400 / 100 days PV Preventive
CRONO SYRINGE 19G X 1-1/2" 10 ML MISC	3	
CRONO SYRINGE 19G X 1-1/2" 20 ML MISC	3	
CVS LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
CVS LANCETS MICRO THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CVS LANCETS ORIGINAL MISC	3	QL 120 / 30 day(s) PV Preventive
CVS LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
CVS LANCETS ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CVS LANCETS ULTRA-THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
CVS LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
CVS ULTRA THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
DEXCOM G6 RECEIVER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive
DEXCOM G6 SENSOR MISC	3	QL 3 / 30 day(s) ST STC Must also be on any insulin PV Preventive
DEXCOM G6 TRANSMITTER MISC	3	ST QLC 1 / 90 days STC Must also be on any insulin PV Preventive
DEXCOM G7 RECEIVER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXCOM G7 SENSOR MISC	3	QL 3 / 30 day(s) ST STC Must also be on any insulin PV Preventive
DIATHRIVE LANCET ULTRA THIN 30 MISC	3	QL 120 / 30 day(s) PV Preventive
DIATHRIVE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
DIATHRIVE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
DIATHRIVE PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
DIATHRIVE PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
DIATHRIVE PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
DIATHRIVE PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
DROPLET GENTEEL LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 30G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 30G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 31G X 1/4" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPLET INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
DROPLET LANCETS ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
DROPLET LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
DROPLET MICRON 34G X 3.5 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 29G X 10MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
DROPLET PEN NEEDLES 32G X 8 MM MISC	3	PV Preventive
DROPLET PERSONAL LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
DROPSAFE ACTI-LANCE 23G MISC	3	QL 120 / 30 day(s) PV Preventive
DROPSAFE SAFETY PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
DROPSAFE SAFETY PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
DROPSAFE SICURA 25G X 1" MISC	3	QL 120 / 30 days
DRUG MART LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
DRUG MART LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
DRUG MART ON-THE-GO LANCET 30G MISC	3	QL 120 / 30 day(s) PV Preventive
DRUG MART UNIFINE PENTIPS 29G X 12MM MISC	3	PV Preventive
DRUG MART UNIFINE PENTIPS 31G X 6 MM MISC	3	PV Preventive
DRUG MART UNIFINE PENTIPS 31G X 8 MM MISC	3	PV Preventive
DRUG MART UNIFINE PENTIPS 32G X 4 MM MISC	3	PV Preventive
DRUG MART UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
DRUG MART UNILET LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
DRUG MART UNILET LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DRUG MART UNILET LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
DUREX EXTRA SENSITIVE THIN DEVICE	3	PV Preventive ACA Affordable Care Act Medications
DUREX EXTRA SENSITIVE THIN MISC	3	PV Preventive ACA Affordable Care Act Medications
DUREX REALFEEL DEVICE	3	PV Preventive ACA Affordable Care Act Medications
DUREX TROPICAL MISC	3	PV Preventive ACA Affordable Care Act Medications
E-Z JECT LANCET MICRO-THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
E-Z JECT LANCET SUPER THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
E-Z JECT LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
E-Z JECT LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
E-Z JECT LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT INSULIN SYRINGE 29G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT INSULIN SYRINGE 31G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY COMFORT LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT LANCETS TWIST TOP MISC	3	QL 120 / 30 day(s) PV Preventive
EASY COMFORT PEN NEEDLES 29G X 5MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
EASY COMFORT PEN NEEDLES 33G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY COMFORT PEN NEEDLES 33G X 6 MM MISC	3	PV Preventive
EASY GLIDE CATH TIP SYRINGE 60 ML MISC	3	QL 120 / 30 days
EASY GLIDE LUER LOCK SYRINGE 1 ML MISC	3	QL 120 / 30 day(s)
EASY GLIDE LUER LOCK SYRINGE 10 ML MISC	3	QL 120 / 30 day(s)
EASY GLIDE LUER LOCK SYRINGE 20 ML MISC	3	QL 120 / 30 days
EASY GLIDE LUER LOCK SYRINGE 3 ML MISC	3	QL 120 / 30 day(s)
EASY GLIDE LUER LOCK SYRINGE 30 ML MISC	3	QL 120 / 30 days
EASY GLIDE LUER LOCK SYRINGE 5 ML MISC	3	QL 120 / 30 day(s)
EASY GLIDE LUER LOCK SYRINGE 60 ML MISC	3	QL 120 / 30 days
EASY GLIDE PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
EASY GLIDE SLIP LOCK SYRINGE 1 ML MISC	3	QL 120 / 30 day(s)
EASY MINI EJECT LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
EASY MINI LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH ALLERGY SYRINGE 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH ALLERGY SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK INSULIN SY 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH FLIPLOCK INSULIN SY 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH FLIPLOCK INSULIN SY 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH FLIPLOCK INSULIN SY 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH FLIPLOCK NEEDLES 18G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK NEEDLES 18G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 19G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 19G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 20G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 20G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 21G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 21G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 22G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 22G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 22G X 3/4" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 23G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 23G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 23G X 5/8" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 25G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 25G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 25G X 5/8" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 26G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 27G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 27G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 28G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 29G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 30G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 30G X 5/16" MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK NEEDLES 31G X 5/16" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 18G X 1.5" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 19G X 1.5" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 20G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH FLIPLOCK SAFETY SYR 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 1" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 25G X 5/8" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLIPLOCK SAFETY SYR 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE FLIPLOCK 25G X 1" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE FLIPLOCK 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE SHEATHLOCK 25G X 1" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH FLURINGE SHEATHLOCK 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH HEALTHPRO HIGH/LOW LIQUID	3	PV Preventive
EASY TOUCH HYPODERMIC NEEDLE 16G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 16G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 18G X 1.25" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH HYPODERMIC NEEDLE 19G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 19G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 20G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 23G X 1-1/4" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 23G X 3/4" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 24G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 24G X 1.25" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 26G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 26G X 3/8" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 26G X 5/8" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 27G X 1-1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 27G X 1-1/4" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 30G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH HYPODERMIC NEEDLE 30G X 1/2" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 31G X 5/16" MISC	3	QL 120 / 30 days
EASY TOUCH HYPODERMIC NEEDLE 32G X 5/16" MISC	3	QL 120 / 30 days
EASY TOUCH INSULIN BARRELS U-100 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SAFETY SYR 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 27G X 5/8" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 28G/TWIST MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH LANCETS 30G/TWIST MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 32G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 32G/TWIST MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCETS 33G/TWIST MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 30G X 6 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
EASY TOUCH PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
EASY TOUCH SAFETY LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH SAFETY LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH SAFETY LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM MISC	3	PV Preventive
EASY TOUCH SAFETY PEN NEEDLES 29G X 8MM MISC	3	PV Preventive
EASY TOUCH SAFETY PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
EASY TOUCH SAFETY SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH SAFETY SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 10 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 25G X 1" 5 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
EASY TOUCH SHEATHLOCK SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH SHEATHLOCK SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH SHEATHLOCK SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EASY TOUCH SHEATHLOCK SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EASY TOUCH SYRINGE BARREL 1 ML MISC	3	QL 120 / 30 day(s)
EASY TOUCH SYRINGE BARREL 10 ML MISC	3	QL 120 / 30 day(s)
EASY TOUCH SYRINGE BARREL 20 ML MISC	3	QL 120 / 30 days
EASY TOUCH SYRINGE BARREL 3 ML MISC	3	QL 120 / 30 day(s)
EASY TOUCH SYRINGE BARREL 5 ML MISC	3	QL 120 / 30 day(s)
EASY TOUCH SYRINGE BARREL 60 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB FLIPLOCK SYRINGE 26G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB FLIPLOCK SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB FLIPLOCK SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB SHEATHLOCK SYR 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB SHEATHLOCK SYR 26G X 5/8" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB SHEATHLOCK SYR 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
EASY TOUCH TB SHEATHLOCK SYR 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EASYPOINT NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 20G X 1-1/2" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE/SYRINGE 18G X 1" 3 ML MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE/SYRINGE 18G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE/SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE/SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
EASYPOINT NEEDLE/SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
EMBECTA AUTOSHIELD DUO 30G X 5 MM MISC	3	PV Preventive
EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INS SYR U/F 1/2 UNIT 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMBECTA INSULIN SYRINGE U-100 27G X 5/8" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U-100 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EMBECTA INSULIN SYRINGE U/F 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA INSULIN SYRINGE U/F 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM MISC	3	PV Preventive
EMBECTA PEN NEEDLE NANO 32G X 4 MM MISC	3	PV Preventive
EMBECTA PEN NEEDLE U/F 29G X 12.7MM MISC	3	PV Preventive
EMBECTA PEN NEEDLE U/F 31G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EMBECTA PEN NEEDLE U/F 31G X 8 MM MISC	3	PV Preventive
EMBECTA PEN NEEDLE U/F 32G X 6 MM MISC	3	PV Preventive
EMBRACE LANCETS ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
EMBRACE LANCING DEVICE/EJECTOR MISC	3	QL 120 / 30 days PV Preventive
EMBRACE PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
EMBRACE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
EMBRACE PRESSURE ACTIVATED 21G MISC	3	QL 120 / 30 day(s) PV Preventive
EMBRACE PRESSURE ACTIVATED 28G MISC	3	QL 120 / 30 day(s) PV Preventive
EQL COLOR LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
EQL COLOR LANCETS MICRO 33G MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
EQL INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EQL INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
EQL INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
EQL INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
EQL SUPER THIN LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
EQL THIN LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
EZ-LETS LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
EZ-LETS LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
EZ-LETS LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
EZ-LETS LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
FANTASY LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
FANTASY LUBRICATED/SPERMICIDE MISC	3	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FC2 FEMALE CONDOM MISC	3	PV Preventive ACA Affordable Care Act Medications
FEMCAP 22 MM DEVICE	3	PV Preventive ACA Affordable Care Act Medications
FEMCAP 26 MM DEVICE	3	PV Preventive ACA Affordable Care Act Medications
FEMCAP 30 MM DEVICE	3	PV Preventive ACA Affordable Care Act Medications
FIFTY50 PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
FIFTY50 PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
FIFTY50 PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
FIFTY50 PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
FIFTY50 SAFETY SEAL LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
FIFTY50 UNILET LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
FINE 30 MISC	3	QL 120 / 30 day(s) PV Preventive
FINGERSTIX LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLOW-EZE VENTED NEEDLE MISC	3	QL 120 / 30 days
FORA LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
FORA LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
FREESTYLE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
FREESTYLE LIBRE 14 DAY READER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE 14 DAY SENSOR MISC	3	QL 2 / 28 day(s) ST STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE 2 PLUS SENSOR MISC	3	QL 2 / 28 day(s) ST STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE 2 READER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE 2 SENSOR MISC	3	QL 2 / 28 day(s) ST STC Must also be on any insulin PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FREESTYLE LIBRE 3 READER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE 3 SENSOR MISC	3	QL 2 / 28 day(s) ST STC Must also be on any insulin PV Preventive
FREESTYLE LIBRE READER DEVICE	3	ST QLC 1 / 365 days STC Must also be on any insulin PV Preventive
FREESTYLE UNISTICK II LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
GENTEEL BUTTERFLY TOUCH LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
GENTEEL CONTACT TIPS (BLUE) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL CONTACT TIPS (CLEAR) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL CONTACT TIPS (GREEN) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL CONTACT TIPS (ORANGE) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL CONTACT TIPS (RAINBOW) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL CONTACT TIPS (VIOLET) MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENTEEL CONTACT TIPS (YELLOW) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL LANCING KIT (BLUE) KIT	3	QL 120 / 30 days PV Preventive
GENTEEL NOZZLES MISC	3	QL 120 / 30 days PV Preventive
GENTEEL PLUS LANCING (BLACK) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL PLUS LANCING (PURPLE) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL PLUS LANCING (WHITE) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL PLUS LANCING DEV(BLUE) MISC	3	QL 120 / 30 days PV Preventive
GENTEEL PLUS LANCING DEV(PINK) MISC	3	QL 120 / 30 days PV Preventive
GENTLE-LET GP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
GENTLE-LET LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
GENTLE-LET PLATFORMS MISC	3	QL 120 / 30 days PV Preventive
GLOBAL EASE INJECT PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
GLOBAL EASE INJECT PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
GLOBAL EASE INJECT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
GLOBAL EASE INJECT PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL EASY GLIDE INSULIN SYR 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL EASY GLIDE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE INSULIN SYR 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INJECT EASE LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INJECT EASE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
GLOBAL INSULIN SYRINGES 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLOBAL LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
GLUCOCOM LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOCOM LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOCOM LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GLUCOPRO INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
GNP CLICKFINE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
GNP CLICKFINE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
GNP INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GNP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
GNP INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNP INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
GNP INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
GNP INSULIN SYRINGES 28GX1/2" 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGES 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGES 30GX5/16" 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP INSULIN SYRINGES 31GX5/16" 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GNP LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
GNP LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
GNP LANCING SYSTEM DEVICE MISC	3	QL 120 / 30 days PV Preventive
GNP PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
GNP PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
GNP PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
GNP PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNP STERILE LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
GNP STERILE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
GNP STERILE LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
GNP ULTICARE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
GNP ULTICARE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
GNP ULTICARE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
GNP ULTICARE PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
GNP ULTIGUARD SAFEPACK NEEDLE 31G X 5 MM MISC	3	PV Preventive
GNP ULTIGUARD SAFEPACK NEEDLE 31G X 8 MM MISC	3	PV Preventive
GNP ULTIGUARD SAFEPACK NEEDLE 32G X 4 MM MISC	3	PV Preventive
GNP ULTIGUARD SAFEPACK NEEDLE 32G X 6 MM MISC	3	PV Preventive
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
GOJJI LANCING DEVICE/CLEAR CAP MISC	3	QL 120 / 30 days PV Preventive
GOJJI STERILE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
GOODSENSE COLOR LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE LANCETS 26G UNIV MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GOODSENSE LANCETS 30G UNIV MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE LANCETS 33G UNIV MISC	3	QL 120 / 30 day(s) PV Preventive
GOODSENSE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
GOODSENSE PEN NEEDLE PENFINE 31G X 5 MM MISC	3	PV Preventive
GOODSENSE PEN NEEDLE PENFINE 31G X 8 MM MISC	3	PV Preventive
GOODSENSE PEN NEEDLE PENFINE 32G X 4 MM MISC	3	PV Preventive
GOODSENSE PEN NEEDLE PENFINE 32G X 6 MM MISC	3	PV Preventive
H-E-B INCONTROL ADV LANCING MISC	3	QL 120 / 30 days PV Preventive
H-E-B INCONTROL LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
H-E-B INCONTROL LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
H-E-B INCONTROL LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
H-E-B INCONTROL PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
H-E-B INCONTROL PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
H-E-B INCONTROL PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
H-E-B INCONTROL PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
H-E-B INCONTROL PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
H-E-B INCONTROL UNIFINE PENTIP 31G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
H-E-B INCONTROL UNIFINE PENTIP 31G X 6 MM MISC	3	PV Preventive
H-E-B INCONTROL UNIFINE PENTIP 31G X 8 MM MISC	3	PV Preventive
H-E-B INCONTROL UNIFINE PENTIP 32G X 4 MM MISC	3	PV Preventive
H-E-B INCONTROL UNIFINE PENTIP 33G X 4 MM MISC	3	PV Preventive
HAEMOLANCE MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE LOW FLOW LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE PLUS MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE PLUS HIGH FLOW MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE PLUS LOW FLOW MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE PLUS MAX FLOW MISC	3	QL 120 / 30 day(s) PV Preventive
HAEMOLANCE PLUS PEDIATRIC FLOW MISC	3	QL 120 / 30 day(s) PV Preventive
HEALTH CARE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
HEALTHWISE INSULIN SYR/NEEDLE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
HEALTHWISE SHORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
HM ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
HM ULTICARE MINI PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
HM ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
HY-VEE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
HY-VEE THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
HYPODERMIC NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 20G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 23G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPODERMIC NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 26G X 1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 27G X 1-1/2" MISC	3	QL 120 / 30 days
HYPODERMIC NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
HYPOLANCE AST LANCING KIT	3	QL 120 / 30 days PV Preventive
IHEALTH CONTROL SOLUTION LIQUID	3	PV Preventive
IHEALTH LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
IN TOUCH LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
IN TOUCH STERILE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
INCONTROL ULTICARE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	PV Preventive
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	PV Preventive
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	PV Preventive
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	PV Preventive
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	PV Preventive
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	PV Preventive
INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 1/4" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
INSUPEN PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
INSUPEN PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
INSUPEN PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
INSUPEN PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
INSUPEN PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSUPEN SENSITIVE 32G X 6 MM MISC	3	PV Preventive
INSUPEN SENSITIVE 32G X 8 MM MISC	3	PV Preventive
INSUPEN ULTRAFIN 30G X 8 MM MISC	3	PV Preventive
INSUPEN ULTRAFIN 31G X 6 MM MISC	3	PV Preventive
INSUPEN ULTRAFIN 31G X 8 MM MISC	3	PV Preventive
INSUPEN32G EXTR3ME 32G X 6 MM MISC	3	PV Preventive
IQIRVO 80 MG TAB	5	QL 30 / 30 days PA S
K-Y ME & YOU EXTRA LUBRICATED DEVICE	3	PV Preventive ACA Affordable Care Act Medications
K-Y ME & YOU INTENSE DEVICE	3	PV Preventive ACA Affordable Care Act Medications
KAMELEON LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO COLORS DEVICE	3	PV Preventive ACA Affordable Care Act Medications
KIMONO MAXX-LARGE FLARE MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO MICRO THIN MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO MICRO THIN PLUS MISC	3	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KIMONO PLUS MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO PS MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO PS PLUS MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO SENSATION MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO SENSATION PLUS MISC	3	PV Preventive ACA Affordable Care Act Medications
KIMONO SPECIAL DEVICE	3	PV Preventive ACA Affordable Care Act Medications
KINNEY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
KINNEY THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KINRAY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KINRAY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
KINRAY INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
KMART VALU INSULIN SYRINGE 29G U-100 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KMART VALU INSULIN SYRINGE 29G U-100 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KMART VALU INSULIN SYRINGE 30G U-100 0.3 ML MISC	3	PV Preventive
KMART VALU INSULIN SYRINGE 30G U-100 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
KMART VALU INSULIN SYRINGE 30G U-100 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER AUTOLET LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
KROGER HEALTHPRO LANCET 26G MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
KROGER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
KROGER INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KROGER LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS MICRO THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS SUPER THIN MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCETS ULTRATHIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
KROGER LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
KROGER PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
KROGER PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
KROGER PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
KROGER PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
KROGER PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
KROGER PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
LANCET DEVICE MISC	3	QL 120 / 30 days PV Preventive
LANCET DEVICE WITH EJECTOR MISC	3	QL 120 / 30 days PV Preventive
LANCET TRANSPORTER CASE MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS 28G THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS MICRO THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS SUPER THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS SUPER THIN 28G MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LANCETS ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
LANZO MISC	3	QL 120 / 30 days PV Preventive
LEADER ADVANCED LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
LEADER INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEADER INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
LEADER INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LEADER INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
LEADER INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
LEADER UNIFINE PENTIPS 31G X 5 MM MISC	3	PV Preventive
LEADER UNIFINE PENTIPS 32G X 4 MM MISC	3	PV Preventive
LEADER UNIFINE PENTIPS PLUS 31G X 5 MM MISC	3	PV Preventive
LEADER UNIFINE PENTIPS PLUS 31G X 8 MM MISC	3	PV Preventive
LEADER UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
LIBERTY MEDICAL LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIBERTY MINI LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
LITE TOUCH LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
LITE TOUCH LANCING PEN MISC	3	QL 120 / 30 days PV Preventive
LITETOUCH INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
LITETOUCH INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
LITETOUCH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
LITETOUCH INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LITETOUCH LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
LITETOUCH PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
LITETOUCH PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
LITETOUCH PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
LITETOUCH PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
LITETOUCH PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
LIVE BETTER LANCET SUPER THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
LONGS LANCETS STANDARD MISC	3	QL 120 / 30 day(s) PV Preventive
LONGS LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LONGS LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive
LUER LOCK SAFETY SYRINGES 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 22G X 1" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 23G X 1" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 25G X 1" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
LUER LOCK SAFETY SYRINGES 3 ML MISC	3	QL 120 / 30 day(s)
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MAGELLAN SYRINGE-SAFETY NEEDLE 23G X 1" 1 ML MISC	3	QL 120 / 30 days
MAGELLAN TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MAGELLAN TUBERCULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MARATHON MEDICAL PENTIPS 29G X 12MM MISC	3	PV Preventive
MARATHON MEDICAL PENTIPS 31G X 5 MM MISC	3	PV Preventive
MARATHON MEDICAL PENTIPS 31G X 8 MM MISC	3	PV Preventive
MARATHON MEDICAL PENTIPS 32G X 4 MM MISC	3	PV Preventive
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM MISC	3	PV Preventive
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 8MM MISC	3	PV Preventive
MAXICOMFORT II PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAXICOMFORT SYR 27G X 1/2" 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MAXX MISC	3	PV Preventive ACA Affordable Care Act Medications
MAXX PLUS MISC	3	PV Preventive ACA Affordable Care Act Medications
MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MEDIC INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MEDICHOICE SAFETY LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
MEDICHOICE SAFETY LANCET EXTRA MISC	3	QL 120 / 30 day(s) PV Preventive
MEDICHOICE SAFETY LANCET NORM MISC	3	QL 120 / 30 day(s) PV Preventive
MEDICINE SHOPPE PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
MEDICINE SHOPPE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
MEDLANCE EXTRA 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE LITE 25G MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE PLUS EXTRA 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE PLUS LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE PLUS LITE 25G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MEDLANCE PLUS SPECIAL 0.8MM MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE PLUS SUPERLITE 30G MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE PLUS UNIVERSAL 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MEDLANCE UNIVERSAL 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER LANCETS UNIVERSAL 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER LANCETS UNIVERSAL 30G MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER LANCETS UNIVERSAL 33G MISC	3	QL 120 / 30 day(s) PV Preventive
MEIJER PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
MEIJER PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
MEIJER PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
MEIJER SUPER THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
methylergonovine maleate tab 0.2 mg	4	
methylergonovine maleate tab 0.2 mg	2	
MICRODOT PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
MICRODOT PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MICRODOT PEN NEEDLE 33G X 4 MM MISC	3	PV Preventive
MICROLET LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
MICROLET NEXT LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
MINI LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MM INSULIN SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MM LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
MM PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
MM PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
MM PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
MM PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
MM TWIST LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOBILE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT ALLERGIST TRAY 27G X 1/2" 1 ML KIT	3	QL 120 / 30 days
MONOJECT ALLERGIST TRAY 28G X 1/2" 0.5 ML KIT	3	QL 120 / 30 days
MONOJECT ALLERGIST TRAY 28G X 1/2" 1 ML KIT	3	QL 120 / 30 days
MONOJECT BLUNTIP CANNULA 20G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT BLUNTIP CANNULA 21G X 1" MISC	3	QL 120 / 30 days
MONOJECT BLUNTIP SYR/CANNULA 3 ML MISC	3	QL 120 / 30 day(s)
MONOJECT BLUNTIP SYR/CANNULA 6 ML MISC	3	QL 120 / 30 days
MONOJECT CONTROL SYRINGE 12 ML MISC	3	QL 120 / 30 days
MONOJECT CONTROL SYRINGE 20 ML MISC	3	QL 120 / 30 days
MONOJECT FILTER ASPIRATOR MISC	3	QL 120 / 30 days
MONOJECT FILTER NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT FILTER NEEDLE 20G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 14G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 14G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 14G X 2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 16G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 16G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 16G X 3/4" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 16G X 5/8" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 19G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT HYPODERMIC NEEDLE 19G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 20G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 20G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 21G X 2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 23G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 23G X 3/4" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/4" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 25G X 2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 26G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 26G X 1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/4" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
MONOJECT HYPODERMIC NEEDLE 30G X 3/4" MISC	3	QL 120 / 30 days
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT INSULIN SYRINGE U-100 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT INTRODUCER NEEDLE 18G X 1-1/4" MISC	3	
MONOJECT LIFESHIELD SYRINGE 18G X 1" 12 ML MISC	3	QL 120 / 30 days
MONOJECT LIFESHIELD SYRINGE 18G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 18G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 18G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 19G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 19G X 1-1/2" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT MAGELLAN SAFETY NDL 20G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 20G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 21G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 21G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 21G X 5/8" MISC	3	
MONOJECT MAGELLAN SAFETY NDL 22G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 22G X 1-1/2" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 23G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 23G X 5/8" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 25G X 1" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SAFETY NDL 25G X 5/8" MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 18G X 1" 12 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 18G X 1" 6 ML MISC	3	
MONOJECT MAGELLAN SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 12 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 21G X 1" 12 ML MISC	3	
MONOJECT MAGELLAN SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 21G X 1" 6 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 12 ML MISC	3	
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 12 ML MISC	3	
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 23G X 1" 1 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
MONOJECT MEDICATION TRANSF NDL MISC	3	QL 120 / 30 days
MONOJECT PHARMACY TRAY 1 ML MISC	3	QL 120 / 30 day(s)
MONOJECT PHARMACY TRAY 12 ML MISC	3	QL 120 / 30 days
MONOJECT PHARMACY TRAY 20 ML MISC	3	QL 120 / 30 days
MONOJECT PHARMACY TRAY 3 ML MISC	3	QL 120 / 30 day(s)
MONOJECT PHARMACY TRAY 35 ML MISC	3	QL 120 / 30 days
MONOJECT PHARMACY TRAY 6 ML MISC	3	QL 120 / 30 days
MONOJECT PHARMACY TRAY 60 ML MISC	3	QL 120 / 30 days
MONOJECT PISTON SYRINGE 140 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/CATHTIP 35 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/LLOCK 20 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/LLOCK 35 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/LLOCK 60 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/LTIP 20 ML MISC	3	QL 120 / 30 days
MONOJECT SOFTPACK/RG LOCK 35 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SOFTPACK/RG LUER 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 12 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 18G X 1" 12 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 20G X 1-1/2" 12 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 20G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 20G X 3/4" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 21G X 1" 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 21G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 22G X 1-1/2" 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 25G X 1-1/4" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 27G X 1-1/4" 3 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE 3 ML MISC	3	QL 120 / 30 day(s)
MONOJECT SYRINGE 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE CATH TIP 35 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SYRINGE CATH TIP 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE ECC LUER 20 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE ECC LUER 35 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE ECCENTRIC TIP 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER LOCK 20 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER LOCK 35 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER LOCK 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER LOCK 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER-LOCK TIP 140 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE LUER-LOCK TIP 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE PHARMACY TRAY 1 ML MISC	3	QL 120 / 30 day(s)
MONOJECT SYRINGE REG LUER 12 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REG LUER 20 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REG LUER 3 ML MISC	3	QL 120 / 30 day(s)
MONOJECT SYRINGE REG LUER 35 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REG LUER 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REGULAR TIP 20 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REGULAR TIP 3 ML MISC	3	QL 120 / 30 day(s)
MONOJECT SYRINGE REGULAR TIP 6 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE REGULAR TIP 60 ML MISC	3	QL 120 / 30 days
MONOJECT SYRINGE TOOMEY TYPE 60 ML MISC	3	QL 120 / 30 days
MONOJECT TB SAFETY SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
MONOJECT TB SAFETY SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MONOJECT TB SYRINGE 1 ML MISC	3	QL 120 / 30 day(s)

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT TB SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
MONOJECT TB SYRINGE 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
MONOJECT TB SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MONOJECT TB SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days
MONOJECT TB SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MONOJECT ULTRA COMFORT SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MONOLET LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
MONOLET OPD LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOLETTOR SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
MPD SAFETY LANCET 21G MISC	3	QL 120 / 30 day(s) PV Preventive
MPD SAFETY LANCET 23G MISC	3	QL 120 / 30 day(s) PV Preventive
MPD SAFETY LANCET 28G MISC	3	QL 120 / 30 day(s) PV Preventive
MPD SAFETY LANCET 30G MISC	3	QL 120 / 30 day(s) PV Preventive
MS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
MS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
MS INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
MULTI-LANCET DEVICE MISC	3	QL 120 / 30 days PV Preventive
MULTI-LANCET DEVICE 2 KIT	3	QL 120 / 30 days PV Preventive
MYGLUCOHEALTH LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
NORM-JECT LUER LOCK SYRINGE 10 ML MISC	3	QL 120 / 30 day(s)
NORM-JECT LUER LOCK SYRINGE 20 ML MISC	3	QL 120 / 30 days
NORM-JECT LUER SLIP SYRINGE 1 ML MISC	3	QL 120 / 30 day(s)
NOVA SAFETY LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
NOVA SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVA SUREFLEX LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
NOVA SUREFLEX LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM MISC	3	PV Preventive
NOVOFINE PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
NOVOFINE PLUS PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
NOVOPEN ECHO DEVICE	3	PV Preventive
OMNIFLEX DIAPHRAGM DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	4	QL 10 / 30 day(s) PA PV Preventive
OMNIPOD 5 G6 INTRO (GEN 5) KIT	4	PA PV Preventive
OMNIPOD 5 G6 PODS (GEN 5) MISC	4	QL 15 / 30 day(s) PA PV Preventive
OMNIPOD 5 G7 INTRO (GEN 5) KIT	4	PA PV Preventive
OMNIPOD 5 G7 PODS (GEN 5) MISC	4	QL 15 / 30 day(s) PA PV Preventive
OMNIPOD CLASSIC PODS (GEN 3) MISC	3	QL 15 / 30 day(s) PA PV Preventive
OMNIPOD DASH INTRO (GEN 4) KIT	4	PA PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNIPOD DASH PDM (GEN 4) KIT	3	PA PV Preventive
OMNIPOD DASH PODS (GEN 4) MISC	4	QL 15 / 30 day(s) PA PV Preventive
ONETOUCH DELICA PLUS LANCET30G MISC	3	QL 120 / 30 day(s) PV Preventive
ONETOUCH DELICA PLUS LANCET33G MISC	3	QL 120 / 30 day(s) PV Preventive
ONETOUCH DELICA PLUS LANCING MISC	3	QL 120 / 30 days PV Preventive
ONETOUCH DELICA SAFETY LANCING MISC	3	QL 120 / 30 day(s) PV Preventive
ONETOUCH ULTRA STRIP	3	QL 400 / 100 days PV Preventive
ONETOUCH ULTRA BLUE TEST STRIP	3	QL 400 / 100 days PV Preventive
ONETOUCH ULTRA CONTROL LIQUID	3	PV Preventive
ONETOUCH ULTRA TEST STRIP	3	QL 400 / 100 days PV Preventive
ONETOUCH ULTRASOFT 2 LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ONETOUCH VERIO LIQUID	3	PV Preventive
ONETOUCH VERIO STRIP	3	QL 400 / 100 days PV Preventive
ONETOUCH VERIO HIGH LIQUID	3	PV Preventive
PC UNIFINE PENTIPS 31G X 5 MM MISC	3	PV Preventive
PC UNIFINE PENTIPS 31G X 6 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PC UNIFINE PENTIPS 31G X 8 MM MISC	3	PV Preventive
PEN NEEDLE/5-BEVEL TIP 31G X 8 MM MISC	3	PV Preventive
PEN NEEDLE/5-BEVEL TIP 32G X 4 MM MISC	3	PV Preventive
PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
PEN NEEDLES 5/16" 31G X 8 MM MISC	3	PV Preventive
PENTIPS 29G X 12MM MISC	3	PV Preventive
PENTIPS 31G X 5 MM MISC	3	PV Preventive
PENTIPS 31G X 6 MM MISC	3	PV Preventive
PENTIPS 31G X 8 MM MISC	3	PV Preventive
PENTIPS 32G X 4 MM MISC	3	PV Preventive
PENTIPS 32G X 6 MM MISC	3	PV Preventive
PENTIPS GENERIC PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
PENTIPS GENERIC PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
PENTIPS GENERIC PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
PENTIPS GENERIC PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTIPS GENERIC PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
PERFECT LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
PERFECT LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
PERFECT POINT SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PERFECT POINT SAFETY NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
PHARMACIST CHOICE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PHARMACY COUNTER LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PIP LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
PIP LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
PIP PEN NEEDLES 31G X 5MM 31G X 5 MM MISC	3	PV Preventive
PIP PEN NEEDLES 32G X 4MM 32G X 4 MM MISC	3	PV Preventive
POLY HUB NEEDLE 18G X 1" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 18G X 1-1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 21G X 1" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 22G X 1-1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 23G X 1" MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POLY HUB NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 25G X 5/8" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 27G X 1-1/4" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
POLY HUB NEEDLE 30G X 1/2" MISC	3	QL 120 / 30 days
PRECISION SURE-DOSE SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRECISION THINS GP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREFERRED PLUS LANCETS COLORED MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM MISC	3	PV Preventive
PREVENT DROPSAFE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
PREVENT DROPSAFE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
PREVENT SAFETY PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
PREVENT SAFETY PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRO COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRO COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
PRO COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
PRO COMFORT LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
PRO COMFORT LANCETS 31G MISC	3	QL 120 / 30 day(s) PV Preventive
PRO COMFORT PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
PRO COMFORT PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRO COMFORT PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
PRO COMFORT PEN NEEDLES 32G X 8 MM MISC	3	PV Preventive
PRO COMFORT SAFETY LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PRODIGY INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
PRODIGY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
PRODIGY LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
PRODIGY SAFETY LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
PRODIGY TWIST TOP LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
PSS SELECT GP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PSS SELECT PLATFORMS MISC	3	QL 120 / 30 days PV Preventive
PSS SELECT SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
PURE COMFORT LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
PURE COMFORT PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
PURE COMFORT PEN NEEDLE 32G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PURE COMFORT PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
PURE COMFORT PEN NEEDLE 32G X 8 MM MISC	3	PV Preventive
PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
PURE COMFORT SAFETY PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
PURE COMFORT SAFETY PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
PX ADVANCED LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
PX EXTRA SHORT PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
PX INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
PX LANCET AUTO INJECTOR MISC	3	QL 120 / 30 days PV Preventive
PX LANCETS MICROTHIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
PX LANCETS ULTRA THIN 28G MISC	3	QL 120 / 30 day(s) PV Preventive
PX MINI PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
PX PEN NEEDLE 29G X 12MM MISC	3	PV Preventive
PX PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
PX SHORTLENGTH PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
QC ADVANCED LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
QC LANCETS SUPER THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
QC LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QC PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
QC PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
QC PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
QC UNIFINE PENTIPS 32G X 4 MM MISC	3	PV Preventive
QC UNILET LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
QC UNILET LANCETS MICRO THIN MISC	3	QL 120 / 30 day(s) PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 29G X 12.7MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 31G X 4 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 32G X 5 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 32G X 8 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 33G X 4 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 33G X 5 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 33G X 6 MM MISC	3	PV Preventive
QUICK TOUCH INSULIN PEN NEEDLE 33G X 8 MM MISC	3	PV Preventive
RA E-ZJECT LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
RA E-ZJECT LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RA E-ZJECT LANCETS THIN 28G MISC	3	QL 120 / 30 day(s) PV Preventive
RA E-ZJECT LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive
RA INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RA INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RA INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RA INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RA PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
RA PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
RAYA SURE PEN NEEDLE 29G X 12MM MISC	3	PV Preventive
RAYA SURE PEN NEEDLE 31G X 4 MM MISC	3	PV Preventive
RAYA SURE PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
RAYA SURE PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
RAYA SURE PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
READYLANCE SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
REALITY INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
REALITY INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
REALITY INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REALITY INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
REALITY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
REALITY LATEX CONDOMS MISC	3	PV Preventive ACA Affordable Care Act Medications
REALITY LATEX/ULTRA TEXTURED DEVICE	3	PV Preventive ACA Affordable Care Act Medications
REALITY LATEX/ULTRA THIN DEVICE	3	PV Preventive ACA Affordable Care Act Medications
REALITY TRIGGER LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
RELION INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RELION INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
RELION INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
RELION INSULIN SYRINGE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive
RELION INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
RELION INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
RELION INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
RELION LANCET DEVICES 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELION LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
RELION LANCETS MICRO-THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
RELION LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
RELION LANCETS ULTRA-THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
RELION LANCING DEVICE KIT	3	QL 120 / 30 days PV Preventive
RELION LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
RELION MINI PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
RELION PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
RELION PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
RELION PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
RELION PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
RELION SHORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
RELION ULTRA THIN LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
RELION ULTRA THIN PLUS LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
REXALL LANCETS ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive
RIGHTEST ALTERNATE SITE ADAPT MISC	3	QL 120 / 30 days PV Preventive
RIGHTEST GD500 LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIGHTEST GL300 LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SAFE-T-LANCE MISC	3	QL 120 / 30 day(s) PV Preventive
SAFE-T-LANCE PLUS MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY LANCET 30G/PRESSURE ACT MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
SAFETY PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
SAFETY PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
SAPS HEALTH PLUS LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SAPS HEALTH TWIST TOP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SAPS TWIST TOP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SAPSCARE TWIST TOP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SB INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SB INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SB INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SB INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SB INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
SB LANCETS THIN MISC	3	QL 120 / 30 day(s) PV Preventive
SB LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive
SECURESAFE HYPODERMIC NEEDLE 19G X 1" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 19G X 1-1/2" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 21G X 1-1/2" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 22G X 1" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 25G X 1-1/2" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 26G X 1/2" MISC	3	QL 120 / 30 days
SECURESAFE HYPODERMIC NEEDLE 27G X 1/2" MISC	3	QL 120 / 30 days
SECURESAFE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SECURESAFE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SECURESAFE SAFETY PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
SECURESAFE SYRINGE/NEEDLE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
SECURESAFE SYRINGE/NEEDLE 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SECURESAFE SYRINGE/NEEDLE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SECURESAFE SYRINGE/NEEDLE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SECURESAFE SYRINGE/NEEDLE 25G X 1-1/2" 1 ML MISC	3	
SECURESAFE SYRINGE/NEEDLE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
SECURESAFE SYRINGE/NEEDLE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
SELECT-LITE DEVICE/LANCETS KIT	3	QL 120 / 30 days PV Preventive
SELECT-LITE LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
SIMPLE DIAGNOSTICS LANCING DEV MISC	3	QL 120 / 30 days PV Preventive
SINGLE-LET MISC	3	QL 120 / 30 day(s) PV Preventive
SM LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
SM TRUEDRAW LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
SMART DIABETES VANTAGE LANCING MISC	3	QL 120 / 30 days PV Preventive
SMART SENSE COLOR LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
SMART SENSE STANDARD LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SMART SENSE SUPER THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SMART SENSE THIN LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SMARTEST LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
SODIUM PHENYLBUTYRATE POWDER	5	PA S
SOLUS V2 LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
SOLUS V2 LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
SOLUS V2 TWIST LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
STERILANCE PA MISC	3	QL 120 / 30 days PV Preventive
STERILANCE TL MISC	3	QL 120 / 30 day(s) PV Preventive
SUPER THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 1/4" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT LANCETS 18G MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT LANCETS 21G MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SURE COMFORT LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
SURE COMFORT LANCING PEN MISC	3	QL 120 / 30 days PV Preventive
SURE COMFORT PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
SURE COMFORT PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
SURELITE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
SYRINGE DISPOSABLE 10 ML MISC	3	QL 120 / 30 day(s)
SYRINGE ECCENTRIC TIP 10 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER LOCK 10 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER LOCK 20 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1" 10 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1" 5 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 20G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE LUER LOCK 21G X 1" 10 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 21G X 1" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 21G X 1" 5 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 22G X 1" 10 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 22G X 1" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 22G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 23G X 1" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 25G X 1" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER LOCK 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 3 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER LOCK 30 ML MISC	3	QL 120 / 30 days
SYRINGE LUER LOCK 5 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER LOCK 60 ML MISC	3	QL 120 / 30 days
SYRINGE LUER SLIP 1 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER SLIP 10 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER SLIP 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
SYRINGE LUER SLIP 26G X 3/8" 1 ML MISC	3	QL 120 / 30 days
SYRINGE LUER SLIP 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE LUER SLIP 3 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER SLIP 35 ML MISC	3	QL 120 / 30 days
SYRINGE LUER SLIP 5 ML MISC	3	QL 120 / 30 day(s)
SYRINGE LUER SLIP 60 ML MISC	3	QL 120 / 30 days
SYRINGE/HYPODERMIC SAFETY 18G X 1" 12 ML MISC	3	QL 120 / 30 days
TECHLITE AST LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE INSULIN SYRINGE 31G X 15/64" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE INSULIN SYRINGE 31G X 15/64" 1 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TECHLITE LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
TECHLITE PEN NEEDLES 29G X 10MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
TECHLITE PEN NEEDLES 32G X 8 MM MISC	3	PV Preventive
TECHLITE PLUS PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TGT LANCET MICRO THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
TGT LANCET THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
TGT LANCET ULTRA THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TGT LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
THINLETS GP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
TODAYS HEALTH LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
TODAYS HEALTH PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
TODAYS HEALTH THIN LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
TODAYS HEALTH THIN LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
TOOMEY SYRINGE 70 ML MISC	3	QL 120 / 30 days
TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TOPCARE CLICKFINE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
TOPCARE LANCETS MICRO-THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPCARE ULTRA COMFORT INS SYR 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TOPCARE ULTRA COMFORT INS SYR 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRAVEL LANCETS ADVANCED 28G MISC	3	QL 120 / 30 day(s) PV Preventive
TROJAN ENZ MISC	3	PV Preventive ACA Affordable Care Act Medications
TROJAN MAGNUM MISC	3	PV Preventive ACA Affordable Care Act Medications
TROJAN ULTRA RIBBED LUBRICATED DEVICE	3	PV Preventive ACA Affordable Care Act Medications
TROJAN ULTRA THIN MISC	3	PV Preventive ACA Affordable Care Act Medications
TROJAN ULTRA THIN/SPERMICIDAL MISC	3	PV Preventive ACA Affordable Care Act Medications
TROJAN-ENZ LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
TROJAN-ENZ/SPERMICIDAL MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUE COMFORT INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COMFORT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT INSULIN SYRINGE 32G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 33G X 5 MM MISC	3	PV Preventive
TRUE COMFORT PEN NEEDLES 33G X 6 MM MISC	3	PV Preventive
TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUE COMFORT PRO INSULIN SYR 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PRO INSULIN SYR 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PRO INSULIN SYR 32G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
TRUE COMFORT PRO PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TRUE COMFORT PRO PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TRUE COMFORT SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COMFORT SAFETY PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
TRUE COMFORT SAFETY PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
TRUE COMFORT SAFETY PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
TRUE COMFORT TWIST TOP LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
TRUE COVER DEVICE	3	PV Preventive ACA Affordable Care Act Medications
TRUEDRAW LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
TRUEPLUS 5-BEVEL PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TRUEPLUS 5-BEVEL PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
TRUEPLUS 5-BEVEL PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TRUEPLUS INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
TRUEPLUS INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
TRUEPLUS LANCETS 26G MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUEPLUS LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
TRUEPLUS PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
TRUEPLUS PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
TRUEPLUS PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
TRUEPLUS PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
TRUEPLUS PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
TRUEPLUS SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
TRUSTEX COLOR CONDOMS + LUBE MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUB/RIBBED/STUDDED MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUB/SPERMICIDE EX ST MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUB/SPERMICIDE XL MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUBRICATED EX LARGE MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX LUBRICATED EXTRA ST MISC	3	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUSTEX LUBRICATED/SPERMICIDE MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX NATURAL CONDOMS + LUBE MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX NON-LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX RIA LUB/SPERMICIDE MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX RIA LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX RIA NON-LUBRICATED MISC	3	PV Preventive ACA Affordable Care Act Medications
TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	3	PV Preventive ACA Affordable Care Act Medications
TWIST TOP LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
ULTI-LANCE AUTOMATIC MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SYR 1/2 UNIT 31G X 1/4" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE INSULIN SYRINGE 28G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 31G X 1/4" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 31G X 1/4" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTICARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTICARE MICRO PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
ULTICARE MICRO PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ULTICARE MICRO PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
ULTICARE MINI PEN NEEDLES 30G X 5 MM MISC	3	PV Preventive
ULTICARE MINI PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
ULTICARE MINI PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
ULTICARE PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
ULTICARE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ULTICARE SHORT PEN NEEDLES 30G X 8 MM MISC	3	PV Preventive
ULTICARE SHORT PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ULTICARE SYRINGE 22G X 1-1/2" 1 ML MISC	3	QL 120 / 30 days
ULTICARE SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
ULTICARE TUBERCULIN SAFETY SYR 25G X 1" 1 ML MISC	3	QL 120 / 30 days
ULTICARE TUBERCULIN SAFETY SYR 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
ULTICARE TUBERCULIN SAFETY SYR 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
ULTICARE TUBERCULIN SAFETY SYR 27G X 5/8" 1 ML MISC	3	QL 120 / 30 days
ULTICARE TUBERCULIN SAFETY SYR 28G X 1/2" 1 ML MISC	3	QL 120 / 30 days
ULTIGUARD SAFEPACK PEN NEEDLE 29G X 12.7MM MISC	3	PV Preventive
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
ULTIGUARD SAFEPACK PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
ULTIGUARD SAFEPACK PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTIGUARD SAFEPACK SYR/NEEDLE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTILET CLASSIC LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ULTILET LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ULTILET PEN NEEDLE 29G X 12.7MM MISC	3	PV Preventive
ULTILET PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
ULTILET PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
ULTILET PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
ULTILET SAFETY LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ULTILET SAFETY LANCETS 23G MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA FLO INSULIN PEN NEEDLES 29G X 12MM MISC	3	PV Preventive
ULTRA FLO INSULIN PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ULTRA FLO INSULIN PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ULTRA FLO INSULIN PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
ULTRA FLO INSULIN PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA FLO INSULIN SYR 1/2 UNIT 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYR 1/2 UNIT 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA FLO INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA FLO INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA THIN LANCETS 31G MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA THIN PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
ULTRA-CARE LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II AUTO LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II INS SYR SHORT 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA-THIN II INS SYR SHORT 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM MISC	3	PV Preventive
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM MISC	3	PV Preventive
ULTRACARE INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRACARE INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRACARE INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRACARE INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ULTRACARE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRACARE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ULTRACARE PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ULTRACARE PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
ULTRACARE PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ULTRACARE PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRACARE PEN NEEDLES 32G X 5 MM MISC	3	PV Preventive
ULTRACARE PEN NEEDLES 32G X 6 MM MISC	3	PV Preventive
ULTRACARE PEN NEEDLES 33G X 4 MM MISC	3	PV Preventive
UNIFINE OTC PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
UNIFINE OTC PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
UNIFINE PENTIPS 29G X 12MM MISC	3	PV Preventive
UNIFINE PENTIPS 30G X 5 MM MISC	3	PV Preventive
UNIFINE PENTIPS 31G X 5 MM MISC	3	PV Preventive
UNIFINE PENTIPS 31G X 6 MM MISC	3	PV Preventive
UNIFINE PENTIPS 31G X 8 MM MISC	3	PV Preventive
UNIFINE PENTIPS 32G X 4 MM MISC	3	PV Preventive
UNIFINE PENTIPS 32G X 6 MM MISC	3	PV Preventive
UNIFINE PENTIPS 33G X 4 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 29G X 12MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 30G X 5 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 31G X 5 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 31G X 6 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 31G X 8 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
UNIFINE PENTIPS PLUS 33G X 4 MM MISC	3	PV Preventive
UNIFINE PROTECT PEN NEEDLE 30G X 5 MM MISC	3	PV Preventive
UNIFINE PROTECT PEN NEEDLE 30G X 8 MM MISC	3	PV Preventive
UNIFINE PROTECT PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
UNIFINE SAFECONTROL PEN NEEDLE 30G X 5 MM MISC	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNIFINE SAFECONTROL PEN NEEDLE 30G X 8 MM MISC	3	PV Preventive
UNIFINE SAFECONTROL PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
UNIFINE SAFECONTROL PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
UNIFINE SAFECONTROL PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
UNIFINE SAFECONTROL PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
UNIFINE ULTRA PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
UNIFINE ULTRA PEN NEEDLE 31G X 6 MM MISC	3	PV Preventive
UNIFINE ULTRA PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
UNIFINE ULTRA PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
UNILET COMFORTOUCH LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET EXCELITE MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET EXCELITE II MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET G.P. LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET G.P. SUPERLITE LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET GP 28 ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET MICRO-THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET SUPER-THIN 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNILET SUPERLITE LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNILET ULTRA-THIN 28G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 1 MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 COMFORT MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 EXTRA MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 NEONATAL MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 NORMAL MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 2 SUPER MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 3 MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 3 COMFORT MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 3 EXTRA MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 3 GENTLE MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK 3 NEONATAL MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNISTIK 3 NORMAL MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK CZT COMFORT MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK CZT NORMAL MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK NORMAL MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK PRO SAFETY LANCET MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK SAFETY LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK TOUCH SAFETY LANC 21G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK TOUCH SAFETY LANC 23G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK TOUCH SAFETY LANC 28G MISC	3	QL 120 / 30 day(s) PV Preventive
UNISTIK TOUCH SAFETY LANC 30G MISC	3	QL 120 / 30 day(s) PV Preventive
UNIVERSAL 1 LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
UNIVERSAL 1 LANCETS THIN 33G MISC	3	QL 120 / 30 day(s) PV Preventive
UNIVERSAL 1 LANCETS ULTRA THIN MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VALUE PLUS LANCET STANDARD 21G MISC	3	QL 120 / 30 day(s) PV Preventive
VALUE PLUS LANCETS SUPER THIN MISC	3	QL 120 / 30 day(s) PV Preventive
VALUE PLUS LANCETS THIN 26G MISC	3	QL 120 / 30 day(s) PV Preventive
VALUE PLUS LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
VANISHPOINT ALLERGY TRAY 27G X 1/2" 1 ML KIT	3	QL 120 / 30 days
VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
VANISHPOINT INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 0.5 ML MISC	3	PV Preventive
VANISHPOINT INSULIN SYRINGE 30G X 3/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VANISHPOINT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VANISHPOINT SAFETY SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SAFETY SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 21G X 1" 5 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 22G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SAFETY SYRINGE 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
VANISHPOINT SAFETY SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 20G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 20G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 21G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 21G X 1-1/2" 10 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 21G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 21G X 1-1/2" 5 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 22G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 22G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 23G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 23G X 1-1/2" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANISHPOINT SYRINGE 25G X 1" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT SYRINGE 25G X 1-1/2" 3 ML MISC	3	QL 120 / 30 day(s)
VANISHPOINT SYRINGE 25G X 5/8" 3 ML MISC	3	QL 120 / 30 days
VANISHPOINT TUBERCULIN SYRINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
VANISHPOINT TUBERCULIN SYRINGE 25G X 5/8" 1 ML MISC	3	QL 120 / 30 days
VANISHPOINT TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	3	QL 120 / 30 days
VERIFINE INSULIN PEN NEEDLE 29G X 12MM MISC	3	PV Preventive
VERIFINE INSULIN PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
VERIFINE INSULIN PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
VERIFINE INSULIN PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
VERIFINE INSULIN PEN NEEDLE 32G X 6 MM MISC	3	PV Preventive
VERIFINE INSULIN SYRINGE 29G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE INSULIN SYRINGE 29G X 1/2" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE INSULIN SYRINGE 31G X 5/16" 0.3 ML MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE INSULIN SYRINGE 31G X 5/16" 0.5 ML MISC	3	QL 120 / 30 days PV Preventive
VERIFINE INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	QL 120 / 30 days PV Preventive
VERIFINE PLUS PEN NEEDLE 31G X 5 MM MISC	3	PV Preventive
VERIFINE PLUS PEN NEEDLE 31G X 8 MM MISC	3	PV Preventive
VERIFINE PLUS PEN NEEDLE 32G X 4 MM MISC	3	PV Preventive
VERIFINE SAFE LANCET MINI 21G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERIFINE SAFE LANCET MINI 23G MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE SAFE LANCET MINI 28G MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE SAFE LANCET MINI 30G MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE UNIVERSAL LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE UNIVERSAL LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
VERIFINE UNIVERSAL LANCETS 33G MISC	3	QL 120 / 30 day(s) PV Preventive
VERISAFE SAFE STERILE SYRINGE 25G X 1" 1 ML MISC	3	QL 120 / 30 days
VERISAFE SAFETY STERILE NEEDLE 23G X 1-1/2" MISC	3	QL 120 / 30 days
VERISAFE SAFETY STERILE NEEDLE 25G X 1" MISC	3	QL 120 / 30 days
VISTOGARD 10 GM PACKET	5	S
VIVAGUARD INO CONTROL SOLUTION LIQUID	3	PV Preventive
VIVAGUARD LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
VIVAGUARD LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive
VIVAGUARD LANCING DEVICE MISC	3	QL 120 / 30 days PV Preventive
VIVAGUARD SAFETY LANCETS 28G MISC	3	QL 120 / 30 day(s) PV Preventive
VOWST CAP	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VP INSULIN SYRINGE 29G X 1/2" 0.3 ML MISC	3	QL 120 / 30 days PV Preventive
WAINUA 45 MG/0.8ML SOLN A-INJ	5	QL 0.8 / 30 days PA S
WALGREENS LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
WALGREENS LANCETS MICRO THIN MISC	3	QL 120 / 30 day(s) PV Preventive
WALGREENS LANCETS SUPER THIN MISC	3	QL 120 / 30 day(s) PV Preventive
WALGREENS THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
WALGREENS ULTRA THIN LANCETS MISC	3	QL 120 / 30 day(s) PV Preventive
WEGMANS UNIFINE PENTIPS PLUS 31G X 5 MM MISC	3	PV Preventive
WEGMANS UNIFINE PENTIPS PLUS 31G X 6 MM MISC	3	PV Preventive
WEGMANS UNIFINE PENTIPS PLUS 31G X 8 MM MISC	3	PV Preventive
WEGMANS UNIFINE PENTIPS PLUS 32G X 4 MM MISC	3	PV Preventive
WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM	3	PV Preventive ACA Affordable Care Act Medications
YALE DISP NEEDLES 21G X 1-1/4" MISC	3	QL 120 / 30 days
ZEVRX INSULIN SYRINGE 30G X 1/2" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ZEVRX INSULIN SYRINGE 30G X 1/2" 1 ML MISC	3	QL 120 / 30 days PV Preventive
ZEVRX INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ZEVRX INSULIN SYRINGE 30G X 5/16" 1 ML MISC	3	QL 120 / 30 day(s) PV Preventive
ZEVRX PEN NEEDLES 31G X 5 MM MISC	3	PV Preventive
ZEVRX PEN NEEDLES 31G X 6 MM MISC	3	PV Preventive
ZEVRX PEN NEEDLES 31G X 8 MM MISC	3	PV Preventive
ZEVRX PEN NEEDLES 32G X 4 MM MISC	3	PV Preventive
ZEVRX TWIST TOP LANCETS 30G MISC	3	QL 120 / 30 day(s) PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC AGENTS OPHTHALMIC AGENTS, OTHER		
tetracaine hcl ophth soln 0.5%	2	
tetracaine hcl ophth soln 0.5%	2	
ATROPINE SULFATE 1 % SOLUTION	4	
ATROPINE SULFATE 1 % SOLUTION	4	
atropine sulfate ophth soln 1%	2	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	2	
bacitracin-polymyxin b ophth oint	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	2	
cyclopentolate hcl ophth soln 1%	1	
cyclosporine (ophth) emulsion 0.05%	2	
dorzolamide hcl-timolol maleate ophth soln 2-0.5%	1	
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml	1	
ISOPTO ATROPINE 1 % SOLUTION	4	
LACRISERT 5 MG INSERT	4	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	2	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	2	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	2	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	2	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	1	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	1	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	1	
NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 SOLUTION	4	
OXERVATE 0.002 % SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
phenylephrine hcl ophth soln 10%	2	
phenylephrine hcl ophth soln 2.5%	2	
bacitracin-polymyxin b ophth oint	1	
SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION	4	
tetracaine hcl ophth soln 0.5%	2	
TOBRADEX 0.3-0.1 % OINTMENT	4	
tobramycin-dexamethasone ophth susp 0.3-0.1%	2	
TYRVAYA 0.03 MG/ACT SOLUTION	4	ST STC Trial and Failure of generic cyclosporine eye drops
XIIDRA 5 % SOLUTION	4	ST STC Trial and failure of 1 therapy: generic cyclosporine eye drops
ZYLET 0.5-0.3 % SUSPENSION	4	
OPHTHALMIC ANTI-ALLERGY AGENTS		
ALOCRIL 2 % SOLUTION	4	
ALOMIDE 0.1 % SOLUTION	4	
azelastine hcl ophth soln 0.05%	1	
bepotastine besilate ophth soln 1.5%	2	
CROMOLYN SODIUM 4 % SOLUTION	4	
epinastine hcl ophth soln 0.05%	2	
LASTACAFT 0.25 % SOLUTION	4	
OPHTHALMIC ANTI-INFECTIVES		
AZASITE 1 % SOLUTION	4	
BACITRACIN 500 UNIT/GM OINTMENT	3	
erythromycin ophth oint 5 mg/gm	1	ACA Affordable Care Act Medications
gatifloxacin ophth soln 0.5%	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
gentamicin sulfate ophth soln 0.3%	1	
LEVOFLOXACIN 0.5 % SOLUTION	4	
moxifloxacin hcl ophth soln 0.5% (base equiv)	2	
NATACYN 5 % SUSPENSION	3	
ofloxacin ophth soln 0.3%	1	
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
SULFACETAMIDE SODIUM 10 % OINTMENT	4	
SULFACETAMIDE SODIUM 10 % SOLUTION	2	
sulfacetamide sodium ophth soln 10%	2	
tobramycin ophth soln 0.3%	1	
TRIFLURIDINE 1 % SOLUTION	3	
ZIRGAN 0.15 % GEL	4	
OPHTHALMIC ANTI-INFLAMMATORIES		
ALREX 0.2 % SUSPENSION	4	
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	2	
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	4	
diclofenac sodium ophth soln 0.1%	1	
difluprednate ophth emulsion 0.05%	2	
FLAREX 0.1 % SUSPENSION	4	
fluorometholone ophth susp 0.1%	2	
FLURBIPROFEN SODIUM 0.03 % SOLUTION	4	
ILEVRO 0.3 % SUSPENSION	4	
ketorolac tromethamine ophth soln 0.4%	2	
ketorolac tromethamine ophth soln 0.5%	1	
LOTEMAX 0.5 % OINTMENT	4	
LOTEMAX SM 0.38 % GEL	4	
loteprednol etabonate ophth susp 0.2%	4	
loteprednol etabonate ophth gel 0.5%	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
loteprednol etabonate ophth susp 0.5%	2	
MAXIDEX 0.1 % SUSPENSION	4	
prednisolone acetate ophth susp 1%	2	
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	4	
OPHTHALMIC BETA-ADRENERGIC BLOCKING AGENTS		
BETAXOLOL HCL 0.5 % SOLUTION	4	
CARTEOLOL HCL 1 % SOLUTION	4	
LEVOBUNOLOL HCL 0.5 % SOLUTION	4	
timolol maleate ophth soln 0.25%	1	
timolol maleate ophth soln 0.5%	1	
OPHTHALMIC INTRAOCULAR PRESSURE LOWERING AGENTS, OTHER		
acetazolamide cap er 12hr 500 mg	2	PV Preventive
APRACLONIDINE HCL 0.5 % SOLUTION	4	
brimonidine tartrate ophth soln 0.2%	1	
brinzolamide ophth susp 1%	2	
dorzolamide hcl ophth soln 2%	1	
methazolamide tab 25 mg	2	PV Preventive
methazolamide tab 50 mg	2	PV Preventive
pilocarpine hcl ophth soln 1%	2	
pilocarpine hcl ophth soln 2%	2	
pilocarpine hcl ophth soln 4%	2	
RHOPRESSA 0.02 % SOLUTION	4	ST STC Trial and failure of 1 therapy: latanoprost solution 0.005%
SIMBRINZA 1-0.2 % SUSPENSION	4	
OPHTHALMIC PROSTAGLANDIN AND PROSTAMIDE ANALOGS		
bimatoprost ophth soln 0.03%	2	
latanoprost ophth soln 0.005%	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
tafluprost preservative free (pf) ophth soln 0.0015%	2	
travoprost ophth soln 0.004% (benzalkonium free) (bak free)	2	
OTIC AGENTS		
acetic acid otic soln 2%	2	
ciprofloxacin hcl otic soln 0.2% (base equivalent)	2	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	2	
CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % SOLUTION	4	
CORTISPORIN-TC 3.3-3-10-0.5 MG/ML SUSPENSION	4	
fluocinolone acetonide (otic) oil 0.01%	2	
fluocinolone acetonide (otic) oil 0.01%	2	
hydrocortisone w/ acetic acid otic soln 1-2%	2	
neomycin-polymyxin-hc otic soln 1%	2	
neomycin-polymyxin-hc otic soln 1%	2	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	2	
ofloxacin otic soln 0.3%	2	
RESPIRATORY TRACT/PULMONARY AGENTS ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS		
ARNUITY ELLIPTA 100 MCG/ACT AER POW BA	3	PV Preventive
ARNUITY ELLIPTA 200 MCG/ACT AER POW BA	3	PV Preventive
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA	3	PV Preventive
ASMANEX (120 METERED DOSES) 220 MCG/ACT AER POW BA	3	PV Preventive
ASMANEX (14 METERED DOSES) 220 MCG/ACT AER POW BA	3	PV Preventive
ASMANEX (30 METERED DOSES) 110 MCG/ACT AER POW BA	3	PV Preventive
ASMANEX (30 METERED DOSES) 220 MCG/ACT AER POW BA	3	PV Preventive
ASMANEX (60 METERED DOSES) 220 MCG/ACT AER POW BA	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASMANEX HFA 100 MCG/ACT AEROSOL	3	PV Preventive
ASMANEX HFA 200 MCG/ACT AEROSOL	3	PV Preventive
ASMANEX HFA 50 MCG/ACT AEROSOL	3	PV Preventive
budesonide inhalation susp 0.25 mg/2ml	2	PV Preventive
budesonide inhalation susp 0.5 mg/2ml	2	PV Preventive
budesonide inhalation susp 1 mg/2ml	2	PV Preventive
FLUTICASONE FUROATE ELLIPTA 100 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE FUROATE ELLIPTA 200 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE FUROATE ELLIPTA 50 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE PROPIONATE DISKUS 100 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE PROPIONATE DISKUS 250 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE PROPIONATE DISKUS 50 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL	3	PV Preventive
FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL	3	PV Preventive
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	3	PV Preventive
QNASL 80 MCG/ACT AERO SOLN	4	ST STC Trial and failure of 3 qualifying therapies: fluticasone nasal spray, triamcinolone nasal spray and mometasone nasal spray
QNASL CHILDRENS 40 MCG/ACT AERO SOLN	4	ST STC Trial and failure of 3 qualifying therapies: fluticasone nasal spray, triamcinolone nasal spray and mometasone nasal spray

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QVAR REDIHALER 40 MCG/ACT AERO BA	3	PV Preventive
QVAR REDIHALER 80 MCG/ACT AERO BA	3	PV Preventive
ANTIHISTAMINES		
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1	
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1	
carbinoxamine maleate tab 4 mg	2	
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION	4	
CLEMASTINE FUMARATE 2.68 MG TAB	4	
CLEMASZ 2.68 MG TAB	4	
CLEMSZA 2.68 MG TAB	4	
cyproheptadine hcl syrup 2 mg/5ml	1	
cyproheptadine hcl tab 4 mg	1	
desloratadine tab 5 mg	1	
levocetirizine dihydrochloride tab 5 mg	1	
olopatadine hcl nasal soln 0.6%	2	
promethazine hcl oral soln 6.25 mg/5ml	1	
promethazine hcl oral soln 6.25 mg/5ml	1	
PROMETHAZINE HCL 6.25 MG/5ML SYRUP	1	
RYCLORA 2 MG/5ML SOLUTION	4	
ANTILEUKOTRIENES		
montelukast sodium tab 10 mg (base equiv)	1	PV Preventive
montelukast sodium chew tab 4 mg (base equiv)	1	PV Preventive
montelukast sodium chew tab 5 mg (base equiv)	1	PV Preventive
zafirlukast tab 10 mg	2	PV Preventive
zafirlukast tab 20 mg	2	PV Preventive
BRONCHODILATORS, ANTICHOLINERGIC		
ATROVENT HFA 17 MCG/ACT AERO SOLN	4	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCRUSE ELLIPTA 62.5 MCG/ACT AER POW BA	3	PV Preventive
ipratropium bromide inhal soln 0.02%	1	PV Preventive
ipratropium bromide nasal soln 0.03% (21 mcg/spray)	2	
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	2	
SPIRIVA HANDIHALER 18 MCG CAP	3	PV Preventive
SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN	3	PV Preventive
SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN	3	PV Preventive
tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	3	PV Preventive
YUPELRI 175 MCG/3ML SOLUTION	4	PA PV Preventive
BRONCHODILATORS, SYMPATHOMIMETIC		
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	1	PV Preventive
ALBUTEROL SULFATE (5 MG/ML) 0.5% NEBU SOLN	2	PV Preventive
albuterol sulfate soln nebu 0.5% (5 mg/ml)	2	PV Preventive
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	2	PV Preventive
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	2	PV Preventive
albuterol sulfate tab 2 mg	2	PV Preventive
albuterol sulfate syrup 2 mg/5ml	1	PV Preventive
albuterol sulfate soln nebu 0.5% (5 mg/ml)	2	PV Preventive
albuterol sulfate tab 4 mg	2	PV Preventive
albuterol sulfate syrup 2 mg/5ml	1	PV Preventive
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	1	PV Preventive
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	2	PV Preventive
EPINEPHRINE 0.15 MG/0.15ML SOLN A-INJ	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	2	
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	2	
EPINEPHRINE 0.3 MG/0.3ML SOLN PRSYR	3	
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)	2	PV Preventive
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)	2	PV Preventive
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	2	PV Preventive
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)	2	PV Preventive
NEFFY 1 MG/0.1ML SOLUTION	4	ST STC Trial and failure of generic epinephrine auto-injector
NEFFY 2 MG/0.1ML SOLUTION	4	ST STC Trial and failure of generic epinephrine auto-injector
SEREVENT DISKUS 50 MCG/ACT AER POW BA	3	PV Preventive
STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN	3	PV Preventive
SYMJEPI 0.15 MG/0.3ML SOLN PRSYR	3	
SYMJEPI 0.3 MG/0.3ML SOLN PRSYR	3	
terbutaline sulfate tab 2.5 mg	2	PV Preventive
terbutaline sulfate tab 5 mg	2	PV Preventive
VENTOLIN HFA 108 (90 BASE) MCG/ACT AERO SOLN	2	PV Preventive
CYSTIC FIBROSIS AGENTS		
ALYFTREK 10-50-125 MG TAB	5	PA S
ALYFTREK 4-20-50 MG TAB	5	PA S
BETHKIS 300 MG/4ML NEBU SOLN	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KALYDECO 13.4 MG PACKET	5	PA S
KALYDECO 150 MG TAB	5	PA S
KALYDECO 25 MG PACKET	5	PA S
KALYDECO 5.8 MG PACKET	5	PA S
KALYDECO 50 MG PACKET	5	PA S
KALYDECO 75 MG PACKET	5	PA S
KITABIS PAK 300 MG/5ML NEBU SOLN	5	PA S
ORKAMBI 100-125 MG PACKET	5	PA S
ORKAMBI 100-125 MG TAB	5	PA S
ORKAMBI 150-188 MG PACKET	5	PA S
ORKAMBI 200-125 MG TAB	5	PA S
ORKAMBI 75-94 MG PACKET	5	PA S
PULMOZYME 2.5 MG/2.5ML SOLUTION	5	PA S
SYMDEKO 100-150 & 150 MG TAB THPK	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMDEKO 50-75 & 75 MG TAB THPK	5	PA S
TOBI 300 MG/5ML NEBU SOLN	5	PA S
TOBI PODHALER 28 MG CAP	5	PA S
tobramycin nebu soln 300 mg/4ml	5	PA S
TOBRAMYCIN 300 MG/5ML NEBU SOLN	5	PA S
tobramycin nebu soln 300 mg/5ml	5	PA S
TRIKAFTA 100-50-75 & 150 MG TAB THPK	5	PA S
TRIKAFTA 100-50-75 & 75 MG THER PACK	5	PA S
TRIKAFTA 50-25-37.5 & 75 MG TAB THPK	5	PA S
TRIKAFTA 80-40-60 & 59.5 MG THER PACK	5	PA S
MAST CELL STABILIZERS		
cromolyn sodium soln nebu 20 mg/2ml	2	PV Preventive
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
theophylline elixir 80 mg/15ml	2	PV Preventive
OHTUVAYRE 3 MG/2.5ML SUSPENSION	5	PA S
roflumilast tab 250 mcg	2	PV Preventive
roflumilast tab 500 mcg	2	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THEO-24 100 MG CAP ER 24H	4	PV Preventive
THEO-24 200 MG CAP ER 24H	4	PV Preventive
THEO-24 300 MG CAP ER 24H	4	PV Preventive
THEO-24 400 MG CAP ER 24H	4	PV Preventive
theophylline elixir 80 mg/15ml	2	PV Preventive
theophylline soln 80 mg/15ml	2	PV Preventive
theophylline tab er 12hr 300 mg	2	PV Preventive
theophylline tab er 24hr 400 mg	2	PV Preventive
theophylline tab er 12hr 450 mg	2	PV Preventive
theophylline tab er 24hr 600 mg	2	PV Preventive
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS 0.5 MG TAB	5	PA S
ADEMPAS 1 MG TAB	5	PA S
ADEMPAS 1.5 MG TAB	5	PA S
ADEMPAS 2 MG TAB	5	PA S
ADEMPAS 2.5 MG TAB	5	PA S
tadalafil tab 20 mg (pah)	2	QL 60 / 30 day(s)
ambrisentan tab 10 mg	5	QL 30 / 30 days PA S
ambrisentan tab 5 mg	5	QL 30 / 30 days PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
bosentan tab 125 mg	5	QL 60 / 30 days PA S
bosentan tab for oral susp 32 mg	5	QL 120 / 30 day(s) PA S
bosentan tab 62.5 mg	5	QL 60 / 30 days PA S
epoprostenol sodium for inj 0.5 mg	5	PA S
epoprostenol sodium for inj 1.5 mg	5	PA S
OPSUMIT 10 MG TAB	5	PA S
OPSYNVI 10-20 MG TAB	5	QL 30 / 30 day(s) PA S
OPSYNVI 10-40 MG TAB	5	QL 30 / 30 day(s) PA S
ORENITRAM 0.125 MG TAB ER	5	PA S
ORENITRAM 0.25 MG TAB ER	5	PA S
ORENITRAM 1 MG TAB ER	5	PA S
ORENITRAM 2.5 MG TAB ER	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENITRAM 5 MG TAB ER	5	PA S
ORENITRAM MONTH 1 0.125 & 0.25 MG TBER THPK	5	PA S
ORENITRAM MONTH 2 0.125 & 0.25 MG TBER THPK	5	PA S
ORENITRAM MONTH 3 0.125 & 0.25 &1 MG TBER THPK	5	PA S
sildenafil citrate for suspension 10 mg/ml	5	QL 225 / 30 days PA S
sildenafil citrate tab 20 mg	5	QL 90 / 30 day(s) S
tadalafil tab 20 mg (pah)	2	QL 60 / 30 day(s)
TRACLEER 32 MG TAB SOL	5	PA S
treprostinil inj soln 100 mg/20ml (5 mg/ml)	5	PA S
treprostinil inj soln 20 mg/20ml (1 mg/ml)	5	PA S
treprostinil inj soln 200 mg/20ml (10 mg/ml)	5	PA S
treprostinil inj soln 50 mg/20ml (2.5 mg/ml)	5	PA S
TYVASO 0.6 MG/ML SOLUTION	5	PA S
TYVASO REFILL 0.6 MG/ML SOLUTION	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYVASO STARTER 0.6 MG/ML SOLUTION	5	PA S
UPTRAVI 1000 MCG TAB	5	PA S
UPTRAVI 1200 MCG TAB	5	PA S
UPTRAVI 1400 MCG TAB	5	PA S
UPTRAVI 1600 MCG TAB	5	PA S
UPTRAVI 200 & 800 MCG TAB THPK	5	PA S
UPTRAVI 200 MCG TAB	5	PA S
UPTRAVI 400 MCG TAB	5	PA S
UPTRAVI 600 MCG TAB	5	PA S
UPTRAVI 800 MCG TAB	5	PA S
VENTAVIS 10 MCG/ML SOLUTION	5	PA S
VENTAVIS 20 MCG/ML SOLUTION	5	PA S
PULMONARY FIBROSIS AGENTS		
ESBRIET 267 MG CAP	5	QL 90 / 30 days PA ST S STC Trial and failure of 1 therapy: generic Esbriet

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESBRIET 267 MG TAB	5	QL 90 / 30 days PA ST S STC Trial and failure of 1 therapy: generic Esbriet
ESBRIET 801 MG TAB	5	QL 90 / 30 days PA ST S STC Trial and failure of 1 therapy: generic Esbriet
OFEV 100 MG CAP	5	PA S
OFEV 150 MG CAP	5	PA S
pirfenidone cap 267 mg	5	QL 90 / 30 days PA S
pirfenidone tab 267 mg	5	QL 90 / 30 days PA S
PIRFENIDONE 534 MG TAB	5	QL 90 / 30 days PA S
pirfenidone tab 801 mg	5	QL 90 / 30 days PA S
RESPIRATORY TRACT AGENTS, OTHER		
acetylcysteine inhal soln 10%	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
acetylcysteine inhal soln 20%	2	
ADVAIR HFA 115-21 MCG/ACT AEROSOL	3	PV Preventive
ADVAIR HFA 230-21 MCG/ACT AEROSOL	3	PV Preventive
ADVAIR HFA 45-21 MCG/ACT AEROSOL	3	PV Preventive
ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA	3	PV Preventive
BREO ELLIPTA 100-25 MCG/ACT AER POW BA	3	PV Preventive
BREO ELLIPTA 200-25 MCG/ACT AER POW BA	3	PV Preventive
BREO ELLIPTA 50-25 MCG/INH AER POW BA	3	PV Preventive
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	3	PV Preventive
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	3	PV Preventive
BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL	3	PV Preventive
budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	3	PV Preventive
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	3	PV Preventive
COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN	3	PV Preventive
CUROSURF 120 MG/1.5ML SUSPENSION	4	
CUROSURF 240 MG/3ML SUSPENSION	4	
DULERA 100-5 MCG/ACT AEROSOL	4	PV Preventive
DULERA 200-5 MCG/ACT AEROSOL	4	PV Preventive
DULERA 50-5 MCG/ACT AEROSOL	4	PV Preventive
FASENRA PEN 30 MG/ML SOLN A-INJ	5	PA S
flunisolide nasal soln 25 mcg/act (0.025%)	3	
FLUTICASONE FUROATE-VILANTEROL 100-25 MCG/ACT AER POW BA	3	PV Preventive
FLUTICASONE FUROATE-VILANTEROL 200-25 MCG/ACT AER POW BA	3	PV Preventive

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
fluticasone propionate nasal susp 50 mcg/act	1	
fluticasone-salmeterol aer powder ba 100-50 mcg/act	2	PV Preventive
FLUTICASONE-SALMETEROL 113-14 MCG/ACT AER POW BA	2	PV Preventive
FLUTICASONE-SALMETEROL 115-21 MCG/ACT AEROSOL	3	PV Preventive
FLUTICASONE-SALMETEROL 230-21 MCG/ACT AEROSOL	3	PV Preventive
FLUTICASONE-SALMETEROL 232-14 MCG/ACT AER POW BA	2	PV Preventive
fluticasone-salmeterol aer powder ba 250-50 mcg/act	2	PV Preventive
FLUTICASONE-SALMETEROL 45-21 MCG/ACT AEROSOL	3	PV Preventive
fluticasone-salmeterol aer powder ba 500-50 mcg/act	2	PV Preventive
FLUTICASONE-SALMETEROL 55-14 MCG/ACT AER POW BA	2	PV Preventive
guaifenesin-codeine soln 100-10 mg/5ml	2	QL 1800 / 30 days
guaifenesin-codeine soln 100-10 mg/5ml	2	QL 1800 / 30 days
guaifenesin-codeine soln 100-10 mg/5ml	2	QL 1800 / 30 days
guaifenesin-codeine soln 100-10 mg/5ml	2	QL 1800 / 30 days
HYDROCOD POLI-CHLORPHE POLI ER 10-8 MG/5ML SUSP	2	QL 300 / 30 days
hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	2	QL 300 / 30 days
INFASURF 35-0.9 MG/ML-% SUSPENSION	4	
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	2	PV Preventive
guaifenesin-codeine soln 100-10 mg/5ml	2	QL 1800 / 30 days
mometasone furoate nasal susp 50 mcg/act	2	
sodium chloride soln nebu 3%	1	
NUCALA 100 MG/ML SOLN A-INJ	5	PA S
NUCALA 100 MG/ML SOLN PRSYR	5	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUCALA 40 MG/0.4ML SOLN PRSYR	5	PA S
sodium chloride soln nebu 7%	1	
sodium chloride soln nebu 0.9%	2	
sodium chloride soln nebu 10%	2	
sodium chloride soln nebu 3%	1	
sodium chloride soln nebu 7%	1	
STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN	3	PV Preventive
SURVANTA 25-0.9 MG/ML-% SUSPENSION	4	
SYMBICORT 160-4.5 MCG/ACT AEROSOL	3	PV Preventive
SYMBICORT 80-4.5 MCG/ACT AEROSOL	3	PV Preventive
TEZSPIRE 210 MG/1.91ML SOLN A-INJ	5	PA S
TRELEGY ELLIPTA 100-62.5-25 MCG/ACT AER POW BA	3	PV Preventive
TRELEGY ELLIPTA 200-62.5-25 MCG/ACT AER POW BA	3	PV Preventive
UMECLIDINIUM-VILANTEROL 62.5-25 MCG/ACT AER POW BA	3	PV Preventive
fluticasone-salmeterol aer powder ba 100-50 mcg/act	2	PV Preventive
fluticasone-salmeterol aer powder ba 250-50 mcg/act	2	PV Preventive
fluticasone-salmeterol aer powder ba 500-50 mcg/act	2	PV Preventive
SKELETAL MUSCLE RELAXANTS		
carisoprodol tab 250 mg	2	QL 120 / 30 days
carisoprodol tab 350 mg	1	QL 120 / 30 days
chlorzoxazone tab 500 mg	2	
cyclobenzaprine hcl tab 10 mg	1	
cyclobenzaprine hcl tab 5 mg	1	
metaxalone tab 400 mg	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
metaxalone tab 800 mg	2	
methocarbamol tab 500 mg	1	
methocarbamol tab 750 mg	1	
orphenadrine citrate tab er 12hr 100 mg	2	
ORPHENADRINE-ASPIRIN-CAFFEINE 25-385-30 MG TAB	2	
SLEEP DISORDER AGENTS SLEEP PROMOTING AGENTS		
BELSOMRA 10 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
BELSOMRA 15 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
BELSOMRA 20 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
BELSOMRA 5 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
DAYVIGO 10 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
DAYVIGO 5 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
estazolam tab 1 mg	2	QL 30 / 30 days
estazolam tab 2 mg	2	QL 30 / 30 days
eszopiclone tab 1 mg	1	QL 30 / 30 days
eszopiclone tab 2 mg	1	QL 30 / 30 days
eszopiclone tab 3 mg	1	QL 30 / 30 days
FLURAZEPAM HCL 15 MG CAP	4	QL 30 / 30 days
FLURAZEPAM HCL 30 MG CAP	4	QL 30 / 30 days
HETLIOZ 20 MG CAP	5	PA S
QUVIVIQ 25 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
QUVIVIQ 50 MG TAB	3	ST STC Trial And Failure Of 2 Therapies: Any Two Different Generic Agents For Insomnia
ramelteon tab 8 mg	2	QL 30 / 30 days
tasimelteon capsule 20 mg	5	PA S
temazepam cap 15 mg	1	QL 30 / 30 days
temazepam cap 30 mg	1	QL 30 / 30 days
triazolam tab 0.125 mg	2	QL 60 / 30 days
triazolam tab 0.25 mg	2	QL 60 / 30 days
zaleplon cap 10 mg	1	QL 30 / 30 days
zaleplon cap 5 mg	1	QL 30 / 30 days
zolpidem tartrate tab 10 mg	1	QL 30 / 30 days

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
zolpidem tartrate tab 5 mg	1	QL 30 / 30 days
zolpidem tartrate tab er 12.5 mg	2	QL 30 / 30 days
zolpidem tartrate tab er 6.25 mg	2	QL 30 / 30 days
WAKEFULNESS PROMOTING AGENTS		
armodafinil tab 150 mg	2	QL 30 / 30 days
armodafinil tab 200 mg	2	QL 30 / 30 days
armodafinil tab 250 mg	2	QL 30 / 30 days
armodafinil tab 50 mg	1	QL 30 / 30 days
LUMRYZ 4.5 GM PACKET	5	PA S
LUMRYZ 6 GM PACKET	5	PA S
LUMRYZ 7.5 GM PACKET	5	PA S
LUMRYZ 9 GM PACKET	5	PA S
LUMRYZ STARTER PACK 4.5 & 6 & 7.5 GM THER PACK	5	PA S
modafinil tab 100 mg	2	QL 30 / 30 days
modafinil tab 200 mg	2	QL 30 / 30 days
SODIUM OXYBATE 500 MG/ML SOLUTION	5	PA S
SUNOSI 150 MG TAB	5	QL 30 / 30 days PA S
SUNOSI 75 MG TAB	5	QL 30 / 30 days PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WAKIX 17.8 MG TAB	5	PA S
WAKIX 4.45 MG TAB	5	PA S
XYREM 500 MG/ML SOLUTION	5	PA S
XYWAV 500 MG/ML SOLUTION	5	PA S
WEIGHT LOSS AGENTS		
WEGOVY 0.25 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
WEGOVY 0.5 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
WEGOVY 1 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
WEGOVY 1.7 MG/0.75ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
WEGOVY 2.4 MG/0.75ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 10 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 10 MG/0.5ML SOLUTION	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 12.5 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 12.5 MG/0.5ML SOLUTION	4	PA
ZEPBOUND 15 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 15 MG/0.5ML SOLUTION	4	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPBOUND 2.5 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 2.5 MG/0.5ML SOLUTION	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 5 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 5 MG/0.5ML SOLUTION	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 7.5 MG/0.5ML SOLN A-INJ	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.
ZEPBOUND 7.5 MG/0.5ML SOLUTION	4	PA WL Weight loss medications are not covered on your plan. This medication may be covered for other FDA approved indications.

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