



DisclosedRx Premier Formulary

Health Cooperative Strategies

This document contains information about the medications covered on the DisclosedRx Premier Formulary. This document represents an abridged list of the most commonly prescribed medications on the full formulary. Please visit www.disclosedrx.com or contact DisclosedRx at 480-561-6005 for additional information about your pharmacy benefit.

How to Use This Document

What Is the DisclosedRx Premier Formulary?

The DisclosedRx Premier Formulary is a searchable list of drugs that are covered by your pharmacy benefits. It helps you understand the medications that are included in your plan and their copay tier. This list is reviewed regularly by our Pharmacy & Therapeutics (P&T) Committee to make sure it includes safe, effective, and affordable treatment options.

Please visit www.disclosedrx.com or contact DisclosedRx at 480-561-6005 for additional information about your pharmacy benefit.

How Is the Formulary Organized?

Medications are grouped by **Therapeutic Class**, which means they are sorted based on what they treat (like heart conditions, infections, or allergies).

- **Generic drugs** are written in *lowercase italics*. These are just as effective as brand-name drugs and are usually less expensive.
- **Brand-name drugs** are written in **ALL CAPS**. These are the original versions of medications and often cost more than generic alternatives.

What Are Drug Tiers?

Each medication is placed into a **tier**, which affects how much you pay out of pocket. Here is what each tier means:







- **Tier 1 – Preferred Generics:** These are low-cost, commonly used generic drugs. They are usually the most affordable option.
- **Tier 2 – Non-Preferred Generics / Preferred Brands:** These are generally moderately priced medications. You will see some brand-name and higher-cost generic drugs on this tier.
- **Tier 3 – Non-Preferred Brands:** These are higher-cost drugs, often brand-name medications that are not preferred. Lower-cost alternatives to the drugs in Tier 3 can usually be found in Tiers 1 or 2.
- **Tier 4 – Plan Exclusions:** These medications are not covered by your pharmacy benefit. This means that if a drug is listed as excluded, the plan will not pay for it, even if your doctor prescribes it. You would have to pay the full cost of the drug out of pocket unless an exception is approved.

What if My Medication Is Not Listed on This Document?

This is not an all-inclusive list of prescriptions, over the counter (OTC) medications, or prescription medical supplies that are on the formulary. **Additionally, inclusion on this list does not guarantee coverage since your specific plan parameters supersede the formulary (i.e., some plans may not cover fertility or weight loss medications. Those medications may appear on this list).** Please refer to your benefit materials on your specific plan parameters.

Please contact DisclosedRx at 480-561-6005 for additional information about your pharmacy benefit.

LEGEND

TYPE	DESCRIPTION
 Quantity Limit	There is a limit on the amount of this drug that is covered per prescription, or within a specific time frame.
 PA Required	You (or your physician) are required to get prior authorization before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
 Specialty	Specialty drugs are high-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C, and hemophilia.
 PA required > 90 MME	
 Plan Exclusion	
 PA required > 26 years	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
ADHD AGENT - SELECTIVE ALPHA ADRENERGIC AGONISTS		
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
<i>clonidine hcl tab er 12hr 0.1 mg</i>	1	
KAPVAY 0.1 MG TAB ER 12H	2	PA
ONYDA XR 0.1 MG/ML SUSP	3	PA
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 1 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 2 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 3 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
<i>guanfacine hcl tab er 24hr 4 mg (base equiv)</i>	1	
ADHD AGENT - SELECTIVE NOREPINEPHRINE REUPTAKE INHIBITOR		
<i>atomoxetine hcl cap 100 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 10 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 18 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 25 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 40 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 60 mg (base equiv)</i>	1	
<i>atomoxetine hcl cap 80 mg (base equiv)</i>	1	
QELBREE 100 MG CAP ER 24H	3	PA
QELBREE 150 MG CAP ER 24H	3	PA
QELBREE 200 MG CAP ER 24H	3	PA
AMPHETAMINE MIXTURES		
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg</i>	2	PA
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 25 mg</i>	2	PA
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5 mg</i>	2	PA
<i>amphetamine-dextroamphetamine 3-bead cap er 24hr 50 mg</i>	2	PA
MYDAYIS 12.5 MG CAP ER 24H	3	PA
MYDAYIS 25 MG CAP ER 24H	3	PA
MYDAYIS 37.5 MG CAP ER 24H	3	PA
MYDAYIS 50 MG CAP ER 24H	3	PA
AMPHETAMINES		
DYANAVEL XR 10 MG TAB ER	3	PA
DYANAVEL XR 15 MG TAB ER	3	PA
DYANAVEL XR 20 MG TAB ER	3	PA
DYANAVEL XR 2.5 MG/ML SUSP	3	PA
DYANAVEL XR 5 MG TAB ER	3	PA
<i>amphetamine sulfate tab 10 mg</i>	1	
<i>amphetamine sulfate tab 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamphetamine sulfate tab 10 mg</i>	1	
<i>dextroamphetamine sulfate tab 15 mg</i>	1	
<i>dextroamphetamine sulfate tab 20 mg</i>	1	
<i>dextroamphetamine sulfate tab 2.5 mg</i>	1	
<i>dextroamphetamine sulfate tab 30 mg</i>	1	
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	1	
<i>dextroamphetamine sulfate tab 5 mg</i>	1	
<i>dextroamphetamine sulfate tab 7.5 mg</i>	1	
<i>dextroamphetamine sulfate cap er 24hr 10 mg</i>	1	
<i>dextroamphetamine sulfate cap er 24hr 15 mg</i>	1	
<i>dextroamphetamine sulfate cap er 24hr 5 mg</i>	1	
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	1	
<i>lisdexamfetamine dimesylate cap 10 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 10 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 20 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 20 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 30 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 30 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 40 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 40 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 50 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 50 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 60 mg</i>	1	
<i>lisdexamfetamine dimesylate chew tab 60 mg</i>	1	
<i>lisdexamfetamine dimesylate cap 70 mg</i>	1	
VYVANSE 10 MG CAP	3	PA
VYVANSE 10 MG CHEW TAB	3	PA
VYVANSE 20 MG CAP	3	PA
VYVANSE 20 MG CHEW TAB	3	PA
VYVANSE 30 MG CAP	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYVANSE 30 MG CHEW TAB	3	PA
VYVANSE 40 MG CAP	3	PA
VYVANSE 40 MG CHEW TAB	3	PA
VYVANSE 50 MG CAP	3	PA
VYVANSE 50 MG CHEW TAB	3	PA
VYVANSE 60 MG CAP	3	PA
VYVANSE 60 MG CHEW TAB	3	PA
VYVANSE 70 MG CAP	3	PA
<i>methamphetamine hcl tab 5 mg</i>	2	PA
ANALEPTICS		
CAFCIT 60 MG/3ML SOLUTION	4	EX Plan Exclusion
CAFFEINE CITRATE 60 MG/3ML SOLUTION	4	EX Plan Exclusion
<i>caffeine citrate inj 60 mg/3ml (10 mg/ml base equiv)</i>	4	EX Plan Exclusion
CAFFEINE-SODIUM BENZOATE 125-125 MG/ML SOLUTION	4	EX Plan Exclusion
DOPRAM 20 MG/ML SOLUTION	4	EX Plan Exclusion
ANOREXIANT COMBINATIONS		
PLENITY CAP	4	PA EX Plan Exclusion
PLENITY WELCOME KIT CAP	4	PA EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 11.25-69 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 15-92 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 3.75-23 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 7.5-46 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 11.25-69 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 15-92 mg</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>phentermine hcl-topiramate cap er 24hr 3.75-23 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl-topiramate cap er 24hr 7.5-46 mg</i>	4	EX Plan Exclusion
QSYMIA 11.25-69 MG CAP ER 24H	4	EX Plan Exclusion
QSYMIA 15-92 MG CAP ER 24H	4	EX Plan Exclusion
QSYMIA 3.75-23 MG CAP ER 24H	4	EX Plan Exclusion
QSYMIA 7.5-46 MG CAP ER 24H	4	EX Plan Exclusion
ANOREXIANTS NON-AMPHETAMINE		
<i>benzphetamine hcl tab 50 mg</i>	4	EX Plan Exclusion
<i>diethylpropion hcl tab 25 mg</i>	4	EX Plan Exclusion
DIETHYLPROPION HCL ER 75 MG TAB ER 24H	4	EX Plan Exclusion
DIETHYLPROPION HCL ER 75 MG TAB ER 24H	1	
<i>phendimetrazine tartrate tab 35 mg</i>	4	EX Plan Exclusion
PHENDIMETRAZINE TARTRATE ER 105 MG CAP ER 24H	4	EX Plan Exclusion
ADIPEX-P 37.5 MG CAP	4	PA EX Plan Exclusion
ADIPEX-P 37.5 MG TAB	4	PA EX Plan Exclusion
<i>phentermine hcl tab 8 mg</i>	4	PA EX Plan Exclusion
<i>phentermine hcl cap 15 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl cap 30 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl cap 37.5 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl tab 37.5 mg</i>	4	EX Plan Exclusion
<i>phentermine hcl tab 8 mg</i>	1	
ANTI-OBESITY - GIP & GLP-1 RECEPTOR AGONISTS		
ZEPBOUND 10 MG/0.5ML SOLN A-INJ	4	QL PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPBOUND 10 MG/0.5ML SOLUTION	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 12.5 MG/0.5ML SOLN A-INJ	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 12.5 MG/0.5ML SOLUTION	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 15 MG/0.5ML SOLN A-INJ	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 15 MG/0.5ML SOLUTION	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 2.5 MG/0.5ML SOLN A-INJ	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 2.5 MG/0.5ML SOLUTION	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 5 MG/0.5ML SOLN A-INJ	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 5 MG/0.5ML SOLUTION	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>
ZEPBOUND 7.5 MG/0.5ML SOLN A-INJ	4	<p>QL</p> <p>PA</p> <p>EX Plan Exclusion</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPBOUND 7.5 MG/0.5ML SOLUTION	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
ANTI-OBESITY - GLP-1 RECEPTOR AGONISTS		
<i>liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)</i>	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 0.25 MG/0.5ML SOLN A-INJ	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 0.5 MG/0.5ML SOLN A-INJ	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 1.5 MG TAB	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 1.7 MG/0.75ML SOLN A-INJ	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 1 MG/0.5ML SOLN A-INJ	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 2.4 MG/0.75ML SOLN A-INJ	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #4a4a9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 25 MG TAB	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 4 MG TAB	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion
WEGOVY 9 MG TAB	4	<div style="display: flex; flex-direction: column; align-items: center;"> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #c00000; color: white; padding: 2px 5px; border-radius: 3px;">EX</div> </div> Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-OBESITY AGENT COMBINATIONS		
CONTRACE 8-90 MG TAB ER 12H	4	PA EX Plan Exclusion
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI 150 MG TAB	2	PA
SUNOSI 75 MG TAB	2	PA
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX 17.8 MG TAB	3	PA S
WAKIX 4.45 MG TAB	3	PA S
STIMULANT COMBINATIONS		
AZSTARYS 26.1-5.2 MG CAP	3	PA
AZSTARYS 39.2-7.8 MG CAP	3	PA
AZSTARYS 52.3-10.4 MG CAP	3	PA
STIMULANTS - MISC.		
<i>armodafinil tab 150 mg</i>	1	
<i>armodafinil tab 200 mg</i>	1	
<i>armodafinil tab 250 mg</i>	1	
<i>armodafinil tab 50 mg</i>	1	
<i>dexmethylphenidate hcl tab 10 mg</i>	1	
<i>dexmethylphenidate hcl tab 2.5 mg</i>	1	
<i>dexmethylphenidate hcl tab 5 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 10 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 15 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 20 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 25 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 30 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 35 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexmethylphenidate hcl cap er 24 hr 40 mg</i>	1	
<i>dexmethylphenidate hcl cap er 24 hr 5 mg</i>	1	
FOCALIN 10 MG TAB	3	PA
FOCALIN 2.5 MG TAB	3	PA
FOCALIN 5 MG TAB	3	PA
FOCALIN XR 10 MG CAP ER 24H	3	PA
FOCALIN XR 15 MG CAP ER 24H	3	PA
FOCALIN XR 20 MG CAP ER 24H	3	PA
FOCALIN XR 25 MG CAP ER 24H	3	PA
FOCALIN XR 30 MG CAP ER 24H	3	PA
FOCALIN XR 35 MG CAP ER 24H	3	PA
FOCALIN XR 40 MG CAP ER 24H	3	PA
FOCALIN XR 5 MG CAP ER 24H	3	PA
DAYTRANA 10 MG/9HR PATCH	2	PA
DAYTRANA 15 MG/9HR PATCH	2	PA
DAYTRANA 20 MG/9HR PATCH	2	PA
DAYTRANA 30 MG/9HR PATCH	2	PA
<i>methylphenidate td patch 10 mg/9hr</i>	2	PA
<i>methylphenidate td patch 15 mg/9hr</i>	2	PA
<i>methylphenidate td patch 20 mg/9hr</i>	2	PA
<i>methylphenidate td patch 30 mg/9hr</i>	2	PA
ADHANSIA XR 25 MG CAP ER 24H	3	PA
ADHANSIA XR 35 MG CAP ER 24H	3	PA
ADHANSIA XR 45 MG CAP ER 24H	3	PA
ADHANSIA XR 55 MG CAP ER 24H	3	PA
ADHANSIA XR 70 MG CAP ER 24H	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADHANSIA XR 85 MG CAP ER 24H	3	PA
APTENSIO XR 10 MG CAP ER 24H	3	PA
APTENSIO XR 15 MG CAP ER 24H	3	PA
APTENSIO XR 20 MG CAP ER 24H	3	PA
APTENSIO XR 30 MG CAP ER 24H	3	PA
APTENSIO XR 40 MG CAP ER 24H	3	PA
APTENSIO XR 50 MG CAP ER 24H	3	PA
APTENSIO XR 60 MG CAP ER 24H	3	PA
JORNAY PM 100 MG CAP ER 24H	3	PA
JORNAY PM 20 MG CAP ER 24H	3	PA
JORNAY PM 40 MG CAP ER 24H	3	PA
JORNAY PM 60 MG CAP ER 24H	3	PA
JORNAY PM 80 MG CAP ER 24H	3	PA
METHYLIN 10 MG/5ML SOLUTION	2	PA
METHYLIN 5 MG/5ML SOLUTION	2	PA
<i>methylphenidate hcl soln 10 mg/5ml</i>	1	
<i>methylphenidate hcl chew tab 10 mg</i>	1	
<i>methylphenidate hcl tab 10 mg</i>	1	
<i>methylphenidate hcl tab 20 mg</i>	1	
<i>methylphenidate hcl chew tab 2.5 mg</i>	1	
<i>methylphenidate hcl soln 5 mg/5ml</i>	1	
<i>methylphenidate hcl chew tab 5 mg</i>	1	
<i>methylphenidate hcl tab 5 mg</i>	1	
<i>methylphenidate hcl tab er 10 mg</i>	1	
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	
METHYLPHENIDATE HCL ER 18 MG TAB ER 24H	1	
<i>methylphenidate hcl tab er 20 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	
METHYLPHENIDATE HCL ER 27 MG TAB ER 24H	1	
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	
METHYLPHENIDATE HCL ER 36 MG TAB ER 24H	1	
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	
METHYLPHENIDATE HCL ER 54 MG TAB ER 24H	1	
<i>methylphenidate hcl cap er 10 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 20 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 30 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 40 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 50 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 60 mg (cd)</i>	1	
<i>methylphenidate hcl cap er 24hr 10 mg (la)</i>	1	
<i>methylphenidate hcl cap er 24hr 20 mg (la)</i>	1	
<i>methylphenidate hcl cap er 24hr 30 mg (la)</i>	1	
<i>methylphenidate hcl cap er 24hr 40 mg (la)</i>	1	
<i>methylphenidate hcl cap er 24hr 60 mg (la)</i>	1	
<i>methylphenidate hcl tab er osmotic release (osm) 18 mg</i>	1	
<i>methylphenidate hcl tab er osmotic release (osm) 27 mg</i>	1	
<i>methylphenidate hcl tab er osmotic release (osm) 36 mg</i>	1	
METHYLPHENIDATE HCL ER (OSM) 45 MG TAB ER	1	
<i>methylphenidate hcl tab er osmotic release (osm) 54 mg</i>	1	
METHYLPHENIDATE HCL ER (OSM) 63 MG TAB ER	1	
<i>methylphenidate hcl tab er osmotic release (osm) 72 mg</i>	1	
<i>methylphenidate hcl cap er 24hr 10 mg (xr)</i>	1	
<i>methylphenidate hcl cap er 24hr 15 mg (xr)</i>	1	
<i>methylphenidate hcl cap er 24hr 20 mg (xr)</i>	1	
<i>methylphenidate hcl cap er 24hr 30 mg (xr)</i>	1	
<i>methylphenidate hcl cap er 24hr 40 mg (xr)</i>	1	
<i>methylphenidate hcl cap er 24hr 50 mg (xr)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylphenidate hcl cap er 24hr 60 mg (xr)</i>	1	
QUILLICHEW ER 20 MG CHER	3	PA
QUILLICHEW ER 30 MG CHER	3	PA
QUILLICHEW ER 40 MG CHER	3	PA
<i>modafinil tab 100 mg</i>	1	
<i>modafinil tab 200 mg</i>	1	
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
ACACIA 1:20 SOLUTION	4	PA EX Plan Exclusion
ACACIA POLLEN 1:40 SOLUTION	4	PA EX Plan Exclusion
ALDER 1:20 SOLUTION	4	PA EX Plan Exclusion
ALTERNARIA ALTERNATA 1:20 SOLUTION	4	PA EX Plan Exclusion
ALTERNARIA ALTERNATA 24000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
AMERICAN BEECH 1:20 SOLUTION	4	PA EX Plan Exclusion
AMERICAN BEECH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
AMERICAN COCKROACH 1:20 SOLUTION	4	PA EX Plan Exclusion
AMERICAN ELM 1:20 SOLUTION	4	PA EX Plan Exclusion
AMERICAN SYCAMORE 1:20 SOLUTION	4	PA EX Plan Exclusion
ARIZONA CYPRESS 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASPEN POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
ASPERGILLUS FUMIGATUS 1:10 SOLUTION	4	PA EX Plan Exclusion
ASPERGILLUS FUMIGATUS 1:20 SOLUTION	4	PA EX Plan Exclusion
AUREOBASIDIUM PULLULANS 1:20 SOLUTION	4	PA EX Plan Exclusion
AUREOBASIDIUM PULLULANS 36000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
AUSTRALIAN PINE 1:20 SOLUTION	4	PA EX Plan Exclusion
BAHIA 1:20 SOLUTION	4	PA EX Plan Exclusion
BALD CYPRESS 1:20 SOLUTION	4	PA EX Plan Exclusion
BAYBERRY (WAX MYRTLE) 1:20 SOLUTION	4	PA EX Plan Exclusion
BERMUDA GRASS 10000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
BIPOLARIS SOROKINIANA 1:20 SOLUTION	4	PA EX Plan Exclusion
BLACK/SWEET BIRCH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
BLACK WALNUT POLLEN (1:10) 75000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
BLACK WALNUT POLLEN (1:20) 75000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
BLACK WALNUT POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BLACK WALNUT POLLEN 20000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
BLACK WALNUT POLLEN 40000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
BLACK WILLOW 1:20 SOLUTION	4	PA EX Plan Exclusion
BOTRYTIS CINEREA 1:20 SOLUTION	4	PA EX Plan Exclusion
BOTRYTIS CINEREA 43000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
BOX ELDER 1:20 SOLUTION	4	PA EX Plan Exclusion
BOX ELDER POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
BROME 1:20 SOLUTION	4	PA EX Plan Exclusion
CALIFORNIA PEPPER TREE 1:20 SOLUTION	4	PA EX Plan Exclusion
CANDIDA ALBICANS EXTRACT 100 MG/ML SOLUTION	4	PA EX Plan Exclusion
CANDIDA ALBICANS EXTRACT 1:1000 SOLUTION	4	PA EX Plan Exclusion
CARELESSWEED 1:40 SOLUTION	4	PA EX Plan Exclusion
CAT HAIR EXTRACT 10000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
CAT HAIR EXTRACT 5000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
CATTLE EPITHELIUM 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEDAR ELM 1:20 SOLUTION	4	PA EX Plan Exclusion
CLADOSPORIUM CLADOSPORIODES 1:20 SOLUTION	4	PA EX Plan Exclusion
CLADOSPORIUM CLADOSPORIODES 64000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
CLADOSPORIUM SPHAEROSPERMUM 1:20 SOLUTION	4	PA EX Plan Exclusion
COCKLEBUR 1:20 SOLUTION	4	PA EX Plan Exclusion
CORN POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
CORN SMUT 1:20 SOLUTION	4	PA EX Plan Exclusion
DANDELION 1:20 SOLUTION	4	PA EX Plan Exclusion
DOG EPITHELIUM 1:10 SOLUTION	4	PA EX Plan Exclusion
DOG EPITHELIUM 1:20 SOLUTION	4	PA EX Plan Exclusion
DOG FENNEL 1:20 SOLUTION	4	PA EX Plan Exclusion
EASTERN COTTONWOOD 1:20 SOLUTION	4	PA EX Plan Exclusion
ENGLISH PLANTAIN 1:20 SOLUTION	4	PA EX Plan Exclusion
EPICOCCUM NIGRUM 1:10 SOLUTION	4	PA EX Plan Exclusion
EPICOCCUM NIGRUM 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIRE ANT 1:10 SOLUTION	4	PA EX Plan Exclusion
FIRE ANT 1:20 SOLUTION	4	PA EX Plan Exclusion
GERMAN COCKROACH 1:20 SOLUTION	4	PA EX Plan Exclusion
GOLDENROD 1:20 SOLUTION	4	PA EX Plan Exclusion
GRASS POLLEN(K-O-R-T-SWT VERN) 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
GRASS POLLEN MIXTURE OF 6 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
GREEN ASH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
GUINEA PIG EPITHELIUM EXTRACT 1:20 SOLUTION	4	PA EX Plan Exclusion
HACKBERRY 1:20 SOLUTION	4	PA EX Plan Exclusion
HONEY BEE VENOM PROTEIN 1300 MCG RECON SOLN	4	PA EX Plan Exclusion
HONEY BEE VENOM PROTEIN 550 MCG RECON SOLN	4	PA EX Plan Exclusion
VENOMIL HONEY BEE VENOM 120 MCG KIT	4	PA EX Plan Exclusion
VENOMIL HONEY BEE VENOM 12 MCG KIT	4	PA EX Plan Exclusion
HORSE EPITHELIUM 1:10 SOLUTION	4	PA EX Plan Exclusion
HORSE EPITHELIUM 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JOHNSON GRASS 1:20 SOLUTION	4	PA EX Plan Exclusion
JUNE GRASS POLLEN STANDARDIZED 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
KOCHIA 1:20 SOLUTION	4	PA EX Plan Exclusion
LAMBS QUARTERS 1:20 SOLUTION	4	PA EX Plan Exclusion
LENSCALE 1:20 SOLUTION	4	PA EX Plan Exclusion
MEADOW FESCUE GRASS POLLEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
MELALEUCA 1:20 SOLUTION	4	PA EX Plan Exclusion
MESQUITE 1:20 SOLUTION	4	PA EX Plan Exclusion
MITE (D. FARINAE) 10000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MITE (D. FARINAE) 30000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MITE (D. FARINAE) 5000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MITE (D. PTERONYSSINUS) 10000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MITE (D. PTERONYSSINUS) 30000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MITE (D. PTERONYSSINUS) 5000 AU/ML SOLUTION	4	PA EX Plan Exclusion
MIXED RAGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIXED VESPID VENOM PROTEIN 1300-1300-1300 MCG RECON SOLN	4	PA EX Plan Exclusion
MIXED VESPID VENOM PROTEIN 550-550-550 MCG RECON SOLN	4	PA EX Plan Exclusion
VENOMIL MIXED VESPID VENOM 550-550-550 MCG RECON SOLN	4	PA EX Plan Exclusion
MOUNTAIN CEDAR 1:20 SOLUTION	4	PA EX Plan Exclusion
MOUNTAIN CEDAR POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
MOUSE EPITHELIUM 1:20 SOLUTION	4	PA EX Plan Exclusion
MUCOR 1:20 SOLUTION	4	PA EX Plan Exclusion
MUCOR 57000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
MUGWORT 1:20 SOLUTION	4	PA EX Plan Exclusion
NETTLE 1:40 SOLUTION	4	PA EX Plan Exclusion
OLIVE TREE 1:20 SOLUTION	4	PA EX Plan Exclusion
ORCHARD GRASS POLLEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
OREGON ASH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
PALFORZIA (120 MG DAILY DOSE) 20 MG & 100 MG CSPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA (12 MG DAILY DOSE) 2 X 1 MG & 10 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (160 MG DAILY DOSE) 3 X 20 MG & 100 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (1 MG DAILY DOSE) 1 X 1 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (200 MG DAILY DOSE) 2 X 100 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (20 MG DAILY DOSE) 20 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (240 MG DAILY DOSE) 2 X 20 MG & 2 X 100 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (300 MG MAINTENANCE) 300 MG PACKET	4	PA S EX Plan Exclusion
PALFORZIA (300 MG TITRATION) 300 MG PACKET	4	PA S EX Plan Exclusion
PALFORZIA (3 MG DAILY DOSE) 3 X 1 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (40 MG DAILY DOSE) 2 X 20 MG CSPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALFORZIA (6 MG DAILY DOSE) 6 X 1 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA (80 MG DAILY DOSE) 4 X 20 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA INITIAL DOSE 1-3YRS 0.5 & 1 & 1.5 & 3 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA INITIAL DOSE 4-17YRS 0.5 & 1 & 1.5 & 3 & 6 MG CSPK	4	PA S EX Plan Exclusion
PALFORZIA INITIAL ESCALATION 0.5 & 1 & 1.5 & 3 & 6 MG CSPK	4	PA S EX Plan Exclusion
PECAN POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
PENICILLIUM NOTATUM 1:10 SOLUTION	4	PA EX Plan Exclusion
PENICILLIUM NOTATUM 1:20 SOLUTION	4	PA EX Plan Exclusion
PERENNIAL RYE GRASS POLLEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
PERENNIAL RYE GRASS POLLEN 10000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
PRIVET 1:20 SOLUTION	4	PA EX Plan Exclusion
QUACK GRASS 128000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
QUEEN PALM 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RABBIT EPITHELIUM 1:10 SOLUTION	4	PA EX Plan Exclusion
RABBIT EPITHELIUM 1:20 SOLUTION	4	PA EX Plan Exclusion
RED ALDER POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
RED BIRCH 1:20 SOLUTION	4	PA EX Plan Exclusion
SPRING BIRCH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
RED CEDAR 1:20 SOLUTION	4	PA EX Plan Exclusion
RED MAPLE 1:20 SOLUTION	4	PA EX Plan Exclusion
RED MULBERRY 1:20 SOLUTION	4	PA EX Plan Exclusion
RED OAK 1:20 SOLUTION	4	PA EX Plan Exclusion
RED TOP GRASS POLLEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
RIVER BIRCH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
ROUGH MARSH ELDER 1:20 SOLUTION	4	PA EX Plan Exclusion
ROUGH PIGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion
RUSSIAN THISTLE 1:20 SOLUTION	4	PA EX Plan Exclusion
SACCHAROMYCES CEREVISIAE 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAGEBRUSH 1:20 SOLUTION	4	PA EX Plan Exclusion
SAROCLADIUM STRICTUM 78000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
SAROCLADIUM STRICTUM 94000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
SHAGBARK HICKORY 1:20 SOLUTION	4	PA EX Plan Exclusion
SHEEP SORREL 1:20 SOLUTION	4	PA EX Plan Exclusion
RAGWITEK 12 AMB A 1-U SL TAB	4	PA S EX Plan Exclusion
SHORT RAGWEED POLLEN EXT 1:20 SOLUTION	4	PA EX Plan Exclusion
SPINY PIGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion
SWEET GUM 1:20 SOLUTION	4	PA EX Plan Exclusion
SWEET VERNAL GRASS POLLEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
TALL RAGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion
GRASTEK 2800 BAU SL TAB	4	PA S EX Plan Exclusion
TIMOTHY GRASS POLLEN ALLERGEN 100000 BAU/ML SOLUTION	4	PA EX Plan Exclusion
TIMOTHY GRASS POLLEN ALLERGEN 10000 BAU/ML SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TREE MIX 9 1:20 SOLUTION	4	PA EX Plan Exclusion
TRICHOPHYTON MENTAGROPHYTES 1:20 SOLUTION	4	PA EX Plan Exclusion
VIRGINIA LIVE OAK 1:20 SOLUTION	4	PA EX Plan Exclusion
VENOMIL WASP VENOM 120 MCG KIT	4	PA EX Plan Exclusion
VENOMIL WASP VENOM 12 MCG KIT	4	PA EX Plan Exclusion
WASP VENOM PROTEIN 1300 MCG RECON SOLN	4	PA EX Plan Exclusion
WASP VENOM PROTEIN 550 MCG RECON SOLN	4	PA EX Plan Exclusion
WESTERN JUNIPER 1:20 SOLUTION	4	PA EX Plan Exclusion
WESTERN JUNIPER 1:40 SOLUTION	4	PA EX Plan Exclusion
WESTERN RAGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE ALDER 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE ASH 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE ASH POLLEN 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE ASH POLLEN 40000 PNU/ML SOLUTION	4	PA EX Plan Exclusion
WHITE BIRCH 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VENOMIL WHITE FACED HORNET 120 MCG KIT	4	PA EX Plan Exclusion
VENOMIL WHITE FACED HORNET 12 MCG KIT	4	PA EX Plan Exclusion
WHITE-FACED HORNET VENOM 1300 MCG RECON SOLN	4	PA EX Plan Exclusion
WHITE-FACED HORNET VENOM 550 MCG RECON SOLN	4	PA EX Plan Exclusion
WHITE MULBERRY 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE OAK 1:20 SOLUTION	4	PA EX Plan Exclusion
WHITE PINE 1:20 SOLUTION	4	PA EX Plan Exclusion
YELLOW DOCK 1:20 SOLUTION	4	PA EX Plan Exclusion
VENOMIL YELLOW HORNET VENOM 120 MCG KIT	4	PA EX Plan Exclusion
VENOMIL YELLOW HORNET VENOM 12 MCG KIT	4	PA EX Plan Exclusion
YELLOW HORNET VENOM PROTEIN 550 MCG RECON SOLN	4	PA EX Plan Exclusion
VENOMIL YELLOW JACKET VENOM 120 MCG KIT	4	PA EX Plan Exclusion
VENOMIL YELLOW JACKET VENOM 12 MCG KIT	4	PA EX Plan Exclusion
YELLOW JACKET VENOM PROTEIN 1300 MCG RECON SOLN	4	PA EX Plan Exclusion
YELLOW JACKET VENOM PROTEIN 550 MCG RECON SOLN	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIXED ALLERGENIC EXTRACTS		
COCKROACH MIXED ALLERGEN EXT 1:20 SOLUTION	4	PA EX Plan Exclusion
DUST MITE MIXED ALLERGEN EXT 10000 AU/ML SOLUTION	4	PA EX Plan Exclusion
DUST MITE MIXED ALLERGEN EXT 30000 AU/ML SOLUTION	4	PA EX Plan Exclusion
ODACTRA 12 SQ-HDM SL TAB	4	PA S EX Plan Exclusion
ORALAIR 300 IR SL TAB	4	PA S EX Plan Exclusion
ORALAIR ADULT STARTER PACK 300 IR SL TAB	4	PA S EX Plan Exclusion
ORALAIR CHILDRENS STARTER PACK 100 IR SL TAB	4	PA S EX Plan Exclusion
MIXED FEATHERS 1:20 SOLUTION	4	PA EX Plan Exclusion
SHEEP SORREL-YELLOW DOCK 1:20 SOLUTION	4	PA EX Plan Exclusion
SORREL/DOCK MIX 1:20 SOLUTION	4	PA EX Plan Exclusion
SHORT RAGWEED-GIANT RAGWEED 1:20 SOLUTION	4	PA EX Plan Exclusion
WEED MIXED ALLERGEN 1:20 SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALTERNATIVE MEDICINES		
ALTERNATIVE MEDICINE - AL'S		
ALPHA-LIPOIC ACID 25 MG/ML SOLUTION	4	EX Plan Exclusion
NEOKE RA LIPOIC 800 MG/GM POWDER	4	EX Plan Exclusion
ALTERNATIVE MEDICINE - ME'S		
<i>melatonin liquid 1 mg/ml</i>	4	EX Plan Exclusion
ALTERNATIVE MEDICINE - PR'S		
EC-RX DHEA 10 % CREAM	4	EX Plan Exclusion
EC-RX DHEA 4 % CREAM	4	EX Plan Exclusion
ALTERNATIVE MEDICINE - UB		
COENZYME Q-10 20 MG/ML SOLUTION	4	EX Plan Exclusion
AMINOGLYCOSIDES		
ARIKAYCE 590 MG/8.4ML SUSPENSION	3	PA S
GENTAMICIN IN SALINE 0.8-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
GENTAMICIN IN SALINE 1-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
GENTAMICIN IN SALINE 1.2-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
GENTAMICIN IN SALINE 1.6-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
GENTAMICIN IN SALINE 2-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
<i>gentamicin sulfate inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>gentamicin sulfate inj 40 mg/ml</i>	4	EX Plan Exclusion
<i>neomycin sulfate tab 500 mg</i>	1	
<i>paromomycin sulfate cap 250 mg</i>	2	PA S
ZEMDRI 500 MG/10ML SOLUTION	4	EX Plan Exclusion
STREPTOMYCIN SULFATE 1 GM RECON SOLN	4	EX Plan Exclusion
BETHKIS 300 MG/4ML NEBU SOLN	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tobramycin nebu soln 300 mg/4ml</i>	1	PA S
TOBRAMYCIN 300 MG/5ML NEBU SOLN	1	PA S
<i>tobramycin nebu soln 300 mg/5ml</i>	1	PA S
TOBRAMYCIN SULFATE 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>tobramycin sulfate inj 1.2 gm/30ml (40 mg/ml) (base equiv)</i>	4	EX Plan Exclusion
<i>tobramycin sulfate for inj 1.2 gm</i>	4	EX Plan Exclusion
TOBRAMYCIN SULFATE 2 GM/50ML SOLUTION	4	EX Plan Exclusion
<i>tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv)</i>	4	EX Plan Exclusion
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
YUSIMRY 40 MG/0.8ML SOLN A-INJ	2	QL PA S
HADLIMA 40 MG/0.4ML SOLN PRSYR	2	QL PA S
HADLIMA 40 MG/0.8ML SOLN PRSYR	2	QL PA S
HADLIMA PUSH TOUCH 40 MG/0.4ML SOLN A-INJ	2	QL PA S
HADLIMA PUSH TOUCH 40 MG/0.8ML SOLN A-INJ	2	QL PA S
ADALIMUMAB-FKJP (2 PEN) 40 MG/0.8ML AUT-IJ KIT	2	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADALIMUMAB-FKJP (2 SYRINGE) 20 MG/0.4ML PREF SY KT	2	QL PA S
ADALIMUMAB-FKJP (2 SYRINGE) 40 MG/0.8ML PREF SY KT	2	QL PA S
SIMLANDI (1 PEN) 40 MG/0.4ML AUT-IJ KIT	2	QL PA S
SIMLANDI (1 PEN) 80 MG/0.8ML AUT-IJ KIT	2	QL PA S
SIMLANDI (1 SYRINGE) 80 MG/0.8ML PREF SY KT	2	QL PA S
SIMLANDI (2 PEN) 40 MG/0.4ML AUT-IJ KIT	2	QL PA S
SIMLANDI (2 SYRINGE) 20 MG/0.2ML PREF SY KT	2	PA S
SIMLANDI (2 SYRINGE) 40 MG/0.4ML PREF SY KT	2	QL PA S
SIMPONI 100 MG/ML SOLN A-INJ	3	QL PA S
SIMPONI 100 MG/ML SOLN PRSYR	3	QL PA S
SIMPONI 50 MG/0.5ML SOLN A-INJ	3	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIMPONI 50 MG/0.5ML SOLN PRSYR	3	<ul style="list-style-type: none"> QL PA S
SIMPONI ARIA 50 MG/4ML SOLUTION	4	<ul style="list-style-type: none"> QL PA S EX Plan Exclusion
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
OLUMIANT 1 MG TAB	2	<ul style="list-style-type: none"> QL PA S
OLUMIANT 2 MG TAB	2	<ul style="list-style-type: none"> QL PA S
OLUMIANT 4 MG TAB	2	<ul style="list-style-type: none"> QL PA S
XELJANZ 10 MG TAB	2	<ul style="list-style-type: none"> QL PA S
XELJANZ 1 MG/ML SOLUTION	2	<ul style="list-style-type: none"> QL PA S
XELJANZ 5 MG TAB	2	<ul style="list-style-type: none"> QL PA S
XELJANZ XR 11 MG TAB ER 24H	2	<ul style="list-style-type: none"> QL PA S
XELJANZ XR 22 MG TAB ER 24H	2	<ul style="list-style-type: none"> QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RINVOQ 15 MG TAB ER 24H	3	QL PA S
RINVOQ 30 MG TAB ER 24H	3	QL PA S
RINVOQ 45 MG TAB ER 24H	3	QL PA S
RINVOQ LQ 1 MG/ML SOLUTION	3	QL PA S
ANTIRHEUMATIC ANTIMETABOLITES		
OTREXUP 10 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 12.5 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 15 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 17.5 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 20 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 22.5 MG/0.4ML SOLN A-INJ	3	PA S
OTREXUP 25 MG/0.4ML SOLN A-INJ	3	PA S
RASUVO 10 MG/0.2ML SOLN A-INJ	2	PA S
RASUVO 12.5 MG/0.25ML SOLN A-INJ	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RASUVO 15 MG/0.3ML SOLN A-INJ	2	PA S
RASUVO 17.5 MG/0.35ML SOLN A-INJ	2	PA S
RASUVO 20 MG/0.4ML SOLN A-INJ	2	PA S
RASUVO 22.5 MG/0.45ML SOLN A-INJ	2	PA S
RASUVO 25 MG/0.5ML SOLN A-INJ	2	PA S
RASUVO 30 MG/0.6ML SOLN A-INJ	2	PA S
RASUVO 7.5 MG/0.15ML SOLN A-INJ	2	PA S
REDITREX 10 MG/0.4ML SOLN PRSYR	3	PA S
REDITREX 12.5 MG/0.5ML SOLN PRSYR	3	PA S
REDITREX 15 MG/0.6ML SOLN PRSYR	3	PA S
REDITREX 17.5 MG/0.7ML SOLN PRSYR	3	PA S
REDITREX 20 MG/0.8ML SOLN PRSYR	3	PA S
REDITREX 22.5 MG/0.9ML SOLN PRSYR	3	PA S
REDITREX 25 MG/ML SOLN PRSYR	3	PA S
REDITREX 7.5 MG/0.3ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
<i>celecoxib cap 100 mg</i>	1	
<i>celecoxib cap 200 mg</i>	1	
<i>celecoxib cap 400 mg</i>	1	
<i>celecoxib cap 50 mg</i>	1	
GOLD COMPOUNDS		
AURANOFIN 3 MG CAP	3	PA
RIDAURA 3 MG CAP	3	PA
INTERLEUKIN-1 BLOCKERS		
		QL
ARCALYST 220 MG RECON SOLN	3	PA S
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET 100 MG/0.67ML SOLN PRSYR	3	PA S
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 200 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
ACTEMRA 400 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
ACTEMRA 80 MG/4ML SOLUTION	4	PA S EX Plan Exclusion
TYENNE 162 MG/0.9ML SOLN A-INJ	2	QL PA S
TYENNE 162 MG/0.9ML SOLN PRSYR	2	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYENNE 200 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
TYENNE 400 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
TYENNE 80 MG/4ML SOLUTION	4	PA S EX Plan Exclusion
TOFIDENCE 200 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
TOFIDENCE 400 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
TOFIDENCE 80 MG/4ML SOLUTION	4	PA S EX Plan Exclusion
NONSTEROIDAL ANTI-INFLAMMATORY AGENT COMBINATIONS		
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 50-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	2	
<i>diclofenac w/ misoprostol tab delayed release 75-0.2 mg</i>	2	
COMBOGESIC 1000-300 MG/100ML SOLUTION	3	
<i>ibuprofen-famotidine tab 800-26.6 mg</i>	2	
<i>naproxen-esomeprazole magnesium tab dr 375-20 mg</i>	2	
<i>naproxen-esomeprazole magnesium tab dr 500-20 mg</i>	2	
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
DICLOFENAC 35 MG CAP	1	
<i>diclofenac potassium tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diclofenac potassium cap 25 mg</i>	1	
<i>diclofenac potassium tab 25 mg</i>	1	
<i>diclofenac potassium tab 50 mg</i>	1	
<i>diclofenac potassium tab 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 25 mg</i>	1	
<i>diclofenac sodium tab delayed release 50 mg</i>	1	
<i>diclofenac sodium tab delayed release 75 mg</i>	1	
<i>diclofenac sodium tab er 24hr 100 mg</i>	1	
TRESNI 100 MG SUPPOS	3	
<i>etodolac cap 200 mg</i>	1	
<i>etodolac cap 300 mg</i>	1	
<i>etodolac tab 400 mg</i>	1	
<i>etodolac tab 500 mg</i>	1	
<i>etodolac tab er 24hr 400 mg</i>	1	
<i>etodolac tab er 24hr 500 mg</i>	1	
<i>etodolac tab er 24hr 600 mg</i>	1	
FENOPROFEN CALCIUM 200 MG CAP	1	
FENOPROFEN CALCIUM 400 MG CAP	1	
<i>fenopropfen calcium cap 400 mg</i>	1	
FENORTHO 200 MG CAP	1	
FLURBIPROFEN 100 MG TAB	1	
<i>flurbiprofen tab 100 mg</i>	1	
FLURBIPROFEN 50 MG TAB	1	
CALDOLOR 800 MG/200ML SOLUTION	4	EX Plan Exclusion
CALDOLOR 800 MG/8ML SOLUTION	4	EX Plan Exclusion
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>ibuprofen susp 100 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ibuprofen susp 100 mg/5ml</i>	1	
IBUPROFEN 300 MG TAB	1	
<i>ibuprofen tab 400 mg</i>	1	
<i>ibuprofen tab 600 mg</i>	1	
<i>ibuprofen tab 800 mg</i>	1	
<i>ibuprofen lysine iv soln 10 mg/ml (base equivalent)</i>	4	EX Plan Exclusion
NEOPROFEN 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>indomethacin suppos 50 mg</i>	1	
INDOMETHACIN 100 MG SUPPOS	3	
INDOMETHACIN 20 MG CAP	1	
<i>indomethacin susp 25 mg/5ml</i>	1	
<i>indomethacin cap 25 mg</i>	1	
<i>indomethacin cap 50 mg</i>	1	
<i>indomethacin suppos 50 mg</i>	1	
<i>indomethacin cap er 75 mg</i>	1	
INDOMETHACIN SODIUM 1 MG RECON SOLN	4	EX Plan Exclusion
<i>indomethacin sodium iv for soln 1 mg</i>	4	EX Plan Exclusion
<i>ketorolac tromethamine tab 10 mg</i>	1	
KETOROLAC TROMETHAMINE 15.75 MG/SPRAY SOLUTION	3	
<i>ketorolac tromethamine inj 15 mg/ml</i>	1	
KETOROLAC TROMETHAMINE 30 MG/ML SOLUTION	1	
<i>ketorolac tromethamine inj 30 mg/ml</i>	1	
<i>ketorolac tromethamine im inj 60 mg/2ml (30 mg/ml)</i>	1	
MECLOFENAMATE SODIUM 100 MG CAP	1	
MECLOFENAMATE SODIUM 50 MG CAP	1	
<i>mefenamic acid cap 250 mg</i>	1	
ANJESO 30 MG/ML INJECTABLE	4	EX Plan Exclusion
<i>meloxicam cap 10 mg</i>	1	
<i>meloxicam tab 15 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>meloxicam cap 5 mg</i>	1	
MELOXICAM 7.5 MG/5ML SUSPENSION	2	
<i>meloxicam tab 7.5 mg</i>	1	
XIFYRM 30 MG/ML SOLUTION	4	EX Plan Exclusion
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>nabumetone tab 500 mg</i>	1	
<i>nabumetone tab 750 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>naproxen susp 125 mg/5ml</i>	1	
<i>naproxen tab 250 mg</i>	1	
<i>naproxen tab 375 mg</i>	1	
<i>naproxen tab ec 375 mg</i>	1	
<i>naproxen tab 500 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>naproxen tab ec 500 mg</i>	1	
<i>naproxen sodium tab 275 mg</i>	1	
<i>naproxen sodium tab 550 mg</i>	1	
<i>naproxen sodium tab er 24hr 375 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 500 mg (base equiv)</i>	1	
<i>naproxen sodium tab er 24hr 750 mg (base equiv)</i>	1	
OXAPROZIN 300 MG CAP	1	
<i>oxaprozin tab 600 mg</i>	1	
<i>piroxicam cap 10 mg</i>	1	
<i>piroxicam cap 20 mg</i>	1	
<i>sulindac tab 150 mg</i>	1	
<i>sulindac tab 200 mg</i>	1	
NSAID-DIETARY MANAGEMENT COMBINATIONS		
PRASTERA 200 & 400 MG KIT	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NSAID-PYRIMIDINE SYNTHESIS INHIBITORS COMBINATIONS		
LEFLUNICLO 20 & 1 MG & % KIT	3	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA 10 & 20 & 30 MG TAB THPK	2	QL PA S
OTEZLA 20 MG TAB	2	QL PA S
OTEZLA 30 MG TAB	2	QL PA S
OTEZLA 4 X 10 & 51 X20 MG TAB THPK	2	QL PA S
PYRIMIDINE SYNTHESIS INHIBITORS		
<i>leflunomide tab 10 mg</i>	1	
<i>leflunomide tab 20 mg</i>	1	
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA 125 MG/ML SOLN PRSYR	2	QL PA S
ORENCIA 250 MG RECON SOLN	4	QL PA S EX Plan Exclusion
ORENCIA 50 MG/0.4ML SOLN PRSYR	2	QL PA S
ORENCIA 87.5 MG/0.7ML SOLN PRSYR	2	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORENCIA CLICKJECT 125 MG/ML SOLN A-INJ	2	QL PA S
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL 25 MG/0.5ML SOLN PRSYR	3	QL PA S
ENBREL 25 MG/0.5ML SOLUTION	3	QL PA S
ENBREL 25 MG RECON SOLN	3	QL PA S
ENBREL 50 MG/ML SOLN PRSYR	3	QL PA S
ENBREL MINI 50 MG/ML SOLN CART	3	QL PA S
ENBREL SURECLICK 50 MG/ML SOLN A-INJ	3	QL PA S
ANALGESICS - NONNARCOTIC		
ANALGESICS OTHER		
<i>acetaminophen iv soln 10 mg/ml</i>	4	EX Plan Exclusion
ACETAMINOPHEN 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>acetaminophen iv soln 10 mg/ml</i>	4	EX Plan Exclusion
OFIRMEV 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>clonidine hcl inj (for epidural infusion) 100 mcg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLONIDINE HCL (ANALGESIA) 500 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>clonidine hcl inj (for epidural infusion) 500 mcg/ml</i>	4	EX Plan Exclusion
DURACLON 100 MCG/ML SOLUTION	4	EX Plan Exclusion
ANALGESICS-SEDATIVES		
<i>butalbital-acetaminophen tab 50-300 mg</i>	2	PA
<i>butalbital-acetaminophen cap 50-300 mg</i>	2	PA
<i>butalbital-acetaminophen tab 50-300 mg</i>	2	PA
<i>butalbital-acetaminophen tab 50-325 mg</i>	1	
TENCON 50-325 MG TAB	2	
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	
<i>butalbital-acetaminophen-caffeine cap 50-300-40 mg</i>	2	PA
BUTALBITAL-APAP-CAFFEINE 50-325-40 MG/15ML SOLUTION	1	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	
<i>butalbital-acetaminophen-caffeine tab 50-325-40 mg</i>	1	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	2	PA
ESGIC 50-325-40 MG TAB	2	PA
FIORICET 50-300-40 MG CAP	3	PA
VTOL LQ 50-325-40 MG/15ML SOLUTION	1	
<i>butalbital-acetaminophen-caffeine cap 50-325-40 mg</i>	1	
<i>butalbital-aspirin-caffeine cap 50-325-40 mg</i>	1	
SALICYLATES		
<i>diflunisal tab 500 mg</i>	1	
SALSALATE 500 MG TAB	1	
<i>salsalate tab 500 mg</i>	1	
SALSALATE 750 MG TAB	1	
<i>salsalate tab 750 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE N-TYPE NEURONAL CALCIUM CHANNEL BLOCKERS		
PRIALT 100 MCG/ML SOLUTION	4	S EX Plan Exclusion
PRIALT 500 MCG/20ML SOLUTION	4	S EX Plan Exclusion
PRIALT 500 MCG/5ML SOLUTION	4	S EX Plan Exclusion
ANALGESICS - OPIOID		
CODEINE COMBINATIONS		
ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION	1	PA PA required > 90 MME
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	PA PA required > 90 MME
<i>acetaminophen w/ codeine tab 300-15 mg</i>	1	PA PA required > 90 MME
ACETAMINOPHEN-CODEINE 300-30 MG/12.5ML SOLUTION	1	PA PA required > 90 MME
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	1	PA PA required > 90 MME
<i>acetaminophen w/ codeine tab 300-30 mg</i>	1	PA PA required > 90 MME
<i>acetaminophen w/ codeine tab 300-60 mg</i>	1	PA PA required > 90 MME
<i>butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg</i>	2	PA
<i>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</i>	1	PA PA required > 90 MME
FIORICET/CODEINE 50-300-40-30 MG CAP	3	PA
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	PA PA required > 90 MME
<i>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</i>	1	PA PA required > 90 MME
FENTANYL COMBINATIONS		
FENTANYL CIT-BUPIVACAINE HCL 2-0.125 MCG/ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.1-0.125-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.1-0.125-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.0625-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL-BUPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.125-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.125-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.2-0.125-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.04-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.0625-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.0625-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.0625-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.075-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.1-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.1-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.1-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.125-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.125-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.5-0.125-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 0.8-0.1667-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-BUPIVACAINE-NACL 1-0.125-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL-BUPIVACAINE-NACL 2-0.125-0.9 MCG/ML-%-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-ROPIVACAINE 0.1-0.15 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.1-0.1-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.125-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.2-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.2-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.2-0.2-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.3-0.2-0.9 MG/150ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.4-0.1-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.4-0.1-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.4-0.1-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.4-0.2-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.5-0.1-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.5-0.2-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CIT-ROPIVACAINE-NACL 0.5-0.2-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL-ROPIVACAINE-NACL 0.2-0.1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYDROCODONE COMBINATIONS		
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	
<i>hydrocodone-acetaminophen tab 10-300 mg</i>	1	
<i>hydrocodone-acetaminophen soln 10-325 mg/15ml</i>	1	PA PA required > 90 MME
HYDROCODONE-ACETAMINOPHEN 10-325 MG/15ML SOLUTION	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
HYDROCODONE-ACETAMINOPHEN 2.5-325 MG TAB	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	
<i>hydrocodone-acetaminophen tab 5-300 mg</i>	1	
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	
<i>hydrocodone-acetaminophen tab 7.5-300 mg</i>	1	
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA PA required > 90 MME
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	PA PA required > 90 MME
HYDROCODONE-IBUPROFEN 10-200 MG TAB	1	PA PA required > 90 MME
<i>hydrocodone-ibuprofen tab 10-200 mg</i>	1	PA PA required > 90 MME
HYDROCODONE-IBUPROFEN 5-200 MG TAB	1	PA PA required > 90 MME
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPIOID AGONISTS		
ALFENTANIL HCL 1000 MCG/2ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
ALFENTANIL HCL 2500 MCG/5ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
CODEINE SULFATE 15 MG TAB	1	PA PA required > 90 MME
CODEINE SULFATE 30 MG TAB	1	PA PA required > 90 MME
<i>codeine sulfate tab 30 mg</i>	1	PA PA required > 90 MME
CODEINE SULFATE 60 MG TAB	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 100 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 12 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 25 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 37.5 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 50 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 62.5 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 75 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	1	PA PA required > 90 MME
<i>fentanyl td patch 72hr 87.5 mcg/hr</i>	1	PA PA required > 90 MME
FENTANYL CITRATE 1000 MCG/100ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 1000 MCG/20ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 1000 MCG/50ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 100 MCG/10ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 100 MCG/2ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 100 MCG/2ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 100 MCG TAB	2	PA
FENTANYL CITRATE 10 MCG/ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 1200 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 1200 mcg</i>	2	PA
FENTANYL CITRATE 1250 MCG/25ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 1500 MCG/30ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 1500 MCG/30ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 1500 MCG/30ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 1500 MCG/30ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 1600 MCG/100ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 1600 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 1600 mcg</i>	2	PA
FENTANYL CITRATE 2000 MCG/100ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 200 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 200 mcg</i>	2	PA
FENTANYL CITRATE 200 MCG TAB	2	PA
FENTANYL CITRATE 20 MCG/2ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 2500 MCG/50ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 2500 MCG/50ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 250 MCG/5ML SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE 250 MCG/5ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 2750 MCG/55ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 2750 MCG/55ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 400 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 400 mcg</i>	2	PA
FENTANYL CITRATE 400 MCG TAB	2	PA
FENTANYL CITRATE 5000 MCG/100ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 5000 MCG/100ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE 500 MCG/50ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 50 MCG/5ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 50 MCG/ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE 600 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 600 mcg</i>	2	PA
FENTANYL CITRATE 600 MCG TAB	2	PA
FENTANYL CITRATE 800 MCG LOZ HANDLE	2	PA
<i>fentanyl citrate lozenge on a handle 800 mcg</i>	2	PA
FENTANYL CITRATE 800 MCG TAB	2	PA
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 1000 mcg/20ml</i>	4	EX Plan Exclusion
FENTANYL CITRATE (PF) 100 MCG/2ML SOLN CART	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	4	EX Plan Exclusion
FENTANYL CITRATE (PF) 100 MCG/2ML SOLUTION	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 100 mcg/2ml</i>	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 2500 mcg/50ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	4	EX Plan Exclusion
FENTANYL CITRATE (PF) 250 MCG/5ML SOLUTION	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 250 mcg/5ml</i>	4	EX Plan Exclusion
FENTANYL CITRATE PF 25 MCG/0.5ML SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE (PF) 500 MCG/10ML SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE PF 50 MCG/ML SOLN PRSYR	4	EX Plan Exclusion
<i>fentanyl citrate pf soln prefilled syringe 50 mcg/ml</i>	4	EX Plan Exclusion
FENTANYL CITRATE (PF) 50 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>fentanyl citrate preservative free (pf) inj 50 mcg/ml</i>	4	EX Plan Exclusion
LAZANDA 100 MCG/ACT SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
LAZANDA 400 MCG/ACT SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
FENTANYL CITRATE-NACL 1000-0.9 MCG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 100-0.9 MCG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 10-0.9 MCG/2ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 10-0.9 MCG/ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 10-0.9 MCG/ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 1-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 1-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 1.25-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 2-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 2500-0.9 MCG/50ML-% SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FENTANYL CITRATE-NACL 2.5-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 2.5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 2.5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 2.5-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 500-0.9 MCG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 5-0.9 MCG/ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 5-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 550-0.9 MCG/55ML-% SOLN PRSYR	4	EX Plan Exclusion
FENTANYL CITRATE-NACL 550-0.9 MCG/55ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDROCODONE BITARTRATE ER 10 MG CAP ER 12H	2	PA
HYDROCODONE BITARTRATE ER 15 MG CAP ER 12H	2	PA
HYDROCODONE BITARTRATE ER 20 MG CAP ER 12H	2	PA
HYDROCODONE BITARTRATE ER 30 MG CAP ER 12H	2	PA
HYDROCODONE BITARTRATE ER 40 MG CAP ER 12H	2	PA
HYDROCODONE BITARTRATE ER 50 MG CAP ER 12H	2	PA
DILAUDID 0.2 MG/ML SOLUTION	4	EX Plan Exclusion
DILAUDID 1 MG/ML SOLUTION	4	EX Plan Exclusion
DILAUDID 2 MG/ML SOLUTION	4	EX Plan Exclusion
HYDROMORPHONE HCL 0.25 MG/0.5ML SOLUTION	4	EX Plan Exclusion
HYDROMORPHONE HCL 0.2 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl inj 0.2 mg/ml</i>	4	EX Plan Exclusion
HYDROMORPHONE HCL 0.5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl liqd 1 mg/ml</i>	1	PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYDROMORPHONE HCL 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl inj 1 mg/ml</i>	4	EX Plan Exclusion
HYDROMORPHONE HCL 2 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl inj 2 mg/ml</i>	4	EX Plan Exclusion
<i>hydromorphone hcl tab 2 mg</i>	1	PA PA required > 90 MME
HYDROMORPHONE HCL 3 MG SUPPOS	2	PA
HYDROMORPHONE HCL 4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl tab 4 mg</i>	1	PA PA required > 90 MME
<i>hydromorphone hcl tab 8 mg</i>	1	PA PA required > 90 MME
<i>hydromorphone hcl tab er 24hr 12 mg</i>	2	PA
<i>hydromorphone hcl tab er 24hr 16 mg</i>	2	PA
<i>hydromorphone hcl tab er 24hr 32 mg</i>	2	PA
<i>hydromorphone hcl tab er 24hr 8 mg</i>	2	PA
HYDROMORPHONE HCL PF 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	4	EX Plan Exclusion
HYDROMORPHONE HCL PF 1 MG/ML SOLUTION	4	EX Plan Exclusion
HYDROMORPHONE HCL PF 2 MG/ML SOLUTION	4	EX Plan Exclusion
HYDROMORPHONE HCL PF 4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>hydromorphone hcl preservative free (pf) inj 10 mg/ml</i>	4	EX Plan Exclusion
HYDROMORPHONE HCL-NACL 0.2-0.9 MG/0.2ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDROMORPHONE HCL-NACL 0.5-0.9 MG/0.5ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDROMORPHONE HCL-NACL 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
HYDROMORPHONE HCL-NACL 100-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYDOMORPHONE HCL-NACL 10-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 10-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 1-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 1-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 15-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 20-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 2-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 25-0.9 MG/25ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 25-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 25-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 30-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 30-0.9 MG/30ML-% SOLUTION	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 50-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 5-0.9 MG/25ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 55-0.9 MG/55ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 6-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
HYDOMORPHONE HCL-NACL 6-0.9 MG/30ML-% SOLUTION	4	EX Plan Exclusion
METHADONE HCL 10 MG/5ML SOLUTION	1	PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methadone hcl soln 10 mg/5ml</i>	1	PA PA required > 90 MME
<i>methadone hcl conc 10 mg/ml</i>	1	PA PA required > 90 MME
METHADONE HCL 10 MG/ML SOLN PRSYR	4	EX Plan Exclusion PA PA required > 90 MME
METHADONE HCL 10 MG/ML SOLUTION	1	PA PA required > 90 MME
<i>methadone hcl inj 10 mg/ml</i>	1	PA PA required > 90 MME
<i>methadone hcl tab 10 mg</i>	1	PA PA required > 90 MME
METHADONE HCL 40 MG TAB SOL	1	PA PA required > 90 MME
<i>methadone hcl tab for oral susp 40 mg</i>	1	PA PA required > 90 MME
METHADONE HCL 5 MG/5ML SOLUTION	1	PA PA required > 90 MME
<i>methadone hcl soln 5 mg/5ml</i>	1	PA PA required > 90 MME
<i>methadone hcl tab 5 mg</i>	1	PA PA required > 90 MME
<i>methadone hcl conc 10 mg/ml</i>	1	PA PA required > 90 MME
METHADOSE 10 MG/ML CONC	1	PA PA required > 90 MME
<i>methadone hcl tab for oral susp 40 mg</i>	1	PA PA required > 90 MME
METHADOSE SUGAR-FREE 10 MG/ML CONC	1	PA PA required > 90 MME
METHADONE HCL-SODIUM CHLORIDE 10-0.8 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion PA PA required > 90 MME
METHADONE HCL-SODIUM CHLORIDE 1-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion PA PA required > 90 MME
METHADONE HCL-SODIUM CHLORIDE 5-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion PA PA required > 90 MME
DURAMORPH 0.5 MG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
DURAMORPH 1 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 0.5 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 10 MG/5ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>morphine sulfate oral soln 10 mg/5ml</i>	1	PA PA required > 90 MME
<i>morphine sulfate oral soln 10 mg/5ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
MORPHINE SULFATE 10 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 10 MG SUPPOS	2	PA
MORPHINE SULFATE 15 MG TAB	1	PA PA required > 90 MME
<i>morphine sulfate tab 15 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE 1 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 20 MG/5ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulfate oral soln 20 mg/5ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
MORPHINE SULFATE 20 MG SUPPOS	2	PA
MORPHINE SULFATE 2 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 30 MG SUPPOS	2	PA
MORPHINE SULFATE 30 MG TAB	1	PA PA required > 90 MME
<i>morphine sulfate tab 30 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE 4 MG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulfate iv soln 4 mg/ml</i>	4	EX Plan Exclusion
MORPHINE SULFATE 50 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE 5 MG SUPPOS	2	PA
MORPHINE SULFATE 8 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>morphine sulfate oral soln 100 mg/5ml (20 mg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 100 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 100 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate tab er 100 mg</i>	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 10 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 10 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate tab er 15 mg</i>	1	PA PA required > 90 MME
<i>morphine sulfate tab er 200 mg</i>	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 20 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 20 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 30 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 30 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate tab er 30 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 40 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 50 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 50 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 60 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 60 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate tab er 60 mg</i>	1	PA PA required > 90 MME
<i>morphine sulfate cap er 24hr 80 mg</i>	1	PA PA required > 90 MME
MORPHINE SULFATE ER 80 MG CAP ER 24H	1	PA PA required > 90 MME
<i>morphine sulfate inj pf 0.5 mg/ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
MORPHINE SULFATE (PF) 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>morphine sulfate inj pf 1 mg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MORPHINE SULFATE (PF) 1 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE (PF) 2 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE (PF) 4 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE (PF) 5 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE (PF) 8 MG/ML SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE ER BEADS 120 MG CAP ER 24H	2	PA
MORPHINE SULFATE ER BEADS 30 MG CAP ER 24H	2	PA
MORPHINE SULFATE ER BEADS 45 MG CAP ER 24H	2	PA
MORPHINE SULFATE ER BEADS 60 MG CAP ER 24H	2	PA
MORPHINE SULFATE ER BEADS 75 MG CAP ER 24H	2	PA
MORPHINE SULFATE ER BEADS 90 MG CAP ER 24H	2	PA
INFUMORPH 200 200 MG/20ML (10 MG/ML) SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
INFUMORPH 500 500 MG/20ML (25 MG/ML) SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulf for microinfusion pf inj 200 mg/20ml (10mg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME
<i>morphine sulf for microinfusion pf inj 500 mg/20ml (25mg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME
MORPHINE SULFATE-NAACL 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 1-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 1-0.9 MG/ML-% SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 150-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 2-0.9 MG/2ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 2-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NAACL 250-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MORPHINE SULFATE-NACL 30-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 4-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 500-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 50-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 5-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
MORPHINE SULFATE-NACL 55-0.9 MG/55ML-% SOLN PRSYR	4	EX Plan Exclusion
OLINVYK 1 MG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
OLINVYK 2 MG/2ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
OLINVYK 30 MG/30ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
XTAMPZA ER 13.5 MG CP12 DETER	3	PA
XTAMPZA ER 18 MG CP12 DETER	3	PA
XTAMPZA ER 27 MG CP12 DETER	3	PA
XTAMPZA ER 36 MG CP12 DETER	3	PA
XTAMPZA ER 9 MG CP12 DETER	3	PA
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	PA PA required > 90 MME
<i>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 10 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 10 mg</i>	1	PA PA required > 90 MME
OXYCODONE HCL 10 MG TAB DETER	2	PA PA required > 90 MME
<i>oxycodone hcl tab 15 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 15 mg</i>	1	PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXYCODONE HCL 15 MG TAB DETER	2	PA PA required > 90 MME
<i>oxycodone hcl tab 20 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 20 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 30 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 30 mg</i>	1	PA PA required > 90 MME
OXYCODONE HCL 30 MG TAB DETER	2	PA PA required > 90 MME
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA PA required > 90 MME
<i>oxycodone hcl soln 5 mg/5ml</i>	1	PA PA required > 90 MME
<i>oxycodone hcl cap 5 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 5 mg</i>	1	PA PA required > 90 MME
<i>oxycodone hcl tab 5 mg</i>	1	PA PA required > 90 MME
OXYCODONE HCL 5 MG TAB DETER	2	PA PA required > 90 MME
OXYCODONE HCL ER 10 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 10 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 15 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 20 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 20 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 30 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 40 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 40 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 60 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 80 MG TB12 DETER	1	PA PA required > 90 MME
OXYCODONE HCL ER 80 MG TB12 DETER	1	PA PA required > 90 MME
OXYCONTIN 10 MG TB12 DETER	3	PA
OXYCONTIN 15 MG TB12 DETER	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXYCONTIN 20 MG TB12 DETER	3	PA
OXYCONTIN 30 MG TB12 DETER	3	PA
OXYCONTIN 40 MG TB12 DETER	3	PA
OXYCONTIN 60 MG TB12 DETER	3	PA
OXYCONTIN 80 MG TB12 DETER	3	PA
<i>oxymorphone hcl tab 10 mg</i>	2	PA
<i>oxymorphone hcl tab 10 mg</i>	2	PA
<i>oxymorphone hcl tab 5 mg</i>	2	PA
<i>oxymorphone hcl tab 5 mg</i>	2	PA
<i>remifentanil hcl for iv soln 1 mg</i>	4	EX Plan Exclusion PA PA required > 90 MME
<i>remifentanil hcl for iv soln 2 mg</i>	4	EX Plan Exclusion PA PA required > 90 MME
<i>remifentanil hcl for iv soln 5 mg</i>	4	EX Plan Exclusion PA PA required > 90 MME
ULTIVA 1 MG RECON SOLN	4	EX Plan Exclusion PA PA required > 90 MME
ULTIVA 2 MG RECON SOLN	4	EX Plan Exclusion PA PA required > 90 MME
ULTIVA 2 MG RECON SOLN	4	EX Plan Exclusion PA PA required > 90 MME
ULTIVA 5 MG RECON SOLN	4	EX Plan Exclusion PA PA required > 90 MME
SUFENTANIL CITRATE 100 MCG/2ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>sufentanil citrate inj 100 mcg/2ml (50 mcg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME
SUFENTANIL CITRATE 250 MCG/5ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sufentanil citrate inj 250 mcg/5ml (50 mcg/ml)</i>	4	EX Plan Exclusion PA PA required > 90 MME
SUFENTANIL CITRATE 50 MCG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>sufentanil citrate inj 50 mcg/ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
SYNAPRYN FUSEPAQ 10 MG/ML RECON SUSP	2	PA PA required > 90 MME
<i>tramadol hcl tab 100 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL 25 MG TAB	1	PA PA required > 90 MME
<i>tramadol hcl tab 50 mg</i>	1	PA PA required > 90 MME
<i>tramadol hcl tab 50 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL 5 MG/ML SOLUTION	1	PA PA required > 90 MME
TRAMADOL HCL 75 MG TAB	1	PA PA required > 90 MME
TRAMADOL HCL ER 100 MG CAP ER 24H	1	PA PA required > 90 MME
<i>tramadol hcl tab er 24hr 100 mg</i>	1	
<i>tramadol hcl tab er 24hr 100 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL ER 200 MG CAP ER 24H	1	PA PA required > 90 MME
<i>tramadol hcl tab er 24hr 200 mg</i>	1	
<i>tramadol hcl tab er 24hr 200 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL ER 300 MG CAP ER 24H	1	PA PA required > 90 MME
<i>tramadol hcl tab er 24hr 300 mg</i>	1	
<i>tramadol hcl tab er 24hr 300 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL (ER BIPHASIC) 100 MG TAB ER 24H	1	PA PA required > 90 MME
<i>tramadol hcl tab er 24hr biphasic release 100 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL (ER BIPHASIC) 200 MG TAB ER 24H	1	PA PA required > 90 MME
<i>tramadol hcl tab er 24hr biphasic release 200 mg</i>	1	PA PA required > 90 MME
TRAMADOL HCL (ER BIPHASIC) 300 MG TAB ER 24H	1	PA PA required > 90 MME

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tramadol hcl tab er 24hr biphasic release 300 mg</i>	1	PA PA required > 90 MME
OPIOID COMBINATIONS		
APADAZ 4.08-325 MG TAB	1	PA PA required > 90 MME
APADAZ 6.12-325 MG TAB	1	PA PA required > 90 MME
APADAZ 8.16-325 MG TAB	1	PA PA required > 90 MME
BENZHYDROCODONE-ACETAMINOPHEN 4.08-325 MG TAB	1	PA PA required > 90 MME
BENZHYDROCODONE-ACETAMINOPHEN 6.12-325 MG TAB	1	PA PA required > 90 MME
BENZHYDROCODONE-ACETAMINOPHEN 8.16-325 MG TAB	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	PA PA required > 90 MME
OXYCODONE-ACETAMINOPHEN 5-325 MG/5ML SOLUTION	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA PA required > 90 MME
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	PA PA required > 90 MME
OPIOID PARTIAL AGONISTS		
BRIXADI 128 MG/0.36ML SOLN PRSYR	3	PA S
BRIXADI 64 MG/0.18ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BRIXADI 96 MG/0.27ML SOLN PRSYR	3	PA S
BRIXADI (WEEKLY) 16 MG/0.32ML SOLN PRSYR	3	PA S
BRIXADI (WEEKLY) 24 MG/0.48ML SOLN PRSYR	3	PA S
BRIXADI (WEEKLY) 32 MG/0.64ML SOLN PRSYR	3	PA S
BRIXADI (WEEKLY) 8 MG/0.16ML SOLN PRSYR	3	PA S
<i>buprenorphine td patch weekly 10 mcg/hr</i>	1	PA PA required > 90 MME
<i>buprenorphine td patch weekly 15 mcg/hr</i>	1	PA PA required > 90 MME
<i>buprenorphine td patch weekly 20 mcg/hr</i>	1	PA PA required > 90 MME
<i>buprenorphine td patch weekly 5 mcg/hr</i>	1	PA PA required > 90 MME
<i>buprenorphine td patch weekly 7.5 mcg/hr</i>	1	PA PA required > 90 MME
SUBLOCADE 100 MG/0.5ML SOLN PRSYR	3	PA S
SUBLOCADE 300 MG/1.5ML SOLN PRSYR	3	PA S
BELBUCA 150 MCG FILM	2	PA
BELBUCA 300 MCG FILM	2	PA
BELBUCA 450 MCG FILM	2	PA
BELBUCA 600 MCG FILM	2	PA
BELBUCA 750 MCG FILM	2	PA
BELBUCA 75 MCG FILM	2	PA
BELBUCA 900 MCG FILM	2	PA
BUPRENEX 0.3 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>buprenorphine hcl inj 0.3 mg/ml (base equiv)</i>	4	EX Plan Exclusion
<i>buprenorphine hcl sl tab 2 mg (base equiv)</i>	1	PA PA required > 90 MME
<i>buprenorphine hcl sl tab 8 mg (base equiv)</i>	1	PA PA required > 90 MME
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	
ZUBSOLV 0.7-0.18 MG SL TAB	2	PA
ZUBSOLV 11.4-2.9 MG SL TAB	2	PA
ZUBSOLV 1.4-0.36 MG SL TAB	2	PA
ZUBSOLV 2.9-0.71 MG SL TAB	2	PA
ZUBSOLV 5.7-1.4 MG SL TAB	2	PA
ZUBSOLV 8.6-2.1 MG SL TAB	2	PA
<i>butorphanol tartrate nasal soln 10 mg/ml</i>	1	QL PA PA required > 90 MME
BUTORPHANOL TARTRATE 1 MG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
BUTORPHANOL TARTRATE 2 MG/ML SOLUTION	4	EX Plan Exclusion PA PA required > 90 MME
<i>nalbuphine hcl inj 10 mg/ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
<i>nalbuphine hcl inj 20 mg/ml</i>	4	EX Plan Exclusion PA PA required > 90 MME
TRAMADOL COMBINATIONS		
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	PA PA required > 90 MME
ULTRACET 37.5-325 MG TAB	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANDROGENS-ANABOLIC		
ANABOLIC STEROIDS		
OXANDROLONE 10 MG TAB	2	PA
<i>oxandrolone tab 10 mg</i>	2	PA
OXANDROLONE 2.5 MG TAB	2	PA
<i>oxandrolone tab 2.5 mg</i>	2	PA
ANDROGENS		
<i>danazol cap 100 mg</i>	1	PA
<i>danazol cap 200 mg</i>	1	PA
<i>danazol cap 50 mg</i>	1	PA
EC-RX TESTOSTERONE 0.2 % CREAM	3	PA
EC-RX TESTOSTERONE 0.4 % CREAM	3	PA
EC-RX TESTOSTERONE 10 % CREAM	3	PA
EC-RX TESTOSTERONE 20 % CREAM	3	PA
NATESTO 5.5 MG/ACT GEL	3	PA
TESTOSTERONE 100 MG PELLETT	1	PA
TESTOSTERONE 10 MG/ACT (2%) GEL	1	PA
<i>testosterone td gel 10mg/act (2%)</i>	1	PA
TESTOSTERONE 12.5 MG/ACT (1%) GEL	1	PA
<i>testosterone td gel 12.5 mg/act (1%)</i>	1	PA
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	PA
TESTOSTERONE 200 MG PELLETT	1	PA
TESTOSTERONE 20.25 MG/1.25GM (1.62%) GEL	1	PA
<i>testosterone td gel 20.25 mg/1.25gm (1.62%)</i>	1	PA
<i>testosterone td gel 20.25 mg/act (1.62%)</i>	1	PA
<i>testosterone td gel 25 mg/2.5gm (1%)</i>	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TESTOSTERONE 25 MG PELLETT	1	PA
<i>testosterone td soln 30 mg/act</i>	1	PA
TESTOSTERONE 37.5 MG PELLETT	1	PA
<i>testosterone td gel 40.5 mg/2.5gm (1.62%)</i>	1	PA
TESTOSTERONE 50 MG/5GM (1%) GEL	1	PA
<i>testosterone td gel 50 mg/5gm (1%)</i>	1	PA
TESTOSTERONE 50 MG PELLETT	1	PA
TESTOSTERONE 87.5 MG PELLETT	1	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	2	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	2	PA
<i>testosterone cypionate im inj in oil 100 mg/ml</i>	1	PA
TESTOSTERONE CYPIONATE 200 MG/ML SOLUTION	1	PA
<i>testosterone cypionate im inj in oil 200 mg/ml</i>	1	PA
TESTOSTERONE ENANTHATE 200 MG/ML SOLUTION	1	PA
KYZATREX 100 MG CAP	2	PA
KYZATREX 150 MG CAP	2	PA
KYZATREX 200 MG CAP	2	PA
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide rectal foam 2 mg/act</i>	1	
<i>budesonide rectal foam 2 mg/act</i>	1	
CORTIFOAM 10 % FOAM	2	
<i>hydrocortisone enema 100 mg/60ml</i>	1	
NITRATE VASODILATING AGENTS		
<i>nitroglycerin oint 0.4%</i>	1	
RECTIV 0.4 % OINTMENT	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RECTAL ANESTHETIC/STEROIDS		
ANALPRAM-HC 1-1 % CREAM	3	
ANALPRAM HC 2.5-1 % CREAM	3	
ANALPRAM-HC 2.5-1 % LOTION	3	
ANALPRAM HC SINGLES 2.5-1 % CREAM	3	
HYDROCORTISONE ACE-PRAMOXINE 1-1 % CREAM	1	
HYDROCORTISONE ACE-PRAMOXINE 25-18 MG SUPPOS	1	
HYDROCORT-PRAMOXINE (PERIANAL) 2.5-1 % CREAM	1	
PROCORT 1.85-1.15 % CREAM	3	
PROCTOFOAM HC 1-1 % FOAM	2	
ANA-LEX 2-2 % KIT	1	
LIDOCAINE-HYDROCORTISONE ACE 2-2 % KIT	1	
LIDOCAINE-HYDROCORTISONE ACE 3-0.5 % KIT	1	
LIDOCAINE-HYDROCORTISONE ACE 3-2.5 % KIT	1	
<i>lidocaine-hydrocortisone acetate rectal gel kit 3-2.5%</i>	1	
<i>lidocaine-hydrocortisone acetate perianal cream 3-0.5%</i>	1	
LIDOCAINE-HYDROCORT (PERIANAL) 3-0.5 % CREAM	1	
LIDOCORT 3-0.5 % CREAM	1	
RECTAL PRODUCTS - MISC.		
BARRIGEL 20 MG/ML GEL	3	
RECTAL STEROIDS		
ANUCORT-HC 25 MG SUPPOS	1	
ANUSOL-HC 25 MG SUPPOS	1	
HEMMOREX-HC 25 MG SUPPOS	1	
HEMMOREX-HC 30 MG SUPPOS	1	
HYDROCORTISONE ACETATE 25 MG SUPPOS	1	
<i>hydrocortisone acetate suppos 25 mg</i>	1	
HYDROCORTISONE ACETATE 30 MG SUPPOS	1	
<i>hydrocortisone acetate suppos 30 mg</i>	1	
PROCTOCORT 30 MG SUPPOS	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANUSOL-HC 2.5 % CREAM	3	
HYDROCORTISONE (PERIANAL) 1 % CREAM	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
PROCTOCORT 1 % CREAM	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
<i>hydrocortisone perianal cream 2.5%</i>	1	
ANTHELMINTICS		
<i>albendazole tab 200 mg</i>	1	
BENZNIDAZOLE 100 MG TAB	3	
BENZNIDAZOLE 12.5 MG TAB	3	
<i>ivermectin tab 3 mg</i>	1	
IVERMECTIN 6 MG TAB	3	
<i>praziquantel tab 600 mg</i>	1	
EGATEN 250 MG TAB	3	
ANTI-INFECTIVE AGENTS - MISC.		
BACITRACIN 50000 UNIT RECON SOLN	4	EX Plan Exclusion
<i>bacitracin intramuscular for soln 50000 unit</i>	4	EX Plan Exclusion
METRONIDAZOLE 125 MG TAB	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole tab 250 mg</i>	1	
<i>metronidazole cap 375 mg</i>	1	
<i>metronidazole cap 375 mg</i>	1	
METRONIDAZOLE 500 MG/100ML SOLUTION	4	EX Plan Exclusion
<i>metronidazole iv soln 500 mg/100ml</i>	4	EX Plan Exclusion
<i>metronidazole tab 500 mg</i>	1	
<i>metronidazole tab 500 mg</i>	1	
FIRST-METRONIDAZOLE 50 MG/ML RECON SUSP	3	
METRONIDAZOLE BENZO+SYRSPEND 50 MG/ML RECON SUSP	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENTAM 300 MG RECON SOLN	4	EX Plan Exclusion
<i>pentamidine isethionate for inj soln 300 mg</i>	4	EX Plan Exclusion
<i>pentamidine isethionate for nebulization soln 300 mg</i>	1	
<i>pentamidine isethionate for soln 300 mg</i>	4	EX Plan Exclusion
AEMCOLO 194 MG TAB DR	3	PA
XIFAXAN 200 MG TAB	2	PA
XIFAXAN 550 MG TAB	2	PA
<i>tinidazole tab 250 mg</i>	1	
<i>tinidazole tab 500 mg</i>	1	
TRIMETHOPRIM 100 MG TAB	1	
<i>trimethoprim tab 100 mg</i>	1	
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	4	EX Plan Exclusion
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	1	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	1	
ANTIPROTOZOAL AGENTS		
<i>atovaquone susp 750 mg/5ml</i>	1	
<i>nitazoxanide tab 500 mg</i>	1	
BETA-LACTAMASE INHIBITOR - COMBINATIONS		
XACDURO 1-1 GM RECON SOLN	4	EX Plan Exclusion
CARBAPENEM COMBINATIONS		
IMIPENEM-CILASTATIN 250 MG RECON SOLN	4	EX Plan Exclusion
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRIMAXIN IV 500-500 MG RECON SOLN	4	EX Plan Exclusion
RECARBRIO 1.25 GM RECON SOLN	4	EX Plan Exclusion
VABOMERE 2 (1-1) GM RECON SOLN	4	EX Plan Exclusion
CARBAPENEMS		
<i>ertapenem sodium for inj 1 gm (base equivalent)</i>	4	EX Plan Exclusion
INVANZ 1 GM RECON SOLN	4	EX Plan Exclusion
<i>meropenem iv for soln 1 gm</i>	4	EX Plan Exclusion
MEROPENEM 2 GM RECON SOLN	4	EX Plan Exclusion
<i>meropenem iv for soln 2 gm</i>	4	EX Plan Exclusion
<i>meropenem iv for soln 500 mg</i>	4	EX Plan Exclusion
MEROPENEM-SODIUM CHLORIDE 1 GM/50ML RECON SOLN	4	EX Plan Exclusion
MEROPENEM-SODIUM CHLORIDE 500 MG/50ML RECON SOLN	4	EX Plan Exclusion
CHLORAMPHENICALS		
CHLORAMPHENICOL SOD SUCCINATE 1 GM RECON SOLN	4	EX Plan Exclusion
CYCLIC LIPOPEPTIDES		
CUBICIN 500 MG RECON SOLN	4	EX Plan Exclusion
CUBICIN RF 500 MG RECON SOLN	4	EX Plan Exclusion
DAPTOMYCIN 350 MG RECON SOLN	4	EX Plan Exclusion
<i>daptomycin for iv soln 350 mg</i>	4	EX Plan Exclusion
DAPTOMYCIN 500 MG RECON SOLN	4	EX Plan Exclusion
<i>daptomycin for iv soln 500 mg</i>	4	EX Plan Exclusion
DAPTOMYCIN-SODIUM CHLORIDE 1000-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
DAPTOMYCIN-SODIUM CHLORIDE 350-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
DAPTOMYCIN-SODIUM CHLORIDE 500-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DAPTOMYCIN-SODIUM CHLORIDE 700-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
GLYCOPEPTIDES		
DALVANCE 500 MG RECON SOLN	4	EX Plan Exclusion
KIMYRSA 1200 MG RECON SOLN	4	EX Plan Exclusion
ORBACTIV 400 MG RECON SOLN	4	EX Plan Exclusion
VIBATIV 750 MG RECON SOLN	4	EX Plan Exclusion
VANCOMYCIN HCL 1000 MG/200ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 100 GM RECON SOLN	4	EX Plan Exclusion
VANCOMYCIN HCL 10 GM RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 10 gm (base equivalent)</i>	4	EX Plan Exclusion
VANCOMYCIN HCL 1250 MG/250ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 1.25 GM RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 1.25 gm (base equivalent)</i>	4	EX Plan Exclusion
<i>vancomycin hcl cap 125 mg (base equivalent)</i>	1	
VANCOMYCIN HCL 1500 MG/300ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 1.5 GM RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 1.5 gm (base equivalent)</i>	4	EX Plan Exclusion
VANCOMYCIN HCL 1750 MG/350ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 1.75 GM RECON SOLN	4	EX Plan Exclusion
VANCOMYCIN HCL 1 GM RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 1 gm (base equivalent)</i>	4	EX Plan Exclusion
VANCOMYCIN HCL 2000 MG/400ML SOLUTION	4	EX Plan Exclusion
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	1	
<i>vancomycin hcl cap 250 mg (base equivalent)</i>	1	
VANCOMYCIN HCL 250 MG RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for oral soln 25 mg/ml (base equivalent)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANCOMYCIN HCL 2 GM RECON SOLN	4	EX Plan Exclusion
VANCOMYCIN HCL 500 MG/100ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 500 MG RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 500 mg (base equivalent)</i>	4	EX Plan Exclusion
<i>vancomycin hcl for oral soln 50 mg/ml (base equivalent)</i>	1	
VANCOMYCIN HCL 5 GM RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 5 gm (base equivalent)</i>	4	EX Plan Exclusion
VANCOMYCIN HCL 750 MG/150ML SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL 750 MG RECON SOLN	4	EX Plan Exclusion
<i>vancomycin hcl for iv soln 750 mg (base equivalent)</i>	4	EX Plan Exclusion
VANCOMYCIN+SYRSPEND SF 50 MG/ML SUSPENSION	3	
VANCOMYCIN HCL IN DEXTROSE 1.25-5 GM/250ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN DEXTROSE 1.5-5 GM/250ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN DEXTROSE 1.5-5 GM/300ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN DEXTROSE 1-5 GM/200ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN DEXTROSE 500-5 MG/100ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN DEXTROSE 750-5 MG/150ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1-0.9 GM/200ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1-0.9 GM/250ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1.25-0.9 GM/250ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1.5-0.9 GM/250ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1.5-0.9 GM/500ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 1.75-0.9 GM/250ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VANCOMYCIN HCL IN NAACL 1.75-0.9 GM/500ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 2-0.9 GM/500ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 500-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 750-0.9 MG/150ML-% SOLUTION	4	EX Plan Exclusion
VANCOMYCIN HCL IN NAACL 750-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
LEPROSTATICS		
<i>dapsone tab 100 mg</i>	1	
<i>dapsone tab 25 mg</i>	1	
LINCOSAMIDES		
<i>clindamycin hcl cap 150 mg</i>	1	
<i>clindamycin hcl cap 300 mg</i>	1	
<i>clindamycin hcl cap 75 mg</i>	1	
<i>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</i>	1	
CLEOCIN PHOSPHATE 300 MG/2ML SOLUTION	4	EX Plan Exclusion
CLEOCIN PHOSPHATE 600 MG/4ML SOLUTION	4	EX Plan Exclusion
CLEOCIN PHOSPHATE 900 MG/6ML SOLUTION	4	EX Plan Exclusion
CLEOCIN PHOSPHATE 9 GM/60ML SOLUTION	4	EX Plan Exclusion
<i>clindamycin phosphate inj 300 mg/2ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate inj 600 mg/4ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate inj 9 gm/60ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate inj 900 mg/6ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate inj 9 gm/60ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i>	4	EX Plan Exclusion
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLINDAMYCIN PHOSPHATE IN NAACL 300-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
CLINDAMYCIN PHOSPHATE IN NAACL 600-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
CLINDAMYCIN PHOSPHATE IN NAACL 900-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
LINCOCIN 300 MG/ML SOLUTION	4	EX Plan Exclusion
<i>lincomycin hcl inj 300 mg/ml</i>	4	EX Plan Exclusion
MONOBACTAM COMBINATIONS		
EMBLAVEO 1.5-0.5 GM RECON SOLN	4	EX Plan Exclusion
MONOBACTAMS		
AZACTAM 1 GM RECON SOLN	4	EX Plan Exclusion
AZACTAM 2 GM RECON SOLN	4	EX Plan Exclusion
<i>aztreonam for inj 1 gm</i>	4	EX Plan Exclusion
<i>aztreonam for inj 2 gm</i>	4	EX Plan Exclusion
CAYSTON 75 MG RECON SOLN	3	PA S
OXAZOLIDINONES		
<i>linezolid for susp 100 mg/5ml</i>	1	
<i>linezolid iv soln 600 mg/300ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>linezolid tab 600 mg</i>	1	
ZYVOX 200 MG/100ML SOLUTION	4	EX Plan Exclusion
ZYVOX 600 MG/300ML SOLUTION	4	EX Plan Exclusion
LINEZOLID IN SODIUM CHLORIDE 600-0.9 MG/300ML-% SOLUTION	4	EX Plan Exclusion
SIVEXTRO 200 MG RECON SOLN	4	EX Plan Exclusion
SIVEXTRO 200 MG TAB	3	PA
PLEUROMUTILINS		
XENLETA 150 MG/15ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XENLETA 600 MG TAB	3	PA
POLYMYXINS		
<i>colistimethate sod for inj 150 mg (colistin base activity)</i>	4	EX Plan Exclusion
COLY-MYCIN M 150 MG RECON SOLN	4	EX Plan Exclusion
<i>polymyxin b sulfate for inj 500000 unit</i>	4	EX Plan Exclusion
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine powd pack 3 gm (base equivalent)</i>	1	
<i>methenamine hippurate tab 1 gm</i>	1	
METHENAMINE MANDELATE 0.5 GM TAB	1	
<i>methenamine mandelate tab 0.5 gm</i>	1	
METHENAMINE MANDELATE 1 GM TAB	1	
<i>methenamine mandelate tab 1 gm</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	
<i>nitrofurantoin susp 25 mg/5ml</i>	1	
<i>nitrofurantoin macrocrystalline cap 100 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 25 mg</i>	1	
<i>nitrofurantoin macrocrystalline cap 50 mg</i>	1	
<i>nitrofurantoin monohydrate macrocrystalline cap 100 mg</i>	1	
URINARY ANTISEPTIC-ANTISPASMODIC &/OR ANALGESICS		
MB CAPS 120 MG CAP	1	
<i>*methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg***</i>	1	
URELLE 81 MG TAB	1	
<i>*methenamine-hyosc-meth blue-sod phos-phen sal cap 118 mg***</i>	1	
URIMAR-T 120 MG CAP	1	
<i>*methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg***</i>	1	
URNEVA 120 MG CAP	1	
<i>*methenamine-hyosc-meth blue-sod phos-phen sal tab 81 mg***</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
URO-MP 118 MG CAP	1	
<i>*methenamine-hyosc-meth blue-sod phos-phen sal cap 118 mg***</i>	1	
<i>*methenamine-hyosc-meth blue-sod phos-phen sal cap 120 mg***</i>	1	
<i>*methenamine-hyos-meth blue-sod phos-phen sal tab 81.6 mg***</i>	1	
VILAMIT MB 118 MG CAP	1	
VILEVEV MB 81 MG TAB	1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine tab er 12hr 1000 mg</i>	1	
<i>ranolazine tab er 12hr 500 mg</i>	1	
NITRATES		
ISORDIL TITRADOSE 40 MG TAB	3	
ISORDIL TITRADOSE 5 MG TAB	3	
<i>isosorbide dinitrate tab 10 mg</i>	1	
<i>isosorbide dinitrate tab 20 mg</i>	1	
<i>isosorbide dinitrate tab 30 mg</i>	1	
<i>isosorbide dinitrate tab 40 mg</i>	1	
<i>isosorbide dinitrate tab 5 mg</i>	1	
ISOSORBIDE MONONITRATE 10 MG TAB	1	
<i>isosorbide mononitrate tab 10 mg</i>	1	
ISOSORBIDE MONONITRATE 20 MG TAB	1	
<i>isosorbide mononitrate tab 20 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 120 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 30 mg</i>	1	
<i>isosorbide mononitrate tab er 24hr 60 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
NITRO-BID 2 % OINTMENT	1	
<i>nitroglycerin td patch 24hr 0.1 mg/hr</i>	1	
<i>nitroglycerin td patch 24hr 0.2 mg/hr</i>	1	
<i>nitroglycerin sl tab 0.3 mg</i>	1	
<i>nitroglycerin td patch 24hr 0.4 mg/hr</i>	1	
<i>nitroglycerin sl tab 0.4 mg</i>	1	
<i>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</i>	2	
<i>nitroglycerin td patch 24hr 0.6 mg/hr</i>	1	
<i>nitroglycerin sl tab 0.6 mg</i>	1	
NITROGLYCERIN 5 MG/ML SOLUTION	4	EX Plan Exclusion
NITRO-TIME 2.5 MG CAP ER	1	
NITRO-TIME 6.5 MG CAP ER	1	
NITRO-TIME 9 MG CAP ER	1	
NITROGLYCERIN IN D5W 100-5 MCG/ML-% SOLUTION	4	EX Plan Exclusion
NITROGLYCERIN IN D5W 200-5 MCG/ML-% SOLUTION	4	EX Plan Exclusion
NITROGLYCERIN IN D5W 400-5 MCG/ML-% SOLUTION	4	EX Plan Exclusion
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
<i>bupirone hcl tab 10 mg</i>	1	
<i>bupirone hcl tab 10 mg</i>	1	
<i>bupirone hcl tab 15 mg</i>	1	
<i>bupirone hcl tab 15 mg</i>	1	
<i>bupirone hcl tab 30 mg</i>	1	
<i>bupirone hcl tab 30 mg</i>	1	
<i>bupirone hcl tab 5 mg</i>	1	
<i>bupirone hcl tab 5 mg</i>	1	
<i>bupirone hcl tab 7.5 mg</i>	1	
<i>bupirone hcl tab 7.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPERIDOL 0.625 MG/ML SOLN PRSYR	4	EX Plan Exclusion
<i>droperidol inj 2.5 mg/ml</i>	4	EX Plan Exclusion
<i>droperidol inj 2.5 mg/ml</i>	4	EX Plan Exclusion
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
<i>hydroxyzine hcl tab 10 mg</i>	1	
HYDROXYZINE HCL 25 MG/ML SOLUTION	1	
HYDROXYZINE HCL 25 MG/ML SOLUTION	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
<i>hydroxyzine hcl tab 25 mg</i>	1	
HYDROXYZINE HCL 50 MG/ML SOLUTION	1	
HYDROXYZINE HCL 50 MG/ML SOLUTION	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	
<i>hydroxyzine hcl tab 50 mg</i>	1	
HYDROXYZINE PAMOATE 100 MG CAP	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 25 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>hydroxyzine pamoate cap 50 mg</i>	1	
<i>meprobamate tab 200 mg</i>	1	
<i>meprobamate tab 400 mg</i>	1	
BENZODIAZEPINES		
<i>alprazolam tab 0.25 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.25 mg</i>	1	
<i>alprazolam tab 0.5 mg</i>	1	
<i>alprazolam orally disintegrating tab 0.5 mg</i>	1	
<i>alprazolam tab 1 mg</i>	1	
<i>alprazolam orally disintegrating tab 1 mg</i>	1	
<i>alprazolam tab 2 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>alprazolam orally disintegrating tab 2 mg</i>	1	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
ALPRAZOLAM INTENSOL 1 MG/ML CONC	3	
<i>alprazolam tab er 24hr 0.5 mg</i>	1	
<i>alprazolam tab er 24hr 1 mg</i>	1	
<i>alprazolam tab er 24hr 2 mg</i>	1	
<i>alprazolam tab er 24hr 3 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 10 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>chlordiazepoxide hcl cap 25 mg</i>	1	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>chlordiazepoxide hcl cap 5 mg</i>	1	
<i>clorazepate dipotassium tab 15 mg</i>	1	
<i>clorazepate dipotassium tab 3.75 mg</i>	1	
<i>clorazepate dipotassium tab 7.5 mg</i>	1	
DIAZEPAM 10 MG/2ML SOLN A-INJ	4	EX Plan Exclusion
<i>diazepam inj 5 mg/ml</i>	1	
<i>diazepam tab 10 mg</i>	1	
<i>diazepam tab 10 mg</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam tab 2 mg</i>	1	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam oral soln 1 mg/ml</i>	1	
<i>diazepam conc 5 mg/ml</i>	1	
<i>diazepam conc 5 mg/ml</i>	1	
<i>diazepam inj 5 mg/ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIAZEPAM 5 MG/ML SOLUTION	1	
<i>diazepam inj 5 mg/ml</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam tab 5 mg</i>	1	
<i>diazepam conc 5 mg/ml</i>	1	
ATIVAN 2 MG/ML SOLUTION	4	EX Plan Exclusion
ATIVAN 4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>lorazepam tab 0.5 mg</i>	1	
<i>lorazepam tab 1 mg</i>	1	
<i>lorazepam conc 2 mg/ml</i>	1	
<i>lorazepam inj 2 mg/ml</i>	4	EX Plan Exclusion
<i>lorazepam tab 2 mg</i>	1	
<i>lorazepam inj 4 mg/ml</i>	4	EX Plan Exclusion
<i>lorazepam conc 2 mg/ml</i>	1	
<i>oxazepam cap 10 mg</i>	1	
<i>oxazepam cap 15 mg</i>	1	
<i>oxazepam cap 30 mg</i>	1	
ANTIARRHYTHMICS		
ANTIARRHYTHMICS - MISC.		
<i>adenosine iv soln 12 mg/4ml</i>	4	EX Plan Exclusion
<i>adenosine iv soln 6 mg/2ml</i>	4	EX Plan Exclusion
ANTIARRHYTHMICS TYPE I-A		
<i>disopyramide phosphate cap 100 mg</i>	1	
<i>disopyramide phosphate cap 150 mg</i>	1	
<i>procainamide hcl inj 100 mg/ml</i>	4	EX Plan Exclusion
<i>procainamide hcl inj 500 mg/ml</i>	4	EX Plan Exclusion
<i>quinidine gluconate tab er 324 mg</i>	1	
<i>quinidine gluconate tab er 324 mg</i>	1	
QUINIDINE SULFATE 200 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUINIDINE SULFATE 300 MG TAB	1	
<i>quinidine sulfate tab 300 mg</i>	1	
ANTIARRHYTHMICS TYPE I-B		
LIDOCAINE HCL (CARDIAC) 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) 100 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) 200 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) 60 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) PF 100 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) PF 100 MG/5ML SOLUTION	4	EX Plan Exclusion
LIDOCAINE HCL (CARDIAC) PF 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE IN D5W 2-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
<i>lidocaine iv infusion in d5w inj 4 mg/ml</i>	4	EX Plan Exclusion
<i>lidocaine iv infusion in d5w inj 8 mg/ml</i>	4	EX Plan Exclusion
<i>mexiletine hcl cap 150 mg</i>	1	
<i>mexiletine hcl cap 200 mg</i>	1	
<i>mexiletine hcl cap 250 mg</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate tab 100 mg</i>	1	
<i>flecainide acetate tab 150 mg</i>	1	
<i>flecainide acetate tab 50 mg</i>	1	
<i>propafenone hcl tab 150 mg</i>	1	
<i>propafenone hcl tab 225 mg</i>	1	
<i>propafenone hcl tab 300 mg</i>	1	
<i>propafenone hcl cap er 12hr 225 mg</i>	1	
<i>propafenone hcl cap er 12hr 325 mg</i>	1	
<i>propafenone hcl cap er 12hr 425 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	4	EX Plan Exclusion
<i>amiodarone hcl inj 150 mg/3ml (50 mg/ml)</i>	4	EX Plan Exclusion
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
<i>amiodarone hcl inj 450 mg/9ml (50 mg/ml)</i>	4	EX Plan Exclusion
<i>amiodarone hcl inj 900 mg/18ml (50 mg/ml)</i>	4	EX Plan Exclusion
<i>amiodarone hcl tab 100 mg</i>	1	
<i>amiodarone hcl tab 200 mg</i>	1	
<i>amiodarone hcl tab 400 mg</i>	1	
AMIODARONE HCL IN DEXTROSE 450-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
AMIODARONE HCL IN DEXTROSE 900-5 MG/500ML-% SOLUTION	4	EX Plan Exclusion
NEXTERONE 150-4.21 MG/100ML-% SOLUTION	4	EX Plan Exclusion
NEXTERONE 360-4.14 MG/200ML-% SOLUTION	4	EX Plan Exclusion
<i>dofetilide cap 125 mcg (0.125 mg)</i>	1	
<i>dofetilide cap 250 mcg (0.25 mg)</i>	1	
<i>dofetilide cap 500 mcg (0.5 mg)</i>	1	
MULTAQ 400 MG TAB	2	
CORVERT 1 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>ibutilide fumarate inj 1 mg/10ml</i>	4	EX Plan Exclusion
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
5-LIPOXYGENASE INHIBITORS		
<i>zileuton tab er 12hr 600 mg</i>	1	
ADRENERGIC COMBINATIONS		
AIRSUPRA 90-80 MCG/ACT AEROSOL	2	
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	1	
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	1	
SYMBICORT 160-4.5 MCG/ACT AEROSOL	2	
SYMBICORT 80-4.5 MCG/ACT AEROSOL	2	
BREZTRI AEROSPHERE 160-9-4.8 MCG/ACT AEROSOL	2	
BREO ELLIPTA 100-25 MCG/ACT AER POW BA	2	
BREO ELLIPTA 200-25 MCG/ACT AER POW BA	2	
BREO ELLIPTA 50-25 MCG/INH AER POW BA	2	
FLUTICASONE FUROATE-VILANTEROL 100-25 MCG/ACT AER POW BA	1	
FLUTICASONE FUROATE-VILANTEROL 200-25 MCG/ACT AER POW BA	1	
ADVAIR DISKUS 100-50 MCG/ACT AER POW BA	2	
ADVAIR DISKUS 250-50 MCG/ACT AER POW BA	2	
ADVAIR DISKUS 500-50 MCG/ACT AER POW BA	2	
ADVAIR HFA 115-21 MCG/ACT AEROSOL	2	
ADVAIR HFA 230-21 MCG/ACT AEROSOL	2	
ADVAIR HFA 45-21 MCG/ACT AEROSOL	2	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	
FLUTICASONE-SALMETEROL 113-14 MCG/ACT AER POW BA	1	
FLUTICASONE-SALMETEROL 115-21 MCG/ACT AEROSOL	1	
FLUTICASONE-SALMETEROL 230-21 MCG/ACT AEROSOL	1	
FLUTICASONE-SALMETEROL 232-14 MCG/ACT AER POW BA	1	
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	
FLUTICASONE-SALMETEROL 45-21 MCG/ACT AEROSOL	1	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	
FLUTICASONE-SALMETEROL 55-14 MCG/ACT AER POW BA	1	
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	
TRELEGY ELLIPTA 100-62.5-25 MCG/ACT AER POW BA	2	
TRELEGY ELLIPTA 200-62.5-25 MCG/ACT AER POW BA	2	
COMBIVENT RESPIMAT 20-100 MCG/ACT AERO SOLN	2	
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	
DULERA 100-5 MCG/ACT AEROSOL	2	
DULERA 200-5 MCG/ACT AEROSOL	2	
DULERA 50-5 MCG/ACT AEROSOL	2	
STIOLTO RESPIMAT 2.5-2.5 MCG/ACT AERO SOLN	2	
ANORO ELLIPTA 62.5-25 MCG/ACT AER POW BA	2	
UMECLIDINIUM-VILANTEROL 62.5-25 MCG/ACT AER POW BA	1	
ANTI-IGE MONOCLONAL ANTIBODIES		
XOLAIR 150 MG/ML SOLN A-INJ	2	PA S
XOLAIR 150 MG/ML SOLN PRSYR	2	PA S
XOLAIR 150 MG RECON SOLN	2	PA S
XOLAIR 300 MG/2ML SOLN A-INJ	2	PA S
XOLAIR 300 MG/2ML SOLN PRSYR	2	PA S
XOLAIR 75 MG/0.5ML SOLN A-INJ	2	PA S
XOLAIR 75 MG/0.5ML SOLN PRSYR	2	PA S
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium soln nebu 20 mg/2ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BETA ADRENERGICS		
<i>albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)</i>	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
<i>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)</i>	1	
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
<i>albuterol sulfate tab 2 mg</i>	1	
<i>albuterol sulfate tab 4 mg</i>	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
ALBUTEROL SULFATE (5 MG/ML) 0.5% NEBU SOLN	1	
<i>albuterol sulfate soln nebu 0.5% (5 mg/ml)</i>	1	
<i>albuterol sulfate syrup 2 mg/5ml</i>	1	
ALBUTEROL SULFATE HFA 108 (90 BASE) MCG/ACT AERO SOLN	1	
<i>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)</i>	1	
VENTOLIN HFA 108 (90 BASE) MCG/ACT AERO SOLN	1	
<i>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)</i>	1	
<i>formoterol fumarate soln nebu 20 mcg/2ml</i>	1	
<i>isoproterenol hcl inj 0.2 mg/ml</i>	4	EX Plan Exclusion
ISUPREL 0.2 MG/ML SOLUTION	4	EX Plan Exclusion
ISOPROTERENOL-SODIUM CHLORIDE 200-0.9 MCG/50ML-% SOLUTION	4	EX Plan Exclusion
<i>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</i>	1	
<i>levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)</i>	1	
LEVALBUTEROL TARTRATE 45 MCG/ACT AEROSOL	1	
STRIVERDI RESPIMAT 2.5 MCG/ACT AERO SOLN	2	
SEREVENT DISKUS 50 MCG/ACT AER POW BA	2	
<i>terbutaline sulfate inj 1 mg/ml</i>	1	
<i>terbutaline sulfate tab 2.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>terbutaline sulfate tab 5 mg</i>	1	
BRONCHODILATORS - ANTICHOLINERGICS		
TUDORZA PRESSAIR 400 MCG/ACT AER POW BA	3	
<i>ipratropium bromide inhal soln 0.02%</i>	1	
ATROVENT HFA 17 MCG/ACT AERO SOLN	2	
YUPELRI 175 MCG/3ML SOLUTION	2	
SPIRIVA HANDIHALER 18 MCG CAP	2	
SPIRIVA RESPIMAT 1.25 MCG/ACT AERO SOLN	2	
SPIRIVA RESPIMAT 2.5 MCG/ACT AERO SOLN	2	
<i>tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)</i>	1	
INCRUSE ELLIPTA 62.5 MCG/ACT AER POW BA	2	
INTERLEUKIN-5 ANTAGONISTS (IGG1 KAPPA)		
FASENRA 10 MG/0.5ML SOLN PRSYR	3	PA S
FASENRA 30 MG/ML SOLN PRSYR	3	PA S
FASENRA PEN 30 MG/ML SOLN A-INJ	3	PA S
NUCALA 100 MG/ML SOLN A-INJ	2	PA S
NUCALA 100 MG/ML SOLN PRSYR	2	PA S
NUCALA 100 MG RECON SOLN	2	PA S
NUCALA 40 MG/0.4ML SOLN PRSYR	2	PA S
INTERLEUKIN-5 ANTAGONISTS (IGG4 KAPPA)		
CINQAIR 100 MG/10ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEUKOTRIENE RECEPTOR ANTAGONISTS		
<i>montelukast sodium tab 10 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 4 mg (base equiv)</i>	1	
<i>montelukast sodium oral granules packet 4 mg (base equiv)</i>	1	
<i>montelukast sodium chew tab 5 mg (base equiv)</i>	1	
<i>zafirlukast tab 10 mg</i>	1	
<i>zafirlukast tab 20 mg</i>	1	
PHOSPHODIESTERASE 3 & 4 (PDE3 & PDE4) INHIBITORS		
OHTUVAYRE 3 MG/2.5ML SUSPENSION	3	PA S
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
DALIRESP 250 MCG TAB	3	
DALIRESP 500 MCG TAB	3	
<i>roflumilast tab 250 mcg</i>	1	
<i>roflumilast tab 500 mcg</i>	1	
STEROID INHALANTS		
QVAR REDIHALER 40 MCG/ACT AERO BA	2	
QVAR REDIHALER 80 MCG/ACT AERO BA	2	
<i>budesonide inhalation susp 0.25 mg/2ml</i>	1	
<i>budesonide inhalation susp 0.5 mg/2ml</i>	1	
<i>budesonide inhalation susp 1 mg/2ml</i>	1	
PULMICORT FLEXHALER 180 MCG/ACT AER POW BA	2	
PULMICORT FLEXHALER 90 MCG/ACT AER POW BA	2	
ALVESCO 160 MCG/ACT AERO SOLN	3	
ALVESCO 80 MCG/ACT AERO SOLN	3	
ARNUITY ELLIPTA 100 MCG/ACT AER POW BA	2	
ARNUITY ELLIPTA 200 MCG/ACT AER POW BA	2	
ARNUITY ELLIPTA 50 MCG/ACT AER POW BA	2	
FLOVENT HFA 110 MCG/ACT AEROSOL	2	
FLOVENT HFA 220 MCG/ACT AEROSOL	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLOVENT HFA 44 MCG/ACT AEROSOL	2	
FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL	1	
FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL	1	
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	1	
FLOVENT DISKUS 100 MCG/ACT AER POW BA	2	
FLOVENT DISKUS 250 MCG/ACT AER POW BA	2	
FLOVENT DISKUS 50 MCG/ACT AER POW BA	2	
FLUTICASONE PROPIONATE DISKUS 100 MCG/ACT AER POW BA	1	
FLUTICASONE PROPIONATE DISKUS 250 MCG/ACT AER POW BA	1	
FLUTICASONE PROPIONATE DISKUS 50 MCG/ACT AER POW BA	1	
ASMANEX (120 METERED DOSES) 220 MCG/ACT AER POW BA	2	
ASMANEX (14 METERED DOSES) 220 MCG/ACT AER POW BA	2	
ASMANEX (30 METERED DOSES) 110 MCG/ACT AER POW BA	2	
ASMANEX (30 METERED DOSES) 220 MCG/ACT AER POW BA	2	
ASMANEX (60 METERED DOSES) 220 MCG/ACT AER POW BA	2	
ASMANEX (7 METERED DOSES) 110 MCG/ACT AER POW BA	2	
ASMANEX HFA 100 MCG/ACT AEROSOL	2	
ASMANEX HFA 200 MCG/ACT AEROSOL	2	
ASMANEX HFA 50 MCG/ACT AEROSOL	2	
THYMIC STROMAL LYMPHOPOIETIN (TSLP) ANTAGONISTS		
TEZSPIRE 210 MG/1.91ML SOLN A-INJ	3	PA S
TEZSPIRE 210 MG/1.91ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XANTHINES		
AMINOPHYLLINE 25 MG/ML SOLUTION	4	EX Plan Exclusion
<i>theophylline elixir 80 mg/15ml</i>	1	
THEO-24 100 MG CAP ER 24H	3	
THEO-24 200 MG CAP ER 24H	3	
THEO-24 300 MG CAP ER 24H	3	
THEO-24 400 MG CAP ER 24H	3	
<i>theophylline elixir 80 mg/15ml</i>	1	
<i>theophylline soln 80 mg/15ml</i>	1	
THEOPHYLLINE ER 100 MG TAB ER 12H	1	
THEOPHYLLINE ER 200 MG TAB ER 12H	1	
<i>theophylline tab er 12hr 300 mg</i>	1	
<i>theophylline tab er 24hr 400 mg</i>	1	
<i>theophylline tab er 12hr 450 mg</i>	1	
<i>theophylline tab er 24hr 600 mg</i>	1	
ANTICOAGULANTS		
ANTICOAGULANTS - MISC.		
SODIUM CITRATE 4 % SOLN PRSYR	4	EX Plan Exclusion
SODIUM CITRATE LOCK FLUSH 120 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
SODIUM CITRATE LOCK FLUSH 4 % SOLUTION	4	EX Plan Exclusion
COUMARIN ANTICOAGULANTS		
<i>warfarin sodium tab 10 mg</i>	1	
<i>warfarin sodium tab 1 mg</i>	1	
<i>warfarin sodium tab 2.5 mg</i>	1	
<i>warfarin sodium tab 2 mg</i>	1	
<i>warfarin sodium tab 3 mg</i>	1	
<i>warfarin sodium tab 4 mg</i>	1	
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>warfarin sodium tab 7.5 mg</i>	1	
<i>warfarin sodium tab 10 mg</i>	1	
<i>warfarin sodium tab 1 mg</i>	1	
<i>warfarin sodium tab 2.5 mg</i>	1	
<i>warfarin sodium tab 2 mg</i>	1	
<i>warfarin sodium tab 3 mg</i>	1	
<i>warfarin sodium tab 4 mg</i>	1	
<i>warfarin sodium tab 5 mg</i>	1	
<i>warfarin sodium tab 6 mg</i>	1	
<i>warfarin sodium tab 7.5 mg</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS 2.5 MG TAB	2	
ELIQUIS 5 MG TAB	2	
ELIQUIS DVT/PE STARTER PACK 5 MG TAB THPK	2	
SAVAYSA 15 MG TAB	3	
SAVAYSA 30 MG TAB	3	
SAVAYSA 60 MG TAB	3	
<i>rivaroxaban for susp 1 mg/ml</i>	1	
<i>rivaroxaban tab 2.5 mg</i>	1	
XARELTO 10 MG TAB	2	
XARELTO 15 MG TAB	2	
XARELTO 1 MG/ML RECON SUSP	2	
XARELTO 20 MG TAB	2	
XARELTO 2.5 MG TAB	2	
XARELTO STARTER PACK 15 & 20 MG TAB THPK	2	
HEPARINS AND HEPARINOID-LIKE AGENTS		
HEPARIN (PORCINE) IN NAACL 1000-0.9 UT/500ML-% SOLUTION	4	EX Plan Exclusion
<i>heparin sod (porcine)-nacl iv soln 1000 unit/500ml-0.9%</i>	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NAACL 12500-0.45 UT/250ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEPARIN (PORCINE) IN NACL 2000-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion
<i>heparin sod (porcine)-nacl iv soln 2000 unit/l-0.9%</i>	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 20-0.9 UNT/20ML-% SOLN PRSYR	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 25000-0.45 UT/250ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 25000-0.45 UT/500ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 2500-0.9 UT/500ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 30000-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 4000-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 5000-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 5000-0.9 UT/500ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 500-0.9 UT/500ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN (PORCINE) IN NACL 50-0.9 UNT/50ML-% SOLN PRSYR	4	EX Plan Exclusion
<i>heparin sodium (porcine) inj 10000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) inj 20000 unit/ml</i>	1	
HEPARIN SODIUM (PORCINE) 5000 UNIT/0.5ML SOLN PRSYR	4	EX Plan Exclusion
<i>heparin sodium (porcine) inj 5000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 1000 unit/ml</i>	1	
<i>heparin sodium (porcine) pf inj 5000 unit/0.5ml</i>	1	
HEPARIN SODIUM (PORCINE) PF 5000 UNIT/ML SOLUTION	4	EX Plan Exclusion
<i>heparin sodium (porcine) inj 1000 unit/ml</i>	1	
BD HEPARIN POSIFLUSH 100 UNIT/ML SOLUTION	4	EX Plan Exclusion
BD HEPARIN POSIFLUSH 10 UNIT/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEPARIN NA (PORK) LOCK FLSH PF 100 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN NA (PORK) LOCK FLSH PF 10 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN NA (PORK) LOCK FLSH PF 1 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN SOD (PORK) LOCK FLUSH 100 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN SOD (PORK) LOCK FLUSH 10 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN SOD (PORCINE) IN D5W 100 UNIT/ML SOLUTION	4	EX Plan Exclusion
HEPARIN SOD (PORCINE) IN D5W 25000-5 UT/500ML-% SOLUTION	4	EX Plan Exclusion
HEPARIN SOD (PORCINE) IN D5W 40-5 UNIT/ML-% SOLUTION	4	EX Plan Exclusion
HEPMED 100&0.9&2.5-2.5 UT/ML&%&% KIT	4	EX Plan Exclusion
IN VITRO/LOCK ANTICOAGULANT COMBINATIONS		
DEFENCATH 1000-13.5 UNIT-MG/ML SOLUTION	4	EX Plan Exclusion
SODIUM CITRATE-GENTAMICIN SULF 4-320 %-MCG/ML SOLN PRSYR	4	EX Plan Exclusion
SODIUM CITRATE-GENTAMICIN SULF 4-320 %-MCG/ML SOLUTION	4	EX Plan Exclusion
IN VITRO/LOCK ANTICOAGULANTS		
ACD-A NOCLOT-50 0.73-2.45-2.2 GM/100ML SOLUTION	4	EX Plan Exclusion
ACD FORMULA A 0.73-2.45-2.2 GM/100ML SOLUTION	4	EX Plan Exclusion
ANTICOAGULANT SODIUM CITRATE 4 GM/100ML SOLUTION	4	EX Plan Exclusion
ANTICOAGULANT SODIUM CITRATE 4 % SOLUTION	4	EX Plan Exclusion
TRICITRASOL 46.7 % CONC	4	EX Plan Exclusion
LOW MOLECULAR WEIGHT HEPARINS		
FRAGMIN 10000 UNIT/4ML SOLUTION	2	PA
FRAGMIN 10000 UNIT/ML SOLN PRSYR	2	PA
FRAGMIN 12500 UNIT/0.5ML SOLN PRSYR	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FRAGMIN 15000 UNIT/0.6ML SOLN PRSYR	2	PA
FRAGMIN 18000 UNT/0.72ML SOLN PRSYR	2	PA
FRAGMIN 2500 UNIT/0.2ML SOLN PRSYR	2	PA
FRAGMIN 5000 UNIT/0.2ML SOLN PRSYR	2	PA
FRAGMIN 7500 UNIT/0.3ML SOLN PRSYR	2	PA
FRAGMIN 95000 UNIT/3.8ML SOLUTION	2	PA
<i>enoxaparin sodium inj soln pref syr 100 mg/ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 120 mg/0.8ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 150 mg/ml</i>	1	
<i>enoxaparin sodium inj 300 mg/3ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 30 mg/0.3ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 40 mg/0.4ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 60 mg/0.6ml</i>	1	
<i>enoxaparin sodium inj soln pref syr 80 mg/0.8ml</i>	1	
SYNTHETIC HEPARINOID-LIKE AGENTS		
<i>fondaparinux sodium subcutaneous inj 10 mg/0.8ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 5 mg/0.4ml</i>	1	
<i>fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml</i>	1	
THROMBIN INHIBITORS - HIRUDIN TYPE		
ANGIOMAX 250 MG RECON SOLN	4	EX Plan Exclusion
BIVALIRUDIN RTU 250 MG/50ML SOLUTION	4	EX Plan Exclusion
BIVALIRUDIN TRIFLUOROACETATE 250 MG/50ML SOLUTION	4	EX Plan Exclusion
<i>bivalirudin trifluoroacetate for iv soln 250 mg (base equiv)</i>	4	EX Plan Exclusion
THROMBIN INHIBITORS - SELECTIVE DIRECT & REVERSIBLE		
ARGATROBAN 250 MG/2.5ML SOLUTION	4	EX Plan Exclusion
<i>argatroban inj 250 mg/2.5ml (concentrate for iv infusion)</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARGATROBAN 50 MG/50ML SOLUTION	4	EX Plan Exclusion
<i>argatroban iv soln 50 mg/50ml (1 mg/ml)</i>	4	EX Plan Exclusion
ARGATROBAN IN SODIUM CHLORIDE 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
<i>dabigatran etexilate mesylate cap 110 mg (etexilate base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 150 mg (etexilate base eq)</i>	1	
<i>dabigatran etexilate mesylate cap 75 mg (etexilate base eq)</i>	1	
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA 0.5 MG/ML SUSPENSION	2	PA
<i>perampanel tab 10 mg</i>	1	PA
<i>perampanel tab 12 mg</i>	1	PA
<i>perampanel tab 2 mg</i>	1	PA
<i>perampanel tab 4 mg</i>	1	PA
<i>perampanel tab 6 mg</i>	1	PA
<i>perampanel tab 8 mg</i>	1	PA
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam tab 10 mg</i>	1	
<i>clobazam tab 10 mg</i>	1	
<i>clobazam tab 20 mg</i>	1	
<i>clobazam tab 20 mg</i>	1	
<i>clobazam suspension 2.5 mg/ml</i>	1	
<i>clobazam suspension 2.5 mg/ml</i>	1	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.125 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.25 mg</i>	1	
<i>clonazepam tab 0.5 mg</i>	1	
<i>clonazepam tab 0.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	
<i>clonazepam orally disintegrating tab 0.5 mg</i>	1	
<i>clonazepam tab 1 mg</i>	1	
<i>clonazepam tab 1 mg</i>	1	
<i>clonazepam orally disintegrating tab 1 mg</i>	1	
<i>clonazepam orally disintegrating tab 1 mg</i>	1	
<i>clonazepam tab 2 mg</i>	1	
<i>clonazepam tab 2 mg</i>	1	
<i>clonazepam orally disintegrating tab 2 mg</i>	1	
<i>clonazepam orally disintegrating tab 2 mg</i>	1	
DIASTAT ACUDIAL 10 MG GEL	3	
DIASTAT ACUDIAL 20 MG GEL	3	
DIASTAT PEDIATRIC 2.5 MG GEL	3	
<i>diazepam rectal gel delivery system 10 mg</i>	1	
<i>diazepam rectal gel delivery system 10 mg</i>	1	
<i>diazepam rectal gel delivery system 20 mg</i>	1	
<i>diazepam rectal gel delivery system 20 mg</i>	1	
DIAZEPAM 2.5 MG GEL	1	
LIBERVANT 10 MG FILM	3	PA
LIBERVANT 12.5 MG FILM	3	PA
LIBERVANT 15 MG FILM	3	PA
LIBERVANT 5 MG FILM	3	PA
LIBERVANT 7.5 MG FILM	3	PA
ANTICONVULSANTS - MISC.		
BRIVIACT 50 MG/5ML SOLUTION	4	PA EX Plan Exclusion
EPIDIOLEX 100 MG/ML SOLUTION	2	PA S
<i>carbamazepine susp 100 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carbamazepine susp 100 mg/5ml</i>	1	
<i>carbamazepine chew tab 100 mg</i>	1	
<i>carbamazepine susp 100 mg/5ml</i>	1	
CARBAMAZEPINE 200 MG CHEW TAB	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine tab 200 mg</i>	1	
<i>carbamazepine cap er 12hr 100 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	1	
<i>carbamazepine tab er 12hr 100 mg</i>	1	
<i>carbamazepine cap er 12hr 200 mg</i>	1	
<i>carbamazepine cap er 12hr 200 mg</i>	1	
<i>carbamazepine tab er 12hr 200 mg</i>	1	
<i>carbamazepine tab er 12hr 200 mg</i>	1	
<i>carbamazepine cap er 12hr 300 mg</i>	1	
<i>carbamazepine tab er 12hr 400 mg</i>	1	
<i>carbamazepine tab er 12hr 400 mg</i>	1	
CARBATROL 100 MG CAP ER 12H	2	
CARBATROL 200 MG CAP ER 12H	2	
CARBATROL 300 MG CAP ER 12H	2	
<i>carbamazepine tab 200 mg</i>	1	
<i>eslicarbazepine acetate tab 200 mg</i>	1	
<i>eslicarbazepine acetate tab 400 mg</i>	1	
<i>eslicarbazepine acetate tab 600 mg</i>	1	
<i>eslicarbazepine acetate tab 800 mg</i>	1	
<i>gabapentin cap 100 mg</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin oral soln 250 mg/5ml</i>	1	
<i>gabapentin cap 300 mg</i>	1	
<i>gabapentin cap 400 mg</i>	1	
<i>gabapentin tab 600 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>gabapentin tab 800 mg</i>	1	
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide tab 100 mg</i>	1	
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide tab 150 mg</i>	1	
<i>lacosamide iv inj 200 mg/20ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>lacosamide tab 200 mg</i>	1	
<i>lacosamide oral solution 10 mg/ml</i>	1	
<i>lacosamide tab 50 mg</i>	1	
MOTPOLY XR 100 MG CAP ER 24H	3	PA
MOTPOLY XR 150 MG CAP ER 24H	3	PA
MOTPOLY XR 200 MG CAP ER 24H	3	PA
VIMPAT 200 MG/20ML SOLUTION	4	EX Plan Exclusion
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	PA
<i>lamotrigine orally disintegrating tab 100 mg</i>	2	PA
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	PA
<i>lamotrigine orally disintegrating tab 200 mg</i>	2	PA
<i>lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit</i>	1	
<i>lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab chewable dispersible 25 mg</i>	1	
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	PA
<i>lamotrigine orally disintegrating tab 25 mg</i>	2	PA
<i>lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit</i>	1	
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	PA
<i>lamotrigine orally disintegrating tab 50 mg</i>	2	PA
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab chewable dispersible 5 mg</i>	1	
<i>lamotrigine tab er 24hr 100 mg</i>	1	
<i>lamotrigine tab er 24hr 100 mg</i>	1	
<i>lamotrigine tab er 24hr 200 mg</i>	1	
<i>lamotrigine tab er 24hr 200 mg</i>	1	
<i>lamotrigine tab er 24hr 250 mg</i>	1	
<i>lamotrigine tab er 24hr 250 mg</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	1	
<i>lamotrigine tab er 24hr 25 mg</i>	1	
<i>lamotrigine tab er 24hr 300 mg</i>	1	
<i>lamotrigine tab er 24hr 300 mg</i>	1	
<i>lamotrigine tab er 24hr 50 mg</i>	1	
<i>lamotrigine tab er 24hr 50 mg</i>	1	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	1	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1	
<i>lamotrigine tab 100 mg</i>	1	
<i>lamotrigine tab 150 mg</i>	1	
<i>lamotrigine tab 200 mg</i>	1	
<i>lamotrigine tab 25 mg</i>	1	
<i>lamotrigine tab 35 x 25 mg starter kit</i>	1	
<i>lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit</i>	1	
<i>lamotrigine tab 25 mg (42) & 100 mg (7) starter kit</i>	1	
KEPPRA 500 MG/5ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam tab 1000 mg</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam oral soln 100 mg/ml</i>	1	
LEVETIRACETAM 250 MG TAB	2	PA
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam tab 250 mg</i>	1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	4	EX Plan Exclusion
<i>levetiracetam oral soln 100 mg/ml</i>	1	
<i>levetiracetam inj 500 mg/5ml (100 mg/ml)</i>	4	EX Plan Exclusion
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab 750 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 500 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
<i>levetiracetam tab er 24hr 750 mg</i>	1	
<i>levetiracetam tab 500 mg</i>	1	
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	4	EX Plan Exclusion
LEVETIRACETAM IN NAACL 1000 MG/100ML SOLUTION	4	EX Plan Exclusion
<i>levetiracetam in sodium chloride iv soln 1000 mg/100ml</i>	4	EX Plan Exclusion
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	4	EX Plan Exclusion
LEVETIRACETAM IN NAACL 1500 MG/100ML SOLUTION	4	EX Plan Exclusion
<i>levetiracetam in sodium chloride iv soln 1500 mg/100ml</i>	4	EX Plan Exclusion
LEVETIRACETAM IN NAACL 250 MG/50ML SOLUTION	4	EX Plan Exclusion
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	4	EX Plan Exclusion
LEVETIRACETAM IN NAACL 500 MG/100ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levetiracetam in sodium chloride iv soln 500 mg/100ml</i>	4	EX Plan Exclusion
<i>oxcarbazepine tab 150 mg</i>	1	
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</i>	1	
<i>oxcarbazepine tab 300 mg</i>	1	
<i>oxcarbazepine tab 600 mg</i>	1	
<i>oxcarbazepine tab er 24hr 150 mg</i>	2	PA
<i>oxcarbazepine tab er 24hr 300 mg</i>	2	PA
<i>oxcarbazepine tab er 24hr 600 mg</i>	2	PA
<i>pregabalin cap 100 mg</i>	1	
<i>pregabalin cap 150 mg</i>	1	
<i>pregabalin cap 200 mg</i>	1	
<i>pregabalin soln 20 mg/ml</i>	1	
<i>pregabalin cap 225 mg</i>	1	
<i>pregabalin cap 25 mg</i>	1	
<i>pregabalin cap 300 mg</i>	1	
<i>pregabalin cap 50 mg</i>	1	
<i>pregabalin cap 75 mg</i>	1	
PRIMIDONE 125 MG TAB	1	
<i>primidone tab 250 mg</i>	1	
<i>primidone tab 50 mg</i>	1	
<i>rufinamide tab 200 mg</i>	2	PA
<i>rufinamide tab 400 mg</i>	2	PA
<i>rufinamide susp 40 mg/ml</i>	2	PA
DIACOMIT 250 MG CAP	3	PA S
DIACOMIT 250 MG PACKET	3	PA S
DIACOMIT 500 MG CAP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIACOMIT 500 MG PACKET	3	PA S
<i>topiramate tab 100 mg</i>	1	
<i>topiramate sprinkle cap 15 mg</i>	1	
<i>topiramate tab 200 mg</i>	1	
<i>topiramate sprinkle cap 25 mg</i>	1	
<i>topiramate oral soln 25 mg/ml</i>	1	
<i>topiramate tab 25 mg</i>	1	
<i>topiramate sprinkle cap 50 mg</i>	2	PA
<i>topiramate tab 50 mg</i>	1	
<i>topiramate cap er 24hr 100 mg</i>	2	PA
<i>topiramate cap er 24hr sprinkle 100 mg</i>	2	PA
<i>topiramate cap er 24hr sprinkle 150 mg</i>	2	PA
<i>topiramate cap er 24hr 200 mg</i>	2	PA
<i>topiramate cap er 24hr sprinkle 200 mg</i>	2	PA
<i>topiramate cap er 24hr 25 mg</i>	2	PA
<i>topiramate cap er 24hr sprinkle 25 mg</i>	2	PA
<i>topiramate cap er 24hr 50 mg</i>	2	PA
<i>topiramate cap er 24hr sprinkle 50 mg</i>	2	PA
ZONISADE 100 MG/5ML SUSPENSION	3	PA
<i>zonisamide cap 100 mg</i>	1	
<i>zonisamide cap 25 mg</i>	1	
<i>zonisamide cap 50 mg</i>	1	
CARBAMATES		
<i>felbamate tab 400 mg</i>	2	PA
<i>felbamate susp 600 mg/5ml</i>	2	PA
<i>felbamate tab 600 mg</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GABA MODULATORS		
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 12 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
<i>tiagabine hcl tab 16 mg</i>	1	
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 2 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
<i>tiagabine hcl tab 4 mg</i>	1	
HYDANTOINS		
CEREBYX 100 MG PE/2ML SOLUTION	4	EX Plan Exclusion
CEREBYX 500 MG PE/10ML SOLUTION	4	EX Plan Exclusion
<i>fosphenytoin sodium inj 100 mg/2ml (phenytoin equiv)</i>	4	EX Plan Exclusion
<i>fosphenytoin sodium inj 500 mg/10ml (phenytoin equiv)</i>	4	EX Plan Exclusion
<i>phenytoin susp 125 mg/5ml</i>	1	
<i>phenytoin susp 125 mg/5ml</i>	1	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin chew tab 50 mg</i>	1	
<i>phenytoin sodium inj 50 mg/ml</i>	4	EX Plan Exclusion
<i>phenytoin sodium extended cap 100 mg</i>	1	
<i>phenytoin sodium extended cap 200 mg</i>	1	
<i>phenytoin sodium extended cap 300 mg</i>	1	
SUCCINIMIDES		
<i>ethosuximide soln 250 mg/5ml</i>	1	
<i>ethosuximide cap 250 mg</i>	1	
<i>methsuximide cap 300 mg</i>	1	
VALPROIC ACID		
<i>divalproex sodium cap delayed release sprinkle 125 mg</i>	1	
<i>divalproex sodium tab delayed release 125 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>divalproex sodium tab delayed release 250 mg</i>	1	
<i>divalproex sodium tab delayed release 500 mg</i>	1	
<i>divalproex sodium tab er 24 hr 250 mg</i>	1	
<i>divalproex sodium tab er 24 hr 500 mg</i>	1	
<i>valproate sodium inj 100 mg/ml</i>	4	EX Plan Exclusion
<i>valproate sodium inj 100 mg/ml</i>	4	EX Plan Exclusion
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	1	
<i>valproic acid cap 250 mg</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine tab 15 mg</i>	1	
<i>mirtazapine orally disintegrating tab 15 mg</i>	1	
<i>mirtazapine tab 30 mg</i>	1	
<i>mirtazapine orally disintegrating tab 30 mg</i>	1	
<i>mirtazapine tab 45 mg</i>	1	
<i>mirtazapine orally disintegrating tab 45 mg</i>	1	
<i>mirtazapine tab 7.5 mg</i>	1	
ANTIDEPRESSANT - MISCELLANEOUS COMBINATIONS		
AUVELITY 45-105 MG TAB ER	3	PA
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab 100 mg</i>	1	
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab 75 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 100 mg</i>	1	
<i>bupropion hcl tab er 12hr 150 mg</i>	1	
<i>bupropion hcl tab er 12hr 150 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 12hr 200 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 150 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
<i>bupropion hcl tab er 24hr 300 mg</i>	1	
BUPROPION HCL ER (XL) 450 MG TAB ER 24H	1	
BUPROPION HCL ER (XL) 450 MG TAB ER 24H	1	
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZULRESSO 100 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
ZURZUVAE 20 MG CAP	3	PA S
ZURZUVAE 25 MG CAP	3	PA S
ZURZUVAE 30 MG CAP	3	PA S
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
PHENELZINE SULFATE 15 MG TAB	1	
<i>phenelzine sulfate tab 15 mg</i>	1	
<i>tranylcypromine sulfate tab 10 mg</i>	2	PA
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO (56 MG DOSE) 28 MG/DEVICE SOLN THPK	3	PA S
SPRAVATO (84 MG DOSE) 28 MG/DEVICE SOLN THPK	3	PA S
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>citalopram hydrobromide tab 10 mg (base equiv)</i>	1	
<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	1	
<i>citalopram hydrobromide tab 20 mg (base equiv)</i>	1	
CITALOPRAM HYDROBROMIDE 30 MG CAP	1	
<i>citalopram hydrobromide tab 40 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 10 mg (base equiv)</i>	1	
ESCITALOPRAM OXALATE 15 MG CAP	1	
<i>escitalopram oxalate tab 20 mg (base equiv)</i>	1	
<i>escitalopram oxalate soln 5 mg/5ml (base equiv)</i>	1	
<i>escitalopram oxalate tab 5 mg (base equiv)</i>	1	
<i>fluoxetine hcl cap 10 mg</i>	1	
<i>fluoxetine hcl tab 10 mg</i>	1	
<i>fluoxetine hcl solution 20 mg/5ml</i>	1	
<i>fluoxetine hcl cap 20 mg</i>	1	
<i>fluoxetine hcl tab 20 mg</i>	1	
<i>fluoxetine hcl cap 40 mg</i>	1	
FLUOXETINE HCL 60 MG TAB	1	
<i>fluoxetine hcl tab 60 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	
<i>fluvoxamine maleate tab 100 mg</i>	1	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 25 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate tab 50 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 100 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	
<i>fluvoxamine maleate cap er 24hr 150 mg</i>	1	
PAROXETINE HCL 10 MG/5ML SUSPENSION	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>paroxetine hcl tab 10 mg</i>	1	
<i>paroxetine hcl tab 20 mg</i>	1	
<i>paroxetine hcl tab 30 mg</i>	1	
<i>paroxetine hcl tab 40 mg</i>	1	
<i>paroxetine hcl tab er 24hr 12.5 mg</i>	1	
<i>paroxetine hcl tab er 24hr 25 mg</i>	1	
<i>paroxetine hcl tab er 24hr 37.5 mg</i>	1	
<i>sertraline hcl tab 100 mg</i>	1	
SERTRALINE HCL 150 MG CAP	2	
<i>sertraline hcl cap 150 mg</i>	2	
SERTRALINE HCL 200 MG CAP	2	
<i>sertraline hcl cap 200 mg</i>	2	
<i>sertraline hcl oral concentrate for solution 20 mg/ml</i>	1	
<i>sertraline hcl tab 25 mg</i>	1	
<i>sertraline hcl tab 50 mg</i>	1	
SEROTONIN MODULATORS		
NEFAZODONE HCL 100 MG TAB	1	
NEFAZODONE HCL 150 MG TAB	1	
NEFAZODONE HCL 200 MG TAB	1	
NEFAZODONE HCL 250 MG TAB	1	
NEFAZODONE HCL 50 MG TAB	1	
RALDESY 10 MG/ML SOLUTION	3	PA
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 100 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	
<i>trazodone hcl tab 150 mg</i>	1	
<i>trazodone hcl tab 300 mg</i>	1	
<i>trazodone hcl tab 300 mg</i>	1	
<i>trazodone hcl tab 50 mg</i>	1	
<i>trazodone hcl tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIIBRYD 10 MG TAB	3	PA
VIIBRYD 20 MG TAB	3	PA
VIIBRYD 40 MG TAB	3	PA
VIIBRYD STARTER PACK 10 & 20 MG KIT	3	PA
<i>vilazodone hcl tab 10 mg</i>	1	
<i>vilazodone hcl tab 20 mg</i>	1	
<i>vilazodone hcl tab 40 mg</i>	1	
TRINTELLIX 10 MG TAB	3	PA
TRINTELLIX 20 MG TAB	3	PA
TRINTELLIX 5 MG TAB	3	PA
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
DESVENLAFAXINE ER 100 MG TAB ER 24H	1	
DESVENLAFAXINE ER 50 MG TAB ER 24H	1	
<i>desvenlafaxine succinate tab er 24hr 100 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 25 mg (base equiv)</i>	1	
<i>desvenlafaxine succinate tab er 24hr 50 mg (base equiv)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 20 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 30 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 40 mg (base eq)</i>	1	
<i>duloxetine hcl enteric coated pellets cap 60 mg (base eq)</i>	1	
FETZIMA 120 MG CAP ER 24H	3	PA
FETZIMA 20 MG CAP ER 24H	3	PA
FETZIMA 40 MG CAP ER 24H	3	PA
FETZIMA 80 MG CAP ER 24H	3	PA
FETZIMA TITRATION 20 & 40 MG CP24 THPK	3	PA
VENLAFAXINE BESYLATE ER 112.5 MG TAB ER 24H	1	
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>venlafaxine hcl tab 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 150 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 225 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)</i>	1	
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	1	
<i>venlafaxine hcl tab er 24hr 75 mg (base equivalent)</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline hcl tab 100 mg</i>	1	
<i>amitriptyline hcl tab 10 mg</i>	1	
<i>amitriptyline hcl tab 150 mg</i>	1	
<i>amitriptyline hcl tab 25 mg</i>	1	
<i>amitriptyline hcl tab 50 mg</i>	1	
<i>amitriptyline hcl tab 75 mg</i>	1	
<i>amoxapine tab 100 mg</i>	1	
<i>amoxapine tab 150 mg</i>	1	
<i>amoxapine tab 25 mg</i>	1	
<i>amoxapine tab 50 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 25 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	
<i>clomipramine hcl cap 50 mg</i>	1	
<i>clomipramine hcl cap 75 mg</i>	1	
<i>clomipramine hcl cap 75 mg</i>	1	
<i>clomipramine hcl cap 75 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>desipramine hcl tab 100 mg</i>	1	
<i>desipramine hcl tab 10 mg</i>	1	
<i>desipramine hcl tab 150 mg</i>	1	
<i>desipramine hcl tab 25 mg</i>	1	
<i>desipramine hcl tab 50 mg</i>	1	
<i>desipramine hcl tab 75 mg</i>	1	
<i>doxepin hcl cap 100 mg</i>	1	
<i>doxepin hcl cap 10 mg</i>	1	
DOXEPIN HCL 10 MG/ML CONC	1	
<i>doxepin hcl conc 10 mg/ml</i>	1	
<i>doxepin hcl cap 150 mg</i>	1	
<i>doxepin hcl cap 25 mg</i>	1	
<i>doxepin hcl cap 50 mg</i>	1	
<i>doxepin hcl cap 75 mg</i>	1	
<i>imipramine hcl tab 10 mg</i>	1	
<i>imipramine hcl tab 25 mg</i>	1	
<i>imipramine hcl tab 50 mg</i>	1	
<i>imipramine pamoate cap 100 mg</i>	1	
<i>imipramine pamoate cap 125 mg</i>	1	
<i>imipramine pamoate cap 150 mg</i>	1	
<i>imipramine pamoate cap 75 mg</i>	1	
<i>nortriptyline hcl soln 10 mg/5ml</i>	1	
<i>nortriptyline hcl cap 10 mg</i>	1	
<i>nortriptyline hcl cap 25 mg</i>	1	
<i>nortriptyline hcl cap 50 mg</i>	1	
<i>nortriptyline hcl cap 75 mg</i>	1	
<i>protriptyline hcl tab 10 mg</i>	2	PA
<i>protriptyline hcl tab 5 mg</i>	2	PA
<i>trimipramine maleate cap 100 mg</i>	1	
<i>trimipramine maleate cap 25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trimipramine maleate cap 50 mg</i>	1	
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose tab 100 mg</i>	1	
<i>acarbose tab 25 mg</i>	1	
<i>acarbose tab 50 mg</i>	1	
MIGLITOL 100 MG TAB	1	
<i>miglitol tab 100 mg</i>	1	
MIGLITOL 25 MG TAB	1	
<i>miglitol tab 25 mg</i>	1	
MIGLITOL 50 MG TAB	1	
<i>miglitol tab 50 mg</i>	1	
ANTIDIABETIC - ALLOGENEIC CELLULAR THERAPY		
LANTIDRA SUSPENSION	4	PA S EX Plan Exclusion
ANTIDIABETIC-ANTI-CD3 ANTIBODIES		
TZIELD 2 MG/2ML SOLUTION	4	S EX Plan Exclusion
BIGUANIDES		
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab 1000 mg</i>	1	
<i>metformin hcl tab 500 mg</i>	1	
<i>metformin hcl tab 500 mg</i>	1	
METFORMIN HCL 750 MG TAB	1	
<i>metformin hcl tab 850 mg</i>	1	
<i>metformin hcl tab 850 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	
<i>metformin hcl tab er 24hr 500 mg</i>	1	
<i>metformin hcl tab er 24hr 750 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metformin hcl tab er 24hr 750 mg</i>	1	
DIABETIC OTHER		
ZEGALOGUE 0.6 MG/0.6ML SOLN A-INJ	2	
ZEGALOGUE 0.6 MG/0.6ML SOLN PRSYR	2	
<i>diazoxide susp 50 mg/ml</i>	1	
BAQSIMI ONE PACK 3 MG/DOSE POWDER	3	PA
BAQSIMI TWO PACK 3 MG/DOSE POWDER	3	PA
<i>glucagon for inj 1 mg</i>	1	
GVOKE HYPOPEN 1-PACK 0.5 MG/0.1ML SOLN A-INJ	3	PA
GVOKE HYPOPEN 1-PACK 1 MG/0.2ML SOLN A-INJ	3	PA
GVOKE HYPOPEN 2-PACK 0.5 MG/0.1ML SOLN A-INJ	3	PA
GVOKE HYPOPEN 2-PACK 1 MG/0.2ML SOLN A-INJ	3	PA
GVOKE KIT 1 MG/0.2ML SOLUTION	3	PA
GVOKE PFS 0.5 MG/0.1ML SOLN PRSYR	3	PA
GVOKE PFS 1 MG/0.2ML SOLN PRSYR	3	PA
GLUCAGON EMERGENCY 1 MG/ML RECON SOLN	1	
GLUCAGEN HYPOKIT 1 MG RECON SOLN	1	
GLUCAGON EMERGENCY 1 MG KIT	1	
<i>glucagon (rdna) for inj kit 1 mg</i>	1	
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
ALOGLIPTIN BENZOATE 12.5 MG TAB	1	
ALOGLIPTIN BENZOATE 25 MG TAB	1	
ALOGLIPTIN BENZOATE 6.25 MG TAB	1	
TRADJENTA 5 MG TAB	2	PA
<i>saxagliptin hcl tab 2.5 mg (base equiv)</i>	1	
<i>saxagliptin hcl tab 5 mg (base equiv)</i>	1	
SITAGLIPTIN 100 MG TAB	1	
SITAGLIPTIN 25 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SITAGLIPTIN 50 MG TAB	1	
ZITUVIO 100 MG TAB	2	PA
ZITUVIO 25 MG TAB	2	PA
ZITUVIO 50 MG TAB	2	PA
JANUVIA 100 MG TAB	2	PA
JANUVIA 25 MG TAB	2	PA
JANUVIA 50 MG TAB	2	PA
DIPEPTIDYL PEPTIDASE-4 INHIBITOR-BIGUANIDE COMBINATIONS		
ALOGLIPTIN-METFORMIN HCL 12.5-1000 MG TAB	1	
ALOGLIPTIN-METFORMIN HCL 12.5-500 MG TAB	1	
JENTADUETO 2.5-1000 MG TAB	2	PA
JENTADUETO 2.5-500 MG TAB	2	PA
JENTADUETO 2.5-850 MG TAB	2	PA
JENTADUETO XR 2.5-1000 MG TAB ER 24H	2	PA
JENTADUETO XR 5-1000 MG TAB ER 24H	2	PA
<i>saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 5-1000 mg</i>	1	
<i>saxagliptin-metformin hcl tab er 24hr 5-500 mg</i>	1	
SITAGLIPT BASE-METFORM HCL ER 100-1000 MG TAB ER 24H	1	
SITAGLIPT BASE-METFORM HCL ER 50-1000 MG TAB ER 24H	1	
SITAGLIPT BASE-METFORM HCL ER 50-500 MG TAB ER 24H	1	
SITAGLIPTIN BASE-METFORMIN HCL 50-1000 MG TAB	1	
SITAGLIPTIN BASE-METFORMIN HCL 50-500 MG TAB	1	
ZITUVIMET 50-1000 MG TAB	2	PA
ZITUVIMET 50-500 MG TAB	2	PA
ZITUVIMET XR 100-1000 MG TAB ER 24H	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZITUVIMET XR 50-1000 MG TAB ER 24H	2	PA
ZITUVIMET XR 50-500 MG TAB ER 24H	2	PA
JANUMET 50-1000 MG TAB	3	PA
JANUMET 50-500 MG TAB	3	PA
JANUMET XR 100-1000 MG TAB ER 24H	3	PA
JANUMET XR 50-1000 MG TAB ER 24H	3	PA
JANUMET XR 50-500 MG TAB ER 24H	3	PA
DPP-4 INHIBITOR-THIAZOLIDINEDIONE COMBINATIONS		
ALOGLIPTIN-PIOGLITAZONE 12.5-15 MG TAB	1	
ALOGLIPTIN-PIOGLITAZONE 12.5-30 MG TAB	1	
ALOGLIPTIN-PIOGLITAZONE 12.5-45 MG TAB	1	
ALOGLIPTIN-PIOGLITAZONE 25-15 MG TAB	1	
ALOGLIPTIN-PIOGLITAZONE 25-30 MG TAB	1	
ALOGLIPTIN-PIOGLITAZONE 25-45 MG TAB	1	
HUMAN INSULIN		
INSULIN ASPART 100 UNIT/ML SOLUTION	1	
INSULIN ASPART FLEXPEN 100 UNIT/ML SOLN PEN	1	
INSULIN ASPART PENFILL 100 UNIT/ML SOLN CART	1	
NOVOLOG 100 UNIT/ML SOLUTION	2	PA
NOVOLOG FLEXPEN 100 UNIT/ML SOLN PEN	2	PA
NOVOLOG FLEXPEN RELION 100 UNIT/ML SOLN PEN	2	PA
NOVOLOG PENFILL 100 UNIT/ML SOLN CART	2	PA
NOVOLOG RELION 100 UNIT/ML SOLUTION	2	PA
INSULIN ASPART PROT & ASPART (70-30) 100 UNIT/ML SUSPENSION	1	
INSULIN ASP PROT & ASP FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	1	
NOVOLOG 70/30 FLEXPEN RELION (70-30) 100 UNIT/ML SUSP PEN	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOLOG MIX 70/30 (70-30) 100 UNIT/ML SUSPENSION	2	PA
NOVOLOG MIX 70/30 FLEXPEN (70-30) 100 UNIT/ML SUSP PEN	2	PA
NOVOLOG MIX 70/30 RELION (70-30) 100 UNIT/ML SUSPENSION	2	PA
INSULIN DEGLUDEC 100 UNIT/ML SOLUTION	1	
INSULIN DEGLUDEC FLEXTOUCH 100 UNIT/ML SOLN PEN	1	
INSULIN DEGLUDEC FLEXTOUCH 200 UNIT/ML SOLN PEN	1	
LEVEMIR 100 UNIT/ML SOLUTION	2	PA
LEVEMIR FLEXPEN 100 UNIT/ML SOLN PEN	2	PA
LEVEMIR FLEXTOUCH 100 UNIT/ML SOLN PEN	2	PA
INSULIN GLARGINE 100 UNIT/ML SOLUTION	1	
INSULIN GLARGINE MAX SOLOSTAR 300 UNIT/ML SOLN PEN	1	
INSULIN GLARGINE SOLOSTAR 100 UNIT/ML SOLN PEN	1	PA
INSULIN GLARGINE SOLOSTAR 300 UNIT/ML SOLN PEN	1	
LANTUS 100 UNIT/ML SOLUTION	2	
LANTUS SOLOSTAR 100 UNIT/ML SOLN PEN	2	
REZVOGLAR KWIKPEN 100 UNIT/ML SOLN PEN	2	PA
INSULIN GLARGINE-YFGN 100 UNIT/ML SOLN PEN	1	
INSULIN GLARGINE-YFGN 100 UNIT/ML SOLUTION	1	
APIDRA 100 UNIT/ML SOLUTION	2	
APIDRA SOLOSTAR 100 UNIT/ML SOLN PEN	2	
HUMALOG 100 UNIT/ML SOLN CART	2	PA
HUMALOG 100 UNIT/ML SOLUTION	2	PA
HUMALOG JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN	2	PA
HUMALOG KWIKPEN 100 UNIT/ML SOLN PEN	2	PA
HUMALOG KWIKPEN 200 UNIT/ML SOLN PEN	2	PA
INSULIN LISPRO 100 UNIT/ML SOLUTION	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSULIN LISPRO (1 UNIT DIAL) 100 UNIT/ML SOLN PEN	1	
INSULIN LISPRO JUNIOR KWIKPEN 100 UNIT/ML SOLN PEN	1	
HUMALOG MIX 50/50 (50-50) 100 UNIT/ML SUSPENSION	2	PA
HUMALOG MIX 50/50 KWIKPEN (50-50) 100 UNIT/ML SUSP PEN	2	PA
HUMALOG MIX 75/25 (75-25) 100 UNIT/ML SUSPENSION	2	PA
HUMALOG MIX 75/25 KWIKPEN (75-25) 100 UNIT/ML SUSP PEN	2	PA
INSULIN LISPRO PROT & LISPRO (75-25) 100 UNIT/ML SUSP PEN	1	
HUMULIN R U-500 (CONCENTRATED) 500 UNIT/ML SOLUTION	2	
HUMULIN R U-500 KWIKPEN 500 UNIT/ML SOLN PEN	2	
MYXREDLIN 100-0.9 UT/100ML-% SOLUTION	4	EX Plan Exclusion
INCRETIN MIMETIC AGENTS (GIP & GLP-1 RECEPTOR AGONISTS)		
MOUNJARO 10 MG/0.5ML SOLN A-INJ	2	QL PA
MOUNJARO 12.5 MG/0.5ML SOLN A-INJ	2	QL PA
MOUNJARO 15 MG/0.5ML SOLN A-INJ	2	QL PA
MOUNJARO 2.5 MG/0.5ML SOLN A-INJ	2	QL PA
MOUNJARO 5 MG/0.5ML SOLN A-INJ	2	QL PA
MOUNJARO 7.5 MG/0.5ML SOLN A-INJ	2	QL PA
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
TRULICITY 0.75 MG/0.5ML SOLN A-INJ	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRULICITY 1.5 MG/0.5ML SOLN A-INJ	2	QL PA
TRULICITY 3 MG/0.5ML SOLN A-INJ	2	QL PA
TRULICITY 4.5 MG/0.5ML SOLN A-INJ	2	QL PA
EXENATIDE 10 MCG/0.04ML SOLN PEN	1	QL PA
EXENATIDE 5 MCG/0.02ML SOLN PEN	1	QL PA
<i>liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)</i>	1	QL PA
VICTOZA 18 MG/3ML SOLN PEN	3	QL PA
ADLYXIN 20 MCG/0.2ML SOLN PEN	3	PA
ADLYXIN STARTER PACK 10 & 20 MCG/0.2ML PEN KIT	3	PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/1.5ML SOLN PEN	2	QL PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN	2	QL PA
OZEMPIC (1 MG/DOSE) 2 MG/1.5ML SOLN PEN	2	QL PA
OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN	2	QL PA
OZEMPIC (2 MG/DOSE) 8 MG/3ML SOLN PEN	2	QL PA
RYBELSUS 14 MG TAB	2	QL PA
RYBELSUS 3 MG TAB	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYBELSUS 7 MG TAB	2	QL PA
MEGLITINIDE ANALOGUES		
<i>nateglinide tab 120 mg</i>	1	
<i>nateglinide tab 60 mg</i>	1	
<i>repaglinide tab 0.5 mg</i>	1	
<i>repaglinide tab 1 mg</i>	1	
<i>repaglinide tab 2 mg</i>	1	
PROGESTERONE RECEPTOR ANTAGONISTS		
KORLYM 300 MG TAB	3	PA S
<i>mifepristone tab 300 mg</i>	1	S
SGLT2 INHIBITOR - DPP-4 INHIBITOR - BIGUANIDE COMB		
TRIJARDY XR 10-5-1000 MG TAB ER 24H	3	PA
TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H	3	PA
TRIJARDY XR 25-5-1000 MG TAB ER 24H	3	PA
TRIJARDY XR 5-2.5-1000 MG TAB ER 24H	3	PA
SGLT2 INHIBITOR - DPP-4 INHIBITOR COMBINATIONS		
STEGLUJAN 15-100 MG TAB	2	PA
STEGLUJAN 5-100 MG TAB	2	PA
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
BRENZAVVY 20 MG TAB	1	
INVOKANA 100 MG TAB	2	PA
INVOKANA 300 MG TAB	2	PA
DAPAGLIFLOZIN PROPANEDIOL 10 MG TAB	1	
DAPAGLIFLOZIN PROPANEDIOL 5 MG TAB	1	
FARXIGA 10 MG TAB	2	PA
FARXIGA 5 MG TAB	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JARDIANCE 10 MG TAB	2	PA
JARDIANCE 25 MG TAB	2	PA
STEGLATRO 15 MG TAB	2	PA
STEGLATRO 5 MG TAB	2	PA
SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITOR-BIGUANIDE COMB		
INVOKAMET 150-1000 MG TAB	2	PA
INVOKAMET 150-500 MG TAB	2	PA
INVOKAMET 50-1000 MG TAB	2	PA
INVOKAMET 50-500 MG TAB	2	PA
INVOKAMET XR 150-1000 MG TAB ER 24H	2	PA
INVOKAMET XR 150-500 MG TAB ER 24H	2	PA
INVOKAMET XR 50-1000 MG TAB ER 24H	2	PA
INVOKAMET XR 50-500 MG TAB ER 24H	2	PA
XIGDUO XR 10-500 MG TAB ER 24H	3	PA
XIGDUO XR 2.5-1000 MG TAB ER 24H	3	PA
XIGDUO XR 5-500 MG TAB ER 24H	3	PA
DAPAGLIFLOZIN PRO-METFORMIN ER 10-1000 MG TAB ER 24H	1	
DAPAGLIFLOZIN PRO-METFORMIN ER 5-1000 MG TAB ER 24H	1	
XIGDUO XR 10-1000 MG TAB ER 24H	3	PA
XIGDUO XR 5-1000 MG TAB ER 24H	3	PA
SYNJARDY 12.5-1000 MG TAB	3	PA
SYNJARDY 12.5-500 MG TAB	3	PA
SYNJARDY 5-1000 MG TAB	3	PA
SYNJARDY 5-500 MG TAB	3	PA
SYNJARDY XR 10-1000 MG TAB ER 24H	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNJARDY XR 12.5-1000 MG TAB ER 24H	3	PA
SYNJARDY XR 25-1000 MG TAB ER 24H	3	PA
SYNJARDY XR 5-1000 MG TAB ER 24H	3	PA
SEGLUROMET 2.5-1000 MG TAB	2	PA
SEGLUROMET 2.5-500 MG TAB	2	PA
SEGLUROMET 7.5-1000 MG TAB	2	PA
SEGLUROMET 7.5-500 MG TAB	2	PA
SULFONYLUREA-BIGUANIDE COMBINATIONS		
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	
<i>glyburide-metformin tab 1.25-250 mg</i>	1	
<i>glyburide-metformin tab 2.5-500 mg</i>	1	
<i>glyburide-metformin tab 5-500 mg</i>	1	
SULFONYLUREA-THIAZOLIDINEDIONE COMBINATIONS		
<i>pioglitazone hcl-glimepiride tab 30-2 mg</i>	1	
<i>pioglitazone hcl-glimepiride tab 30-4 mg</i>	1	
SULFONYLUREAS		
<i>glimepiride tab 1 mg</i>	1	
<i>glimepiride tab 2 mg</i>	1	
GLIMEPIRIDE 3 MG TAB	1	
<i>glimepiride tab 4 mg</i>	1	
<i>glipizide tab 10 mg</i>	1	
<i>glipizide tab 10 mg</i>	1	
GLIPIZIDE 2.5 MG TAB	1	
<i>glipizide tab 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>glipizide tab 5 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glipizide tab er 24hr 10 mg</i>	1	
<i>glipizide tab er 24hr 2.5 mg</i>	1	
<i>glipizide tab er 24hr 5 mg</i>	1	
<i>glyburide tab 1.25 mg</i>	1	
<i>glyburide tab 1.25 mg</i>	1	
<i>glyburide tab 2.5 mg</i>	1	
<i>glyburide tab 2.5 mg</i>	1	
<i>glyburide tab 5 mg</i>	1	
<i>glyburide tab 5 mg</i>	1	
GLYBURIDE MICRONIZED 1.5 MG TAB	1	
GLYBURIDE MICRONIZED 3 MG TAB	1	
GLYBURIDE MICRONIZED 6 MG TAB	1	
THIAZOLIDINEDIONE-BIGUANIDE COMBINATIONS		
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	
THIAZOLIDINEDIONES		
<i>pioglitazone hcl tab 15 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 30 mg (base equiv)</i>	1	
<i>pioglitazone hcl tab 45 mg (base equiv)</i>	1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI 125 MG TAB DR	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPERISTALTIC AGENTS		
DIPHENOXYLATE-ATROPINE 2.5-0.025 MG/5ML LIQUID	1	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	1	
<i>loperamide hcl cap 2 mg</i>	1	
OPIUM 10 MG/ML (1%) TINCTURE	2	PA
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTE COMBINATIONS		
DUODOTE 2.1-600 MG SOLN A-INJ	4	EX Plan Exclusion
PREVDUO 3-0.6 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
NITHIODOTE 300MG/10ML&12.5 GM/50ML KIT	4	EX Plan Exclusion
ANTIDOTES - CHELATING AGENTS		
<i>deferasirox tab for oral susp 125 mg</i>	2	PA S
<i>deferasirox granules packet 180 mg</i>	2	PA S
<i>deferasirox tab 180 mg</i>	2	PA S
<i>deferasirox tab for oral susp 250 mg</i>	2	PA S
<i>deferasirox granules packet 360 mg</i>	2	PA S
<i>deferasirox tab 360 mg</i>	2	PA S
<i>deferasirox tab for oral susp 500 mg</i>	2	PA S
<i>deferasirox granules packet 90 mg</i>	2	PA S
<i>deferasirox tab 90 mg</i>	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>deferasirox granules packet 180 mg</i>	2	PA S
<i>deferasirox granules packet 360 mg</i>	2	PA S
<i>deferasirox granules packet 90 mg</i>	2	PA S
EXJADE 125 MG TAB SOL	3	PA S
EXJADE 250 MG TAB SOL	3	PA S
EXJADE 500 MG TAB SOL	3	PA S
JADENU 180 MG TAB	3	PA S
JADENU 360 MG TAB	3	PA S
JADENU 90 MG TAB	3	PA S
JADENU SPRINKLE 180 MG PACKET	3	PA S
JADENU SPRINKLE 360 MG PACKET	3	PA S
JADENU SPRINKLE 90 MG PACKET	3	PA S
<i>deferiprone tab 1000 mg</i>	2	PA S
<i>deferiprone tab 500 mg</i>	2	PA S
FERRIPROX 100 MG/ML SOLUTION	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FERRIPROX TWICE-A-DAY 1000 MG TAB	3	PA S
CHEMET 100 MG CAP	3	PA S
ACETADOTE 200 MG/ML SOLUTION	4	EX Plan Exclusion
<i>acetylcysteine inj 200 mg/ml</i>	4	EX Plan Exclusion
ANDEXXA 200 MG RECON SOLN	4	EX Plan Exclusion
<i>deferoxamine mesylate for inj 2 gm</i>	4	S EX Plan Exclusion
<i>deferoxamine mesylate for inj 500 mg</i>	4	S EX Plan Exclusion
DESFERAL 500 MG RECON SOLN	4	S EX Plan Exclusion
DIGIFAB 40 MG RECON SOLN	4	EX Plan Exclusion
BAL IN OIL 100 MG/ML SOLUTION	4	EX Plan Exclusion
CALCIUM DISODIUM VERSENATE 1 GM/5ML SOLUTION	4	EX Plan Exclusion
EDETATE CALCIUM DISODIUM 1 GM/5ML SOLUTION	4	EX Plan Exclusion
<i>fomepizole inj 1 gm/ml (for iv infusion)</i>	4	EX Plan Exclusion
CYANOKIT 5 GM RECON SOLN	4	EX Plan Exclusion
PRAXBIND 2.5 GM/50ML SOLUTION	4	EX Plan Exclusion
METHYLENE BLUE 20 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
<i>methylene blue iv soln 50 mg/10ml (5 mg/ml)</i>	4	EX Plan Exclusion
METHYLENE BLUE (ANTIDOTE) 1 % SOLUTION	4	EX Plan Exclusion
<i>methylene blue iv soln 1%</i>	4	EX Plan Exclusion
PROVAYBLUE 50 MG/10ML SOLUTION	4	EX Plan Exclusion
PHYSOSTIGMINE SALICYLATE 1 MG/ML SOLUTION	4	EX Plan Exclusion
PROTOPAM CHLORIDE 1 GM RECON SOLN	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SODIUM NITRITE 30 MG/ML SOLUTION	4	EX Plan Exclusion
SODIUM THIOSULFATE 250 MG/ML SOLUTION	4	EX Plan Exclusion
BRIDION 200 MG/2ML SOLUTION	4	EX Plan Exclusion
BRIDION 500 MG/5ML SOLUTION	4	EX Plan Exclusion
SUGAMMADEX SODIUM 100 MG/ML SOLN PRSYR	4	EX Plan Exclusion
SUGAMMADEX SODIUM 150 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
SUGAMMADEX SODIUM 200 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
SUGAMMADEX SODIUM 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
VISTOGARD 10 GM PACKET	2	S
BENZODIAZEPINE ANTAGONISTS		
<i>flumazenil iv soln 0.5 mg/5ml (0.1 mg/ml)</i>	4	EX Plan Exclusion
<i>flumazenil iv soln 1 mg/10ml (0.1 mg/ml)</i>	4	EX Plan Exclusion
OPIOID ANTAGONISTS		
OPVEE 2.7 MG/0.1ML SOLUTION	3	
KLOXXADO 8 MG/0.1ML LIQUID	2	
LIFEMS NALOXONE 2 MG/2ML PREF SY KT	2	
NALOXONE HCL 0.4 MG/ML SOLN CART	1	
<i>naloxone hcl soln prefilled syringe 0.4 mg/ml</i>	1	
<i>naloxone hcl inj 0.4 mg/ml</i>	1	
<i>naloxone hcl soln prefilled syringe 2 mg/2ml</i>	1	
<i>naloxone hcl nasal spray 4 mg/0.1ml</i>	1	
<i>naloxone hcl inj 4 mg/10ml</i>	1	
NARCAN 4 MG/0.1ML LIQUID	3	
REXTOVY 4 MG/0.25ML LIQUID	2	
ZIMHI 5 MG/0.5ML SOLN PRSYR	3	
VIVITROL 380 MG RECON SUSP	2	S
<i>naltrexone hcl tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET 50 MG TAB	3	PA
SANCUSO 3.1 MG/24HR PATCH	2	PA
SUSTOL 10 MG/0.4ML PRSYR	4	PA EX Plan Exclusion
<i>granisetron hcl inj 1 mg/ml</i>	4	EX Plan Exclusion
<i>granisetron hcl tab 1 mg</i>	1	PA
<i>granisetron hcl inj 4 mg/4ml (1 mg/ml)</i>	4	EX Plan Exclusion
ONDANSETRON 16 MG TAB DISP	1	
<i>ondansetron orally disintegrating tab 4 mg</i>	1	
<i>ondansetron orally disintegrating tab 8 mg</i>	1	
ONDANSETRON HCL 24 MG TAB	1	
<i>ondansetron hcl inj 40 mg/20ml (2 mg/ml)</i>	4	EX Plan Exclusion
ONDANSETRON HCL 4 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>ondansetron hcl oral soln 4 mg/5ml</i>	1	
<i>ondansetron hcl tab 4 mg</i>	1	
<i>ondansetron hcl tab 8 mg</i>	1	
<i>ondansetron hcl inj 4 mg/2ml (2 mg/ml)</i>	4	EX Plan Exclusion
PALONOSETRON HCL 0.25 MG/2ML SOLUTION	4	EX Plan Exclusion
PALONOSETRON HCL 0.25 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>palonosetron hcl iv soln pref syr 0.25 mg/5ml (base equiv)</i>	4	EX Plan Exclusion
<i>palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)</i>	4	EX Plan Exclusion
POSFREA 0.25 MG/5ML SOLUTION	4	EX Plan Exclusion
ANTIEMETIC COMBINATIONS		
<i>doxylamine-pyridoxine tab delayed release 10-10 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AKYNZEO 235-0.25 MG/20ML SOLUTION	4	EX Plan Exclusion
AKYNZEO 235-0.25 MG RECON SOLN	4	EX Plan Exclusion
AKYNZEO (READY-TO-USE) 235-0.25 MG/20ML SOLUTION	4	EX Plan Exclusion
AKYNZEO 300-0.5 MG CAP	3	PA
ANTIEMETICS - ANTICHOLINERGIC		
<i>meclizine hcl tab 12.5 mg</i>	1	
<i>meclizine hcl tab 25 mg</i>	1	
<i>meclizine hcl tab 50 mg</i>	1	
<i>scopolamine td patch 72hr 1 mg/3days</i>	1	
<i>trimethobenzamide hcl cap 300 mg</i>	1	
ANTIEMETICS - ANTIDOPAMINERGIC		
BARHEMSYS 10 MG/4ML SOLUTION	4	EX Plan Exclusion
BARHEMSYS 5 MG/2ML SOLUTION	4	EX Plan Exclusion
ANTIEMETICS - MISCELLANEOUS		
<i>dronabinol cap 10 mg</i>	1	
<i>dronabinol cap 2.5 mg</i>	1	
<i>dronabinol cap 5 mg</i>	1	
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
APONVIE 32 MG/4.4ML EMULSION	4	PA EX Plan Exclusion
<i>aprepitant capsule 125 mg</i>	1	
<i>aprepitant capsule 40 mg</i>	1	
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	2	
<i>aprepitant capsule 80 mg</i>	1	
CINVANTI 130 MG/18ML EMULSION	4	PA EX Plan Exclusion
EMEND 150 MG RECON SOLN	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FOCINVEZ 150 MG/50ML SOLUTION	4	PA EX Plan Exclusion
FOSAPREPITANT DIMEGLUMINE 150 MG RECON SOLN	4	PA EX Plan Exclusion
<i>fosaprepitant dimeglumine for iv infusion 150 mg (base eq)</i>	4	EX Plan Exclusion
VARUBI (180 MG DOSE) 2 X 90 MG TAB THPK	2	PA
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
ERAXIS 100 MG RECON SOLN	4	EX Plan Exclusion
ERAXIS 50 MG RECON SOLN	4	EX Plan Exclusion
CANCIDAS 50 MG RECON SOLN	4	EX Plan Exclusion
CANCIDAS 70 MG RECON SOLN	4	EX Plan Exclusion
CASPOFUNGIN ACETATE 50 MG RECON SOLN	4	EX Plan Exclusion
<i>caspofungin acetate for iv soln 50 mg</i>	4	EX Plan Exclusion
CASPOFUNGIN ACETATE 70 MG RECON SOLN	4	EX Plan Exclusion
<i>caspofungin acetate for iv soln 70 mg</i>	4	EX Plan Exclusion
MICAFUNGIN SODIUM 100 MG RECON SOLN	4	EX Plan Exclusion
<i>micafungin sodium for iv soln 100 mg</i>	4	EX Plan Exclusion
MICAFUNGIN SODIUM 50 MG RECON SOLN	4	EX Plan Exclusion
<i>micafungin sodium for iv soln 50 mg</i>	4	EX Plan Exclusion
MYCAMINE 100 MG RECON SOLN	4	EX Plan Exclusion
MYCAMINE 50 MG RECON SOLN	4	EX Plan Exclusion
MICAFUNGIN SODIUM-NACL 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MICAFUNGIN SODIUM-NACL 150-0.9 MG/150ML-% SOLUTION	4	EX Plan Exclusion
MICAFUNGIN SODIUM-NACL 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REZZAYO 200 MG RECON SOLN	4	EX Plan Exclusion
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (TRITERPENOIDS)		
BREXAFEMME 150 MG TAB	3	PA
AMPHOTERICIN B 50 MG RECON SOLN	4	EX Plan Exclusion
ABELCET 5 MG/ML SUSPENSION	4	EX Plan Exclusion
AMBISOME 50 MG RECON SUSP	4	EX Plan Exclusion
<i>amphotericin b liposome iv for susp 50 mg</i>	4	EX Plan Exclusion
<i>flucytosine cap 250 mg</i>	1	
<i>flucytosine cap 500 mg</i>	1	
<i>griseofulvin microsize susp 125 mg/5ml</i>	1	
<i>griseofulvin microsize tab 500 mg</i>	1	
<i>griseofulvin ultramicrosize tab 125 mg</i>	1	
GRISEOFULVIN ULTRAMICROSIZE 165 MG TAB	1	
<i>griseofulvin ultramicrosize tab 250 mg</i>	1	
<i>nystatin tab 500000 unit</i>	1	
<i>terbinafine hcl tab 250 mg</i>	1	
IMIDAZOLES		
<i>ketoconazole tab 200 mg</i>	1	
TETRAZOLES		
VIVJOA 150 MG CAP THPK	3	PA
TRIAZOLES		
<i>fluconazole tab 100 mg</i>	1	
<i>fluconazole for susp 10 mg/ml</i>	1	
<i>fluconazole tab 150 mg</i>	1	
<i>fluconazole tab 200 mg</i>	1	
<i>fluconazole for susp 40 mg/ml</i>	1	
<i>fluconazole tab 50 mg</i>	1	
FLUCONAZOLE IN SODIUM CHLORIDE 100-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	4	EX Plan Exclusion
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	4	EX Plan Exclusion
CRESEMBA 186 MG CAP	3	PA
CRESEMBA 372 MG RECON SOLN	4	EX Plan Exclusion
CRESEMBA 74.5 MG CAP	3	PA
<i>itraconazole cap 100 mg</i>	1	
<i>itraconazole oral soln 10 mg/ml</i>	1	
TOLSURA 65 MG CAP	3	PA
NOXAFIL 300 MG/16.7ML SOLUTION	4	EX Plan Exclusion
<i>posaconazole tab delayed release 100 mg</i>	2	
<i>posaconazole iv soln 300 mg/16.7ml (18 mg/ml)</i>	4	EX Plan Exclusion
<i>posaconazole susp 40 mg/ml</i>	2	
VFEND IV 200 MG RECON SOLN	4	EX Plan Exclusion
VORICONAZOLE 200 MG RECON SOLN	4	EX Plan Exclusion
<i>voriconazole for inj 200 mg</i>	4	EX Plan Exclusion
<i>voriconazole tab 200 mg</i>	2	
<i>voriconazole for susp 40 mg/ml</i>	2	
<i>voriconazole tab 50 mg</i>	2	
ANTIHISTAMINES		
ANTIHISTAMINES - ETHANOLAMINES		
CARBINOXAMINE MALEATE 4 MG/5ML SOLUTION	2	
<i>carbinoxamine maleate tab 4 mg</i>	1	
CARBINOXAMINE MALEATE 6 MG TAB	3	
<i>carbinoxamine maleate tab 6 mg</i>	3	
CARBINOXAMINE MALEATE ER 4 MG/5ML SUSP	2	
<i>carbinoxamine maleate tab 6 mg</i>	3	
CLEMASTINE FUMARATE 0.67 MG/5ML SYRUP	1	
<i>clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLEMASTINE FUMARATE 2.68 MG TAB	1	
CLEMASZ 2.68 MG TAB	1	
CLEMSZA 2.68 MG TAB	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
DIPHENHYDRAMINE HCL 12.5 MG/5ML ELIXIR	1	
<i>diphenhydramine hcl elixir 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl liquid 12.5 mg/5ml</i>	1	
<i>diphenhydramine hcl inj 50 mg/ml</i>	1	
<i>diphenhydramine hcl inj 50 mg/ml</i>	1	
ANTIHISTAMINES - NON-SEDATING		
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
<i>cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)</i>	1	
QUZYTIR 10 MG/ML SOLUTION	4	EX Plan Exclusion
DESLORATADINE 2.5 MG TAB DISP	1	
<i>desloratadine tab 5 mg</i>	1	
DESLORATADINE 5 MG TAB DISP	1	
<i>levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)</i>	1	
<i>levocetirizine dihydrochloride tab 5 mg</i>	1	
ANTIHISTAMINES - PHENOTHIAZINES		
PHENERGAN 25 MG/ML SOLUTION	4	EX Plan Exclusion
PHENERGAN 50 MG/ML SOLUTION	4	EX Plan Exclusion
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	1	
<i>promethazine hcl suppos 12.5 mg</i>	1	
<i>promethazine hcl tab 12.5 mg</i>	1	
<i>promethazine hcl inj 25 mg/ml</i>	4	EX Plan Exclusion
<i>promethazine hcl suppos 25 mg</i>	1	
<i>promethazine hcl tab 25 mg</i>	1	
<i>promethazine hcl inj 50 mg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>promethazine hcl tab 50 mg</i>	1	
<i>promethazine hcl oral soln 6.25 mg/5ml</i>	1	
<i>promethazine hcl syrup 6.25 mg/5ml</i>	2	
<i>promethazine hcl suppos 12.5 mg</i>	1	
<i>promethazine hcl suppos 25 mg</i>	1	
PROMETHEGAN 50 MG SUPPOS	1	
ANTIHISTAMINES - PIPERIDINES		
<i>cyproheptadine hcl syrup 2 mg/5ml</i>	1	
<i>cyproheptadine hcl tab 4 mg</i>	1	
ANTIHYPERTENSIVES		
ACL INHIB-INTestinal CHOLESTEROL ABSORPTION INHIB COMB		
NEXLIZET 180-10 MG TAB	2	
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		
NEXLETOL 180 MG TAB	2	
ANGIOPOIETIN-LIKE PROTEIN 3 (ANGPTL3) INHIBITORS		
EVKKEEZA 1200 MG/8ML SOLUTION	4	S EX Plan Exclusion
EVKKEEZA 345 MG/2.3ML SOLUTION	4	S EX Plan Exclusion
ANTIHYPERTENSIVES - MISC.		
<i>icosapent ethyl cap 0.5 gm</i>	1	
<i>icosapent ethyl cap 1 gm</i>	1	
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	
BILE ACID SEQUESTRANTS		
<i>cholestyramine powder 4 gm/dose</i>	1	
<i>cholestyramine powder packets 4 gm</i>	1	
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>cholestyramine light powder packets 4 gm</i>	1	
<i>cholestyramine light powder 4 gm/dose</i>	1	
<i>cholestyramine light powder packets 4 gm</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>colesevelam hcl packet for susp 3.75 gm</i>	1	
<i>colesevelam hcl tab 625 mg</i>	1	
<i>colestipol hcl tab 1 gm</i>	1	
<i>colestipol hcl granules 5 gm</i>	1	
<i>colestipol hcl granule packets 5 gm</i>	1	
FIBRIC ACID DERIVATIVES		
<i>choline fenofibrate cap dr 135 mg (fenofibric acid equiv)</i>	1	
<i>choline fenofibrate cap dr 45 mg (fenofibric acid equiv)</i>	1	
<i>fenofibrate tab 120 mg</i>	1	
<i>fenofibrate tab 145 mg</i>	1	
FENOFIBRATE 150 MG CAP	1	
<i>fenofibrate tab 160 mg</i>	1	
<i>fenofibrate tab 40 mg</i>	1	
<i>fenofibrate tab 48 mg</i>	1	
FENOFIBRATE 50 MG CAP	1	
<i>fenofibrate tab 54 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
<i>fenofibrate micronized cap 67 mg</i>	1	
<i>fenofibrate micronized cap 130 mg</i>	1	
<i>fenofibrate micronized cap 134 mg</i>	1	
<i>fenofibrate micronized cap 200 mg</i>	1	
FENOFIBRATE MICRONIZED 30 MG CAP	1	
<i>fenofibrate micronized cap 43 mg</i>	1	
<i>fenofibrate micronized cap 67 mg</i>	1	
FENOFIBRATE MICRONIZED 90 MG CAP	1	
FENOFIBRIC ACID 105 MG TAB	1	
FENOFIBRIC ACID 35 MG TAB	1	
<i>gemfibrozil tab 600 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HMG COA REDUCTASE INHIBITORS		
ATORVALIQ 20 MG/5ML SUSPENSION	3	PA
<i>atorvastatin calcium tab 10 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 20 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 40 mg (base equivalent)</i>	1	
<i>atorvastatin calcium tab 80 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 20 mg (base equivalent)</i>	1	
<i>fluvastatin sodium cap 40 mg (base equivalent)</i>	1	
<i>fluvastatin sodium tab er 24 hr 80 mg (base equivalent)</i>	1	
<i>lovastatin tab 10 mg</i>	1	
<i>lovastatin tab 20 mg</i>	1	
<i>lovastatin tab 40 mg</i>	1	
<i>pitavastatin calcium tab 1 mg</i>	1	
<i>pitavastatin calcium tab 2 mg</i>	1	
<i>pitavastatin calcium tab 4 mg</i>	1	
<i>pravastatin sodium tab 10 mg</i>	1	
<i>pravastatin sodium tab 20 mg</i>	1	
<i>pravastatin sodium tab 40 mg</i>	1	
<i>pravastatin sodium tab 80 mg</i>	1	
<i>rosuvastatin calcium tab 10 mg</i>	1	
<i>rosuvastatin calcium tab 20 mg</i>	1	
<i>rosuvastatin calcium tab 40 mg</i>	1	
<i>rosuvastatin calcium tab 5 mg</i>	1	
<i>simvastatin tab 10 mg</i>	1	
<i>simvastatin tab 20 mg</i>	1	
<i>simvastatin tab 40 mg</i>	1	
<i>simvastatin tab 5 mg</i>	1	
<i>simvastatin tab 80 mg</i>	1	
INTEST CHOLEST ABSORP INHIB-HMG COA REDUCTASE INHIB COMB		
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe tab 10 mg</i>	1	
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS		
JUXTAPID 10 MG CAP	3	PA S
JUXTAPID 20 MG CAP	3	PA S
JUXTAPID 30 MG CAP	3	PA S
JUXTAPID 5 MG CAP	3	PA S
NICOTINIC ACID DERIVATIVES		
NIACIN (ANTHYPERLIPIDEMIC) 500 MG TAB	1	
<i>niacin tab er 1000 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 500 mg (antihyperlipidemic)</i>	1	
<i>niacin tab er 750 mg (antihyperlipidemic)</i>	1	
NIACOR 500 MG TAB	1	
NIASPAN 1000 MG TAB ER	3	
NIASPAN 500 MG TAB ER	3	
NIASPAN 750 MG TAB ER	3	
PCSK9 INHIBITORS		
PRALUENT 150 MG/ML SOLN A-INJ	2	QL PA
PRALUENT 75 MG/ML SOLN A-INJ	2	QL PA
REPATHA 140 MG/ML SOLN PRSYR	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REPATHA PUSHTRONEX SYSTEM 420 MG/3.5ML SOLN CART	2	QL PA
REPATHA SURECLICK 140 MG/ML SOLN A-INJ	2	QL PA
SMALL INTERFERING RNA (SIRNA) PCSK9 INHIBITORS		
LEQVIO 284 MG/1.5ML SOLN PRSYR	2	PA
ANTIHYPERTENSIVES		
ACE INHIBITOR & CALCIUM CHANNEL BLOCKER COMBINATIONS		
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	1	
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	1	
TRANDOLAPRIL-VERAPAMIL HCL ER 1-240 MG TAB ER	1	
TRANDOLAPRIL-VERAPAMIL HCL ER 2-180 MG TAB ER	1	
TRANDOLAPRIL-VERAPAMIL HCL ER 2-240 MG TAB ER	1	
TRANDOLAPRIL-VERAPAMIL HCL ER 4-240 MG TAB ER	1	
ACE INHIBITORS		
<i>benazepril hcl tab 10 mg</i>	1	
<i>benazepril hcl tab 20 mg</i>	1	
<i>benazepril hcl tab 40 mg</i>	1	
<i>benazepril hcl tab 5 mg</i>	1	
<i>captopril tab 100 mg</i>	1	
<i>captopril tab 12.5 mg</i>	1	
<i>captopril tab 25 mg</i>	1	
<i>captopril tab 50 mg</i>	1	
<i>enalaprilat iv soln 1.25 mg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>enalapril maleate tab 10 mg</i>	1	
<i>enalapril maleate oral soln 1 mg/ml</i>	1	
<i>enalapril maleate tab 20 mg</i>	1	
<i>enalapril maleate tab 2.5 mg</i>	1	
<i>enalapril maleate tab 5 mg</i>	1	
EPANED 1 MG/ML SOLUTION	3	PA
<i>fosinopril sodium tab 10 mg</i>	1	
<i>fosinopril sodium tab 20 mg</i>	1	
<i>fosinopril sodium tab 40 mg</i>	1	
<i>lisinopril tab 10 mg</i>	1	
<i>lisinopril tab 20 mg</i>	1	
<i>lisinopril tab 2.5 mg</i>	1	
<i>lisinopril tab 30 mg</i>	1	
<i>lisinopril tab 40 mg</i>	1	
<i>lisinopril tab 5 mg</i>	1	
QBRELIS 1 MG/ML SOLUTION	3	PA
<i>moexipril hcl tab 15 mg</i>	1	
<i>moexipril hcl tab 7.5 mg</i>	1	
PERINDOPRIL ERBUMINE 2 MG TAB	1	
<i>perindopril erbumine tab 2 mg</i>	1	
<i>perindopril erbumine tab 4 mg</i>	1	
PERINDOPRIL ERBUMINE 8 MG TAB	1	
<i>perindopril erbumine tab 8 mg</i>	1	
<i>quinapril hcl tab 10 mg</i>	1	
<i>quinapril hcl tab 20 mg</i>	1	
<i>quinapril hcl tab 40 mg</i>	1	
<i>quinapril hcl tab 5 mg</i>	1	
<i>ramipril cap 10 mg</i>	1	
<i>ramipril cap 1.25 mg</i>	1	
<i>ramipril cap 2.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ramipril cap 5 mg</i>	1	
<i>trandolapril tab 1 mg</i>	1	
<i>trandolapril tab 2 mg</i>	1	
<i>trandolapril tab 4 mg</i>	1	
ACE INHIBITORS & THIAZIDE/THIAZIDE-LIKE		
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>benazepril & hydrochlorothiazide tab 5-6.25 mg</i>	1	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-15 MG TAB	1	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 25-25 MG TAB	1	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-15 MG TAB	1	
CAPTOPRIL-HYDROCHLOROTHIAZIDE 50-25 MG TAB	1	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	1	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	1	
QUINAPRIL-HYDROCHLOROTHIAZIDE 10-12.5 MG TAB	1	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	1	
QUINAPRIL-HYDROCHLOROTHIAZIDE 20-12.5 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	1	
QUINAPRIL-HYDROCHLOROTHIAZIDE 20-25 MG TAB	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
DEMSER 250 MG CAP	3	PA S
<i>metyrosine cap 250 mg</i>	1	PA S
DIBENZYLINE 10 MG CAP	3	PA
<i>phenoxybenzamine hcl cap 10 mg</i>	1	PA
<i>phentolamine mesylate for inj 5 mg</i>	4	EX Plan Exclusion
ANGIOTENSIN II RECEPTOR ANT-CA CHANNEL BLOCKER-THIAZIDES		
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	
<i>amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAG & CA CHANNEL BLOCKER COMB		
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-160 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
<i>amlodipine besylate-valsartan tab 5-320 mg</i>	1	
TELMISARTAN-AMLODIPINE 40-10 MG TAB	1	
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	
TELMISARTAN-AMLODIPINE 40-5 MG TAB	1	
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	
TELMISARTAN-AMLODIPINE 80-10 MG TAB	1	
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	
TELMISARTAN-AMLODIPINE 80-5 MG TAB	1	
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANGIOTENSIN II RECEPTOR ANTAG & THIAZIDE/THIAZIDE-LIKE		
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil tab 16 mg</i>	1	
<i>candesartan cilexetil tab 32 mg</i>	1	
<i>candesartan cilexetil tab 4 mg</i>	1	
<i>candesartan cilexetil tab 8 mg</i>	1	
<i>irbesartan tab 150 mg</i>	1	
<i>irbesartan tab 300 mg</i>	1	
<i>irbesartan tab 75 mg</i>	1	
<i>losartan potassium tab 100 mg</i>	1	
<i>losartan potassium tab 25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>losartan potassium tab 50 mg</i>	1	
<i>olmesartan medoxomil tab 20 mg</i>	1	
<i>olmesartan medoxomil tab 40 mg</i>	1	
<i>olmesartan medoxomil tab 5 mg</i>	1	
<i>telmisartan tab 20 mg</i>	1	
<i>telmisartan tab 40 mg</i>	1	
<i>telmisartan tab 80 mg</i>	1	
<i>valsartan tab 160 mg</i>	1	
<i>valsartan tab 320 mg</i>	1	
<i>valsartan tab 40 mg</i>	1	
<i>valsartan oral soln 4 mg/ml</i>	1	
<i>valsartan tab 80 mg</i>	1	
ANTIADRENERGICS - CENTRALLY ACTING		
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.1 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.2 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	
<i>clonidine td patch weekly 0.3 mg/24hr</i>	1	
<i>clonidine hcl tab 0.1 mg</i>	1	
<i>clonidine hcl tab 0.1 mg</i>	1	
<i>clonidine hcl tab 0.2 mg</i>	1	
<i>clonidine hcl tab 0.2 mg</i>	1	
<i>clonidine hcl tab 0.3 mg</i>	1	
<i>clonidine hcl tab 0.3 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 1 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
<i>guanfacine hcl tab 2 mg</i>	1	
METHYLDOPA 250 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methyldopa tab 250 mg</i>	1	
METHYLDOPA 500 MG TAB	1	
ANTIADRENERGICS - PERIPHERALLY ACTING		
<i>doxazosin mesylate tab 1 mg</i>	1	
<i>doxazosin mesylate tab 2 mg</i>	1	
<i>doxazosin mesylate tab 4 mg</i>	1	
<i>doxazosin mesylate tab 8 mg</i>	1	
<i>prazosin hcl cap 1 mg</i>	1	
<i>prazosin hcl cap 2 mg</i>	1	
<i>prazosin hcl cap 5 mg</i>	1	
<i>terazosin hcl cap 10 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 1 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 2 mg (base equivalent)</i>	1	
<i>terazosin hcl cap 5 mg (base equivalent)</i>	1	
TEZRULY 1 MG/ML SOLUTION	3	
ANTIHYPERTENSIVES - MISC.		
VECAMYL 2.5 MG TAB	3	PA
BETA BLOCKER & DIURETIC COMBINATIONS		
<i>atenolol & chlorthalidone tab 100-25 mg</i>	1	
<i>atenolol & chlorthalidone tab 50-25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	1	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren fumarate tab 150 mg (base equivalent)</i>	1	
<i>aliskiren fumarate tab 300 mg (base equivalent)</i>	1	
DOPAMINE D1 RECEPTOR AGONISTS		
CORLOPAM 10 MG/ML SOLUTION	4	EX Plan Exclusion
CORLOPAM 20 MG/2ML SOLUTION	4	EX Plan Exclusion
ENDOTHELIN RECEPTOR ANTAGONISTS		
TRYVIO 12.5 MG TAB	3	PA
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone tab 25 mg</i>	1	
<i>eplerenone tab 50 mg</i>	1	
VASODILATORS		
<i>hydralazine hcl tab 100 mg</i>	1	
<i>hydralazine hcl tab 100 mg</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl tab 10 mg</i>	1	
<i>hydralazine hcl inj 20 mg/ml</i>	4	EX Plan Exclusion
<i>hydralazine hcl inj 20 mg/ml</i>	4	EX Plan Exclusion
<i>hydralazine hcl tab 25 mg</i>	1	
<i>hydralazine hcl tab 25 mg</i>	1	
<i>hydralazine hcl tab 50 mg</i>	1	
<i>hydralazine hcl tab 50 mg</i>	1	
<i>minoxidil tab 10 mg</i>	1	
<i>minoxidil tab 2.5 mg</i>	1	
<i>nitroprusside sodium iv soln 25 mg/ml</i>	4	EX Plan Exclusion
<i>nitroprusside sodium iv soln 25 mg/ml</i>	4	EX Plan Exclusion
<i>nitroprusside sodium iv soln 25 mg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NIPRIDE RTU 20-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
NIPRIDE RTU 50-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
<i>nitroprusside sodium in nacl 0.9% iv soln 20 mg/100ml</i>	4	EX Plan Exclusion
<i>nitroprusside sodium in nacl 0.9% iv soln 50 mg/100ml</i>	4	EX Plan Exclusion
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	
PYRIMETHAMINE-LEUCOVORIN 12.5-2.5 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 25-10 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 25-5 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 50-10 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 50-20 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 50-25 MG CAP	3	
PYRIMETHAMINE-LEUCOVORIN 75-25 MG CAP	3	
ARTESUNATE 110 MG RECON SOLN	4	EX Plan Exclusion
CHLOROQUINE PHOSPHATE 250 MG TAB	1	
<i>chloroquine phosphate tab 250 mg</i>	1	
<i>chloroquine phosphate tab 500 mg</i>	1	
<i>hydroxychloroquine sulfate tab 100 mg</i>	1	
<i>hydroxychloroquine sulfate tab 200 mg</i>	1	
<i>hydroxychloroquine sulfate tab 300 mg</i>	1	
<i>hydroxychloroquine sulfate tab 400 mg</i>	1	
PLAQUENIL 200 MG TAB	2	
<i>mefloquine hcl tab 250 mg</i>	1	
PRIMAQUINE PHOSPHATE 26.3 (15 BASE) MG TAB	1	
<i>primaquine phosphate tab 26.3 mg (15 mg base)</i>	1	
<i>pyrimethamine tab 25 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>quinine sulfate cap 324 mg</i>	1	
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE 10 MG TAB	3	PA S
BLOXIVERZ 10 MG/10ML SOLUTION	4	EX Plan Exclusion
BLOXIVERZ 5 MG/10ML SOLUTION	4	EX Plan Exclusion
BLOXIVERZ 5 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 10 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>neostigmine methylsulfate iv soln 10 mg/10 ml (1 mg/ml)</i>	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 2 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 3 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
<i>neostigmine methylsulfate soln pref syr 3 mg/3ml (1 mg/ml)</i>	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 3 MG/3ML SOLUTION	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 4 MG/4ML SOLN PRSYR	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 5 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>neostigmine methylsulfate iv soln 5 mg/10 ml (0.5 mg/ml)</i>	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 5 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE 5 MG/5ML SOLUTION	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE RFID 10 MG/10ML SOLUTION	4	EX Plan Exclusion
NEOSTIGMINE METHYLSULFATE RFID 3 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
PYRIDOSTIGMINE BROMIDE 30 MG TAB	1	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	1	
<i>pyridostigmine bromide oral soln 60 mg/5ml</i>	1	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab 60 mg</i>	1	
<i>pyridostigmine bromide tab er 180 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REGONOL 10 MG/2ML SOLUTION	4	EX Plan Exclusion
ANTIMYCOBACTERIAL AGENTS		
CYCLOSERINE 250 MG CAP	1	
CYCLOSERINE 250 MG CAP	1	
<i>ethambutol hcl tab 100 mg</i>	1	
<i>ethambutol hcl tab 400 mg</i>	1	
ISONIAZID 100 MG/ML SOLUTION	4	EX Plan Exclusion
<i>isoniazid tab 100 mg</i>	1	
<i>isoniazid tab 300 mg</i>	1	
<i>isoniazid syrup 50 mg/5ml</i>	1	
<i>pyrazinamide tab 500 mg</i>	1	
<i>rifabutin cap 150 mg</i>	1	
RIFADIN 600 MG RECON SOLN	4	EX Plan Exclusion
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 150 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin cap 300 mg</i>	1	
<i>rifampin for inj 600 mg</i>	4	EX Plan Exclusion
RIFAMPIN+SYRSPEND SF 25 MG/ML SUSPENSION	3	
PRIFTIN 150 MG TAB	2	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
BELRAPZO 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
BENDAMUSTINE HCL 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
<i>bendamustine hcl for iv soln 100 mg</i>	4	S EX Plan Exclusion
<i>bendamustine hcl for iv soln 25 mg</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENDEKA 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
TREANDA 100 MG RECON SOLN	4	S EX Plan Exclusion
TREANDA 25 MG RECON SOLN	4	S EX Plan Exclusion
VIVIMUSTA 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
<i>busulfan inj 6 mg/ml</i>	4	S EX Plan Exclusion
BUSULFEX 6 MG/ML SOLUTION	4	S EX Plan Exclusion
MYLERAN 2 MG TAB	2	PA S
<i>carboplatin iv soln 150 mg/15ml</i>	4	S EX Plan Exclusion
<i>carboplatin iv soln 450 mg/45ml</i>	4	S EX Plan Exclusion
<i>carboplatin iv soln 50 mg/5ml</i>	4	S EX Plan Exclusion
<i>carboplatin iv soln 600 mg/60ml</i>	4	S EX Plan Exclusion
PARAPLATIN 1000 MG/100ML SOLUTION	4	S EX Plan Exclusion
<i>carboplatin iv soln 150 mg/15ml</i>	4	S EX Plan Exclusion
<i>carboplatin iv soln 450 mg/45ml</i>	4	S EX Plan Exclusion
<i>carboplatin iv soln 50 mg/5ml</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carboplatin iv soln 600 mg/60ml</i>	4	S EX Plan Exclusion
<i>cisplatin inj 100 mg/100ml (1 mg/ml)</i>	4	S EX Plan Exclusion
CISPLATIN 200 MG/200ML SOLUTION	4	S EX Plan Exclusion
<i>cisplatin inj 200 mg/200ml (1 mg/ml)</i>	4	S EX Plan Exclusion
CISPLATIN 50 MG/50ML SOLUTION	4	S EX Plan Exclusion
<i>cisplatin inj 50 mg/50ml (1 mg/ml)</i>	4	S EX Plan Exclusion
CISPLATIN 50 MG RECON SOLN	4	S EX Plan Exclusion
KEMOPLAT 50 MG/50ML SOLUTION	4	S EX Plan Exclusion
ZEPZELCA 4 MG RECON SOLN	4	S EX Plan Exclusion
<i>oxaliplatin iv soln 100 mg/20ml</i>	4	S EX Plan Exclusion
<i>oxaliplatin for iv inj 100 mg</i>	4	S EX Plan Exclusion
OXALIPLATIN 200 MG/40ML SOLUTION	4	S EX Plan Exclusion
<i>oxaliplatin iv soln 50 mg/10ml</i>	4	S EX Plan Exclusion
<i>oxaliplatin for iv inj 50 mg</i>	4	S EX Plan Exclusion
TEPADINA 100 MG RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TEPADINA 15 MG RECON SOLN	4	S EX Plan Exclusion
TEPYLUTE 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
TEPYLUTE 15 MG/1.5ML SOLUTION	4	S EX Plan Exclusion
<i>thiotepa for inj 100 mg</i>	4	S EX Plan Exclusion
<i>thiotepa for inj 15 mg</i>	4	S EX Plan Exclusion
GRAFAPEX 1 GM RECON SOLN	4	S EX Plan Exclusion
GRAFAPEX 5 GM RECON SOLN	4	S EX Plan Exclusion
ANDROGEN BIOSYNTHESIS INHIBITORS		
<i>abiraterone acetate tab 250 mg</i>	1	PA S
<i>abiraterone acetate tab 500 mg</i>	2	PA S
<i>abiraterone acetate tab 250 mg</i>	1	PA S
ANTIADRENALS		
LYSODREN 500 MG TAB	2	PA S
ANTIANDROGENS		
ERLEADA 240 MG TAB	2	PA S
ERLEADA 60 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bicalutamide tab 50 mg</i>	1	
NUBEQA 300 MG TAB	2	PA S
XTANDI 40 MG CAP	2	PA S
XTANDI 40 MG TAB	2	PA S
XTANDI 80 MG TAB	2	PA S
EULEXIN 125 MG CAP	2	PA S
FLUTAMIDE 125 MG CAP	2	S
<i>nilutamide tab 150 mg</i>	1	S
ANTIESTROGENS		
<i>tamoxifen citrate tab 10 mg (base equivalent)</i>	1	
<i>tamoxifen citrate tab 20 mg (base equivalent)</i>	1	
<i>toremifene citrate tab 60 mg (base equivalent)</i>	1	
ANTIMETABOLITES		
<i>azacitidine for inj 100 mg</i>	4	S EX Plan Exclusion
<i>azacitidine for inj 100 mg</i>	4	S EX Plan Exclusion
ONUREG 200 MG TAB	3	PA S
ONUREG 300 MG TAB	3	PA S
VIDAZA 100 MG RECON SUSP	4	S EX Plan Exclusion
<i>capecitabine tab 150 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>capecitabine tab 500 mg</i>	1	PA S
<i>cladribine iv soln 10 mg/10ml (1 mg/ml)</i>	4	S EX Plan Exclusion
<i>clofarabine iv soln 1 mg/ml</i>	4	S EX Plan Exclusion
CLOLAR 1 MG/ML SOLUTION	4	S EX Plan Exclusion
CYTARABINE 20 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>cytarabine inj pf 100 mg/ml</i>	4	S EX Plan Exclusion
<i>cytarabine inj pf 20 mg/ml</i>	4	S EX Plan Exclusion
DACOGEN 50 MG RECON SOLN	4	S EX Plan Exclusion
<i>decitabine for inj 50 mg</i>	4	S EX Plan Exclusion
FLOXURIDINE 0.5 GM RECON SOLN	4	S EX Plan Exclusion
FLUDARABINE PHOSPHATE 25 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>fludarabine phosphate inj 25 mg/ml</i>	4	S EX Plan Exclusion
FLUDARABINE PHOSPHATE 50 MG RECON SOLN	4	S EX Plan Exclusion
<i>fludarabine phosphate for inj 50 mg</i>	4	S EX Plan Exclusion
<i>fluorouracil iv soln 1 gm/20ml (50 mg/ml)</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluorouracil iv soln 2.5 gm/50ml (50 mg/ml)</i>	4	S EX Plan Exclusion
<i>fluorouracil iv soln 500 mg/10ml (50 mg/ml)</i>	4	S EX Plan Exclusion
<i>fluorouracil iv soln 5 gm/100ml (50 mg/ml)</i>	4	S EX Plan Exclusion
GEMCITABINE HCL 1.5 GM/15ML SOLUTION	4	S EX Plan Exclusion
GEMCITABINE HCL 1 GM/10ML SOLUTION	4	S EX Plan Exclusion
GEMCITABINE HCL 1 GM/26.3ML SOLUTION	4	S EX Plan Exclusion
<i>gemcitabine hcl inj 1 gm/26.3ml (38 mg/ml) (base equiv)</i>	4	S EX Plan Exclusion
<i>gemcitabine hcl for inj 1 gm</i>	4	S EX Plan Exclusion
GEMCITABINE HCL 200 MG/2ML SOLUTION	4	S EX Plan Exclusion
GEMCITABINE HCL 200 MG/5.26ML SOLUTION	4	S EX Plan Exclusion
<i>gemcitabine hcl inj 200 mg/5.26ml (38 mg/ml) (base equiv)</i>	4	S EX Plan Exclusion
<i>gemcitabine hcl for inj 200 mg</i>	4	S EX Plan Exclusion
GEMCITABINE HCL 2 GM/20ML SOLUTION	4	S EX Plan Exclusion
GEMCITABINE HCL 2 GM/52.6ML SOLUTION	4	S EX Plan Exclusion
<i>gemcitabine hcl inj 2 gm/52.6ml (38 mg/ml) (base equiv)</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>gemcitabine hcl for inj 2 gm</i>	4	S EX Plan Exclusion
INFUGEM 1200-0.9 MG/120ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1300-0.9 MG/130ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1400-0.9 MG/140ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1500-0.9 MG/150ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1600-0.9 MG/160ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1700-0.9 MG/170ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1800-0.9 MG/180ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 1900-0.9 MG/190ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 2000-0.9 MG/200ML-% SOLUTION	4	S EX Plan Exclusion
INFUGEM 2200-0.9 MG/220ML-% SOLUTION	4	S EX Plan Exclusion
<i>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</i>	1	
<i>mercaptopurine tab 50 mg</i>	1	
JYLAMVO 2 MG/ML SOLUTION	3	PA
METHOTREXATE 1000 MG/40ML SOLUTION	4	S EX Plan Exclusion
XATMEP 2.5 MG/ML SOLUTION	3	PA
<i>methotrexate sodium for inj 1 gm</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
METHOTREXATE SODIUM 250 MG/10ML SOLUTION	4	S EX Plan Exclusion
<i>methotrexate sodium tab 2.5 mg (base equiv)</i>	1	
METHOTREXATE SODIUM 50 MG/2ML SOLUTION	1	S
METHOTREXATE SODIUM (PF) 1000 MG/40ML SOLUTION	4	S EX Plan Exclusion
<i>methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)</i>	4	S EX Plan Exclusion
METHOTREXATE SODIUM (PF) 1 GM/40ML SOLUTION	4	S EX Plan Exclusion
<i>methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)</i>	4	S EX Plan Exclusion
<i>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)</i>	1	S
TREXALL 10 MG TAB	2	
TREXALL 15 MG TAB	2	
TREXALL 5 MG TAB	2	
TREXALL 7.5 MG TAB	2	
ARRANON 5 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>nelarabine iv soln 5 mg/ml</i>	4	S EX Plan Exclusion
PEMETREXED 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
PEMETREXED 1 GM/40ML SOLUTION	4	S EX Plan Exclusion
PEMETREXED 500 MG/20ML SOLUTION	4	S EX Plan Exclusion
PEMFEXY 500 MG/20ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AXTLE 100 MG RECON SOLN	4	S EX Plan Exclusion
AXTLE 500 MG RECON SOLN	4	S EX Plan Exclusion
PEMETREXED DIPOTASSIUM 100 MG RECON SOLN	4	S EX Plan Exclusion
PEMETREXED DIPOTASSIUM 500 MG RECON SOLN	4	S EX Plan Exclusion
ALIMTA 100 MG RECON SOLN	4	S EX Plan Exclusion
ALIMTA 500 MG RECON SOLN	4	S EX Plan Exclusion
<i>pemetrexed disodium for iv soln 1000 mg (base equiv)</i>	4	S EX Plan Exclusion
PEMETREXED DISODIUM 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
<i>pemetrexed disodium for iv soln 100 mg (base equiv)</i>	4	S EX Plan Exclusion
PEMETREXED DISODIUM 1 GM/40ML SOLUTION	4	S EX Plan Exclusion
PEMETREXED DISODIUM 500 MG/20ML SOLUTION	4	S EX Plan Exclusion
<i>pemetrexed disodium for iv soln 500 mg (base equiv)</i>	4	S EX Plan Exclusion
<i>pemetrexed disodium for iv soln 750 mg (base equiv)</i>	4	S EX Plan Exclusion
PEMETREXED DISODIUM 850 MG/34ML SOLUTION	4	S EX Plan Exclusion
PEMRYDI RTU 100 MG/10ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEMRYDI RTU 500 MG/50ML SOLUTION	4	S EX Plan Exclusion
PEMETREXED DITROMETHAMINE 100 MG RECON SOLN	4	S EX Plan Exclusion
PEMETREXED DITROMETHAMINE 500 MG RECON SOLN	4	S EX Plan Exclusion
FOLOTYN 20 MG/ML SOLUTION	4	S EX Plan Exclusion
FOLOTYN 40 MG/2ML SOLUTION	4	S EX Plan Exclusion
PRALATREXATE 20 MG/ML SOLUTION	4	S EX Plan Exclusion
PRALATREXATE 40 MG/2ML SOLUTION	4	S EX Plan Exclusion
TABLOID 40 MG TAB	2	PA S
ANTINEOPLASTIC - AKT INHIBITORS		
TRUQAP 160 MG TAB	3	PA S
TRUQAP 160 MG TAB THPK	3	PA S
TRUQAP 200 MG TAB	3	PA S
TRUQAP 200 MG TAB THPK	3	PA S
ANTINEOPLASTIC - ALK INHIBITORS		
ALECENSA 150 MG CAP	3	PA S
ALUNBRIG 180 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALUNBRIG 30 MG TAB	2	PA S
ALUNBRIG 90 & 180 MG TAB THPK	2	PA S
ALUNBRIG 90 MG TAB	2	PA S
ZYKADIA 150 MG TAB	2	PA S
XALKORI 150 MG CAP SPRINK	3	PA S
XALKORI 200 MG CAP	3	PA S
XALKORI 20 MG CAP SPRINK	3	PA S
XALKORI 250 MG CAP	3	PA S
XALKORI 50 MG CAP SPRINK	3	PA S
LORBRENA 100 MG TAB	2	PA S
LORBRENA 25 MG TAB	2	PA S
ANTINEOPLASTIC - ALLOGENEIC CELLULAR IMMUNOTHERAPY		
OMISIRGE SUSPENSION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-BCMA ANTIBODY-DRUG COMPLEX		
BLENREP 100 MG RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - ANTI-C-MET ANTIBODY-DRUG COMPLEX		
EMRELIS 100 MG RECON SOLN	4	S EX Plan Exclusion
EMRELIS 20 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CCR4 ANTIBODIES		
POTELIGEO 20 MG/5ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD19 ANTIBODIES		
MONJUVI 200 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD19 ANTIBODY-DRUG COMPLEX		
ZYNLONTA 10 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD20 ANTIBODIES		
GAZYVA 1000 MG/40ML SOLUTION	4	S EX Plan Exclusion
ARZERRA 1000 MG/50ML CONC	4	S EX Plan Exclusion
ARZERRA 100 MG/5ML CONC	4	S EX Plan Exclusion
RITUXAN 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
RITUXAN 500 MG/50ML SOLUTION	4	S EX Plan Exclusion
TRUXIMA 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
TRUXIMA 500 MG/50ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RIABNI 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
RIABNI 500 MG/50ML SOLUTION	4	S EX Plan Exclusion
RUXIENCE 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
RUXIENCE 500 MG/50ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD22 ANTIBODIES		
LUMOXITI 1 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD22 ANTIBODY-DRUG COMPLEX		
BESPONSA 0.9 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD30 ANTIBODY-DRUG COMPLEX		
ADCETRIS 50 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD33 ANTIBODY-DRUG COMPLEX		
MYLOTARG 4.5 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CD38 ANTIBODIES		
DARZALEX 100 MG/5ML SOLUTION	4	S EX Plan Exclusion
DARZALEX 400 MG/20ML SOLUTION	4	S EX Plan Exclusion
SARCLISA 100 MG/5ML SOLUTION	4	S EX Plan Exclusion
SARCLISA 500 MG/25ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - ANTI-CD79B ANTIBODY-DRUG COMPLEX		
POLIVY 140 MG RECON SOLN	4	S EX Plan Exclusion
POLIVY 30 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CLDN18.2 ANTIBODIES		
VYLOY 100 MG RECON SOLN	4	S EX Plan Exclusion
VYLOY 300 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-CTLA-4 ANTIBODIES		
YERVOY 200 MG/40ML SOLUTION	4	S EX Plan Exclusion
YERVOY 50 MG/10ML SOLUTION	4	S EX Plan Exclusion
IMJUDO 25 MG/1.25ML SOLUTION	4	S EX Plan Exclusion
IMJUDO 300 MG/15ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-GD2 ANTIBODIES		
UNITUXIN 17.5 MG/5ML SOLUTION	4	S EX Plan Exclusion
DANYELZA 40 MG/10ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
MARGENZA 250 MG/10ML SOLUTION	4	S EX Plan Exclusion
PERJETA 420 MG/14ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HERCEPTIN 150 MG RECON SOLN	4	S EX Plan Exclusion
KANJINTI 150 MG RECON SOLN	4	S EX Plan Exclusion
KANJINTI 420 MG RECON SOLN	4	S EX Plan Exclusion
OGIVRI 150 MG RECON SOLN	4	S EX Plan Exclusion
OGIVRI 420 MG RECON SOLN	4	S EX Plan Exclusion
ONTRUZANT 150 MG RECON SOLN	4	S EX Plan Exclusion
ONTRUZANT 420 MG RECON SOLN	4	S EX Plan Exclusion
HERZUMA 150 MG RECON SOLN	4	S EX Plan Exclusion
HERZUMA 420 MG RECON SOLN	4	S EX Plan Exclusion
TRAZIMERA 150 MG RECON SOLN	4	S EX Plan Exclusion
TRAZIMERA 420 MG RECON SOLN	4	S EX Plan Exclusion
HERCESSI 150 MG RECON SOLN	4	S EX Plan Exclusion
HERCESSI 420 MG RECON SOLN	4	S EX Plan Exclusion
TUKYSA 150 MG TAB	3	PA S
TUKYSA 50 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZIIHERA 300 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-NECTIN-4 ANTIBODY-DRUG COMPLEX		
PADCEV 20 MG RECON SOLN	4	S EX Plan Exclusion
PADCEV 30 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-PD-1 ANTIBODIES		
LIBTAYO 350 MG/7ML SOLUTION	4	S EX Plan Exclusion
JEMPERLI 500 MG/10ML SOLUTION	4	S EX Plan Exclusion
OPDIVO 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
OPDIVO 120 MG/12ML SOLUTION	4	S EX Plan Exclusion
OPDIVO 240 MG/24ML SOLUTION	4	S EX Plan Exclusion
OPDIVO 40 MG/4ML SOLUTION	4	S EX Plan Exclusion
KEYTRUDA 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
ZYNYZ 500 MG/20ML SOLUTION	4	S EX Plan Exclusion
TEVIMBRA 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
LOQTORZI 240 MG/6ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - ANTI-PD-L1 ANTIBODIES		
TECENTRIQ 1200 MG/20ML SOLUTION	4	S EX Plan Exclusion
TECENTRIQ 840 MG/14ML SOLUTION	4	S EX Plan Exclusion
BAVENCIO 200 MG/10ML SOLUTION	4	S EX Plan Exclusion
IMFINZI 120 MG/2.4ML SOLUTION	4	S EX Plan Exclusion
IMFINZI 500 MG/10ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-SLAMF7 ANTIBODIES		
EMPLICITI 300 MG RECON SOLN	4	S EX Plan Exclusion
EMPLICITI 400 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTI-TF ANTIBODY-DRUG COMPLEX		
TIVDAK 40 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTIC - ANTIBODY COMBINATIONS		
OPDUALAG 240-80 MG/20ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - AUTOLOGOUS CELLULAR IMMUNOTHERAPY		
TECELRA 10000000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
YESCARTA 200000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECARTUS 100000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
TECARTUS SUSPENSION	4	PA S EX Plan Exclusion
CARVYKTI 100000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
ABECMA SUSPENSION	4	PA S EX Plan Exclusion
AMTAGVI 72000000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
BREYANZI 70000000 CELLS/ML SUSPENSION	4	PA S EX Plan Exclusion
AUCATZYL 410000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
PROVENGE 50000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
KYMRIAH 250000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion
KYMRIAH 600000000 CELLS SUSPENSION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA 100 MG TAB	2	PA S
VENCLEXTA 10 MG TAB	2	PA S
VENCLEXTA 50 MG TAB	2	PA S
VENCLEXTA STARTING PACK 10 & 50 & 100 MG TAB THPK	2	PA S
ANTINEOPLASTIC - BCR-ABL KINASE INHIBITORS		
SCEMBLIX 100 MG TAB	3	PA S
SCEMBLIX 20 MG TAB	3	PA S
SCEMBLIX 40 MG TAB	3	PA S
BOSULIF 100 MG CAP	2	PA S
BOSULIF 100 MG TAB	2	PA S
BOSULIF 400 MG TAB	2	PA S
BOSULIF 500 MG TAB	2	PA S
BOSULIF 50 MG CAP	2	PA S
<i>dasatinib tab 100 mg</i>	1	PA S
<i>dasatinib tab 140 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dasatinib tab 20 mg</i>	1	PA S
<i>dasatinib tab 50 mg</i>	1	PA S
<i>dasatinib tab 70 mg</i>	1	PA S
<i>dasatinib tab 80 mg</i>	1	PA S
<i>imatinib mesylate tab 100 mg (base equivalent)</i>	1	PA S
<i>imatinib mesylate tab 400 mg (base equivalent)</i>	1	PA S
IMKELDI 80 MG/ML SOLUTION	3	PA S
<i>nilotinib hcl cap 150 mg (base equivalent)</i>	1	PA S
<i>nilotinib hcl cap 200 mg (base equivalent)</i>	1	PA S
<i>nilotinib hcl cap 50 mg (base equivalent)</i>	1	PA S
TASIGNA 150 MG CAP	3	PA S
TASIGNA 200 MG CAP	3	PA S
TASIGNA 50 MG CAP	3	PA S
DANZITEN 71 MG TAB	3	PA S
DANZITEN 95 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ICLUSIG 10 MG TAB	3	PA S
ICLUSIG 15 MG TAB	3	PA S
ICLUSIG 30 MG TAB	3	PA S
ICLUSIG 45 MG TAB	3	PA S
ANTINEOPLASTIC - BISPECIFIC T-CELL ENGAGERS		
BLINCYTO 35 MCG RECON SOLN	4	S EX Plan Exclusion
ELREXFIO 44 MG/1.1ML SOLUTION	4	S EX Plan Exclusion
ELREXFIO 76 MG/1.9ML SOLUTION	4	S EX Plan Exclusion
EPKINLY 48 MG/0.8ML SOLUTION	4	S EX Plan Exclusion
EPKINLY 4 MG/0.8ML SOLUTION	4	S EX Plan Exclusion
COLUMVI 10 MG/10ML SOLUTION	4	S EX Plan Exclusion
COLUMVI 2.5 MG/2.5ML SOLUTION	4	S EX Plan Exclusion
LYNOZYFIC 200 MG/10ML SOLUTION	4	S EX Plan Exclusion
LYNOZYFIC 5 MG/2.5ML SOLUTION	4	S EX Plan Exclusion
LUNSUMIO 1 MG/ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUNSUMIO 30 MG/30ML SOLUTION	4	S EX Plan Exclusion
TALVEY 3 MG/1.5ML SOLUTION	4	S EX Plan Exclusion
TALVEY 40 MG/ML SOLUTION	4	S EX Plan Exclusion
IMDELLTRA 10 MG RECON SOLN	4	S EX Plan Exclusion
IMDELLTRA 1 MG RECON SOLN	4	S EX Plan Exclusion
KIMMTRAK 100 MCG/0.5ML SOLUTION	4	S EX Plan Exclusion
TECVAYLI 153 MG/1.7ML SOLUTION	4	S EX Plan Exclusion
TECVAYLI 30 MG/3ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - BRAF KINASE INHIBITORS		
TAFINLAR 10 MG TAB SOL	3	PA S
TAFINLAR 50 MG CAP	3	PA S
TAFINLAR 75 MG CAP	3	PA S
BRAFTOVI 75 MG CAP	2	PA S
OJEMDA 100 MG TAB	3	PA S
OJEMDA 25 MG/ML RECON SUSP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZELBORAF 240 MG TAB	2	PA S
ANTINEOPLASTIC - BTK INHIBITORS		
CALQUENCE 100 MG CAP	2	PA S
CALQUENCE 100 MG TAB	2	PA S
IMBRUVICA 140 MG CAP	2	PA S
IMBRUVICA 70 MG CAP	2	PA S
IMBRUVICA 70 MG/ML SUSPENSION	2	PA S
JAYPIRCA 100 MG TAB	3	PA S
JAYPIRCA 50 MG TAB	3	PA S
BRUKINSA 160 MG TAB	2	PA S
BRUKINSA 80 MG CAP	2	PA S
ANTINEOPLASTIC - CSF1R KINASE INHIBITORS		
ROMVIMZA 14 MG CAP	3	PA S
ROMVIMZA 20 MG CAP	3	PA S
ROMVIMZA 30 MG CAP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - EGFR INHIBITORS		
GILOTRIF 20 MG TAB	3	PA S
GILOTRIF 30 MG TAB	3	PA S
GILOTRIF 40 MG TAB	3	PA S
ERBITUX 100 MG/50ML SOLUTION	4	S EX Plan Exclusion
ERBITUX 200 MG/100ML SOLUTION	4	S EX Plan Exclusion
VIZIMPRO 15 MG TAB	3	PA S
VIZIMPRO 30 MG TAB	3	PA S
VIZIMPRO 45 MG TAB	3	PA S
<i>erlotinib hcl tab 100 mg (base equivalent)</i>	1	PA S
<i>erlotinib hcl tab 150 mg (base equivalent)</i>	1	PA S
<i>erlotinib hcl tab 25 mg (base equivalent)</i>	1	PA S
<i>gefitinib tab 250 mg</i>	1	PA S
LAZCLUZE 240 MG TAB	3	PA S
LAZCLUZE 80 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EXKIVITY 40 MG CAP	3	PA S
PORTRAZZA 800 MG/50ML SOLUTION	4	S EX Plan Exclusion
TAGRISSO 40 MG TAB	2	PA S
TAGRISSO 80 MG TAB	2	PA S
VECTIBIX 100 MG/5ML SOLUTION	4	S EX Plan Exclusion
VECTIBIX 400 MG/20ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - FGFR KINASE INHIBITORS		
BALVERSA 3 MG TAB	3	PA S
BALVERSA 4 MG TAB	3	PA S
BALVERSA 5 MG TAB	3	PA S
LYTGOBI (12 MG DAILY DOSE) 4 MG TAB THPK	3	PA S
LYTGOBI (16 MG DAILY DOSE) 4 MG TAB THPK	3	PA S
LYTGOBI (20 MG DAILY DOSE) 4 MG TAB THPK	3	PA S
TRUSELTIQ (100MG DAILY DOSE) 100 MG CAP THPK	3	PA S
TRUSELTIQ (125MG DAILY DOSE) 100 & 25 MG CAP THPK	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUSELTIQ (50MG DAILY DOSE) 25 MG CAP THPK	3	PA S
TRUSELTIQ (75MG DAILY DOSE) 25 MG CAP THPK	3	PA S
PEMAZYRE 13.5 MG TAB	3	PA S
PEMAZYRE 4.5 MG TAB	3	PA S
PEMAZYRE 9 MG TAB	3	PA S
ANTINEOPLASTIC - GAMMA SECRETASE INHIBITORS		
OGSIVEO 100 MG TAB	3	PA S
OGSIVEO 150 MG TAB	3	PA S
OGSIVEO 50 MG TAB	3	PA S
ANTINEOPLASTIC - GENE THERAPY AGENTS		
ADSTILADRIN 300000000000 VP/ML SUSPENSION	4	S EX Plan Exclusion
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
DAURISMO 100 MG TAB	3	PA S
DAURISMO 25 MG TAB	3	PA S
ODOMZO 200 MG CAP	2	PA S
ERIVEDGE 150 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - HIF-2-ALPHA INHIBITORS		
WELIREG 40 MG TAB	3	PA S
ANTINEOPLASTIC - HISTONE DEACETYLASE INHIBITORS		
FARYDAK 15 MG CAP	3	PA S
ISTODAX 10 MG RECON SOLN	4	S EX Plan Exclusion
<i>romidepsin for iv inj 10 mg</i>	4	S EX Plan Exclusion
ROMIDEPSIN 27.5 MG/5.5ML SOLUTION	4	S EX Plan Exclusion
ZOLINZA 100 MG CAP	2	PA S
ANTINEOPLASTIC - HORMONAL AND RELATED AGENT COMBINATIONS		
AKEEGA 100-500 MG TAB	3	PA S
AKEEGA 50-500 MG TAB	3	PA S
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST 1 MG CAP	3	PA S
POMALYST 2 MG CAP	3	PA S
POMALYST 3 MG CAP	2	PA S
POMALYST 4 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - KRAS INHIBITORS		
KRAZATI 200 MG TAB	2	PA S
LUMAKRAS 120 MG TAB	2	PA S
LUMAKRAS 240 MG TAB	2	PA S
LUMAKRAS 320 MG TAB	2	PA S
ANTINEOPLASTIC - MEK INHIBITORS		
MEKTOVI 15 MG TAB	2	PA S
COTELLIC 20 MG TAB	2	PA S
GOMEKLI 2 MG CAP	3	PA S
KOSELUGO 10 MG CAP	2	PA S
KOSELUGO 25 MG CAP	2	PA S
KOSELUGO 5 MG CAP SPRINK	2	PA S
KOSELUGO 7.5 MG CAP SPRINK	2	PA S
MEKINIST 0.05 MG/ML RECON SOLN	3	PA S
MEKINIST 0.5 MG TAB	3	PA S
MEKINIST 2 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ 110 MG TAB	3	PA S
REVUFORJ 160 MG TAB	3	PA S
REVUFORJ 25 MG TAB	3	PA S
ANTINEOPLASTIC - MET INHIBITORS		
TABRECTA 150 MG TAB	3	PA S
TABRECTA 200 MG TAB	3	PA S
TEPMETKO 225 MG TAB	3	PA S
ANTINEOPLASTIC - METHYLTRANSFERASE INHIBITORS		
TAZVERIK 200 MG TAB	3	PA S
ANTINEOPLASTIC - MTOR KINASE INHIBITORS		
<i>everolimus tab 10 mg</i>	1	PA S
<i>everolimus tab 2.5 mg</i>	1	PA S
<i>everolimus tab for oral susp 2 mg</i>	1	PA S
<i>everolimus tab for oral susp 3 mg</i>	1	PA S
<i>everolimus tab 5 mg</i>	1	PA S
<i>everolimus tab for oral susp 5 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>everolimus tab 7.5 mg</i>	1	PA S
<i>everolimus tab 10 mg</i>	1	PA S
<i>everolimus tab 2.5 mg</i>	1	PA S
<i>everolimus tab 5 mg</i>	1	PA S
<i>everolimus tab 7.5 mg</i>	1	PA S
FYARRO 100 MG RECON SUSP	4	S EX Plan Exclusion
<i>temsirolimus soln for iv infusion 25 mg/ml</i>	4	S EX Plan Exclusion
TORISEL 25 MG/ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC - MULTIKINASE INHIBITORS		
CABOMETYX 20 MG TAB	3	PA S
CABOMETYX 40 MG TAB	3	PA S
CABOMETYX 60 MG TAB	3	PA S
COMETRIQ (100 MG DAILY DOSE) 80 & 20 MG KIT	3	PA S
COMETRIQ (140 MG DAILY DOSE) 3 X 20 MG & 80 MG KIT	3	PA S
COMETRIQ (60 MG DAILY DOSE) 20 MG KIT	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENSACOVE 100 MG CAP	3	PA S
ENSACOVE 25 MG CAP	3	PA S
XOSPATA 40 MG TAB	2	PA S
<i>lapatinib ditosylate tab 250 mg (base equiv)</i>	1	PA S
RYDAPT 25 MG CAP	2	PA S
NERLYNX 40 MG TAB	3	PA S
<i>pazopanib hcl tab 200 mg (base equiv)</i>	1	PA S
PAZOPANIB HCL 400 MG TAB	1	PA S
TURALIO 125 MG CAP	3	PA S
TURALIO 200 MG CAP	3	PA S
VANFLYTA 17.7 MG TAB	3	PA S
VANFLYTA 26.5 MG TAB	3	PA S
STIVARGA 40 MG TAB	2	PA S
QINLOCK 50 MG TAB	3	PA S
<i>sorafenib tosylate tab 200 mg (base equivalent)</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sunitinib malate cap 12.5 mg (base equivalent)</i>	1	PA S
<i>sunitinib malate cap 25 mg (base equivalent)</i>	1	PA S
<i>sunitinib malate cap 37.5 mg (base equivalent)</i>	1	PA S
<i>sunitinib malate cap 50 mg (base equivalent)</i>	1	PA S
FOTIVDA 0.89 MG CAP	3	PA S
FOTIVDA 1.34 MG CAP	3	PA S
UKONIQ 200 MG TAB	3	PA S
CAPRELSA 100 MG TAB	3	PA S
CAPRELSA 300 MG TAB	3	PA S
ANTINEOPLASTIC - MULTIPLE RECEPTOR ANTIBODIES		
RYBREVANT 350 MG/7ML SOLUTION	4	S EX Plan Exclusion
BIZENGRI (750 MG DOSE) 375 MG/18.75ML SOLN THPK	4	S EX Plan Exclusion
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT 100 MG TAB	3	PA S
AYVAKIT 200 MG TAB	3	PA S
AYVAKIT 25 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AYVAKIT 300 MG TAB	3	PA S
AYVAKIT 50 MG TAB	3	PA S
ANTINEOPLASTIC - PROTEASOME INHIBITORS		
BORTEZOMIB 1 MG RECON SOLN	4	S EX Plan Exclusion
BORTEZOMIB 2.5 MG RECON SOLN	4	S EX Plan Exclusion
BORTEZOMIB 3.5 MG/1.4ML SOLUTION	4	S EX Plan Exclusion
BORTEZOMIB 3.5 MG RECON SOLN	4	S EX Plan Exclusion
<i>bortezomib for inj 3.5 mg</i>	4	S EX Plan Exclusion
BORUZU 3.5 MG/1.4ML SOLUTION	4	S EX Plan Exclusion
VELCADE 3.5 MG RECON SOLN	4	S EX Plan Exclusion
KYPROLIS 10 MG RECON SOLN	4	S EX Plan Exclusion
KYPROLIS 30 MG RECON SOLN	4	S EX Plan Exclusion
KYPROLIS 60 MG RECON SOLN	4	S EX Plan Exclusion
NINLARO 2.3 MG CAP	2	PA S
NINLARO 3 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NINLARO 4 MG CAP	2	PA S
ANTINEOPLASTIC - RET INHIBITORS		
GAVRETO 100 MG CAP	2	PA S
RETEVMO 120 MG TAB	2	PA S
RETEVMO 160 MG TAB	2	PA S
RETEVMO 40 MG CAP	2	PA S
RETEVMO 40 MG TAB	2	PA S
RETEVMO 80 MG CAP	2	PA S
RETEVMO 80 MG TAB	2	PA S
ANTINEOPLASTIC - TROPOMYOSIN RECEPTOR KINASE INHIBITORS		
ROZLYTREK 100 MG CAP	2	PA S
ROZLYTREK 200 MG CAP	2	PA S
ROZLYTREK 50 MG PACKET	2	PA S
VITRAKVI 100 MG CAP	2	PA S
VITRAKVI 20 MG/ML SOLUTION	2	PA S
VITRAKVI 25 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUGTYRO 160 MG CAP	2	PA S
AUGTYRO 40 MG CAP	2	PA S
IBTROZI 200 MG CAP	3	PA S
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	3	PA S
XPOVIO (40 MG ONCE WEEKLY) 10 MG TAB THPK	3	PA S
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	3	PA S
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	3	PA S
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	3	PA S
XPOVIO (60 MG TWICE WEEKLY) 20 MG TAB THPK	3	PA S
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	3	PA S
XPOVIO (80 MG TWICE WEEKLY) 20 MG TAB THPK	3	PA S
ANTINEOPLASTIC -ANTIBODY FOR RADIOPHARMACEUTICAL THERAPY		
ZEVALIN Y-90 3.2 MG/2ML KIT	4	S EX Plan Exclusion
ANTINEOPLASTIC ANTIBIOTICS		
<i>bleomycin sulfate for inj 15 unit</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bleomycin sulfate for inj 30 unit</i>	4	S EX Plan Exclusion
COSMEGEN 0.5 MG RECON SOLN	4	S EX Plan Exclusion
<i>dactinomycin for inj 0.5 mg</i>	4	S EX Plan Exclusion
DAUNORUBICIN HCL 20 MG/4ML SOLUTION	4	S EX Plan Exclusion
<i>daunorubicin hcl iv soln 20 mg/4ml (base equiv)</i>	4	S EX Plan Exclusion
DAUNORUBICIN HCL 50 MG/10ML SOLUTION	4	S EX Plan Exclusion
<i>daunorubicin hcl iv soln 50 mg/10ml (base equiv)</i>	4	S EX Plan Exclusion
ADRIAMYCIN 10 MG RECON SOLN	4	S EX Plan Exclusion
<i>doxorubicin hcl inj 2 mg/ml</i>	4	S EX Plan Exclusion
<i>doxorubicin hcl for inj 50 mg</i>	4	S EX Plan Exclusion
DOXORUBICIN HCL 10 MG RECON SOLN	4	S EX Plan Exclusion
DOXORUBICIN HCL 2 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>doxorubicin hcl inj 2 mg/ml</i>	4	S EX Plan Exclusion
<i>doxorubicin hcl for inj 50 mg</i>	4	S EX Plan Exclusion
DOXIL 2 MG/ML SUSPENSION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>doxorubicin hcl liposomal susp (for iv infusion) 2 mg/ml</i>	4	S EX Plan Exclusion
ELLENCE 200 MG/100ML SOLUTION	4	S EX Plan Exclusion
ELLENCE 50 MG/25ML SOLUTION	4	S EX Plan Exclusion
<i>epirubicin hcl iv soln 200 mg/100ml (2 mg/ml)</i>	4	S EX Plan Exclusion
<i>epirubicin hcl iv soln 50 mg/25ml (2 mg/ml)</i>	4	S EX Plan Exclusion
IDAMYCIN PFS 10 MG/10ML SOLUTION	4	S EX Plan Exclusion
IDAMYCIN PFS 20 MG/20ML SOLUTION	4	S EX Plan Exclusion
IDAMYCIN PFS 5 MG/5ML SOLUTION	4	S EX Plan Exclusion
<i>idarubicin hcl iv inj 10 mg/10ml (1 mg/ml)</i>	4	S EX Plan Exclusion
<i>idarubicin hcl iv inj 20 mg/20ml (1 mg/ml)</i>	4	S EX Plan Exclusion
<i>idarubicin hcl iv inj 5 mg/5ml (1 mg/ml)</i>	4	S EX Plan Exclusion
JELMYTO 80 (2 X 40) MG RECON SOLN	4	S EX Plan Exclusion
MITOMYCIN 20 MG/40ML SOLN PRSYR	4	S EX Plan Exclusion
MITOMYCIN 20 MG/40ML SOLN PRSYR	4	S EX Plan Exclusion
<i>mitomycin for iv soln 20 mg</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mitomycin for iv soln 20 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 40 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 40 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 5 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 5 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 20 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 40 mg</i>	4	S EX Plan Exclusion
<i>mitomycin for iv soln 5 mg</i>	4	S EX Plan Exclusion
ZUSDURI 80 (2 X 40) MG RECON SOLN	4	S EX Plan Exclusion
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	3	PA S
<i>mitoxantrone hcl inj conc 20 mg/10ml (2 mg/ml)</i>	4	PA S EX Plan Exclusion
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	3	PA S
<i>mitoxantrone hcl inj conc 25 mg/12.5ml (2 mg/ml)</i>	4	PA S EX Plan Exclusion
<i>mitoxantrone hcl inj conc 30 mg/15ml (2 mg/ml)</i>	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>valrubicin soln for intravesical instillation 40 mg/ml</i>	4	S EX Plan Exclusion
VALSTAR 40 MG/ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC ANTIBODY-DRUG COMPLEXES		
KADCYLA 100 MG RECON SOLN	4	S EX Plan Exclusion
KADCYLA 160 MG RECON SOLN	4	S EX Plan Exclusion
ENHERTU 100 MG RECON SOLN	4	S EX Plan Exclusion
ELAHERE 100 MG/20ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC COMBINATIONS		
TECENTRIQ HYBREZA 1875-30000 MG-UT/15ML SOLUTION	4	PA S EX Plan Exclusion
AVMAPKI FAKZYNJA CO-PACK 0.8 & 200 MG THER PACK	4	PA S EX Plan Exclusion
DARZALEX FASPRO 1800-30000 MG-UT/15ML SOLUTION	4	PA S EX Plan Exclusion
VYXEOS 44-100 MG RECON SUSP	4	PA S EX Plan Exclusion
INQOVI 35-100 MG TAB	4	PA S EX Plan Exclusion
OPDIVO QVANTIG 600-10000 MG-UT/5ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHESGO 60-60-2000 MG-MG-U/ML SOLUTION	4	PA S EX Plan Exclusion
PHESGO 80-40-2000 MG-MG-U/ML SOLUTION	4	PA S EX Plan Exclusion
KISQALI FEMARA (200 MG DOSE) 200 & 2.5 MG TAB THPK	2	PA S
KISQALI FEMARA (400 MG DOSE) 200 & 2.5 MG TAB THPK	2	PA S
KISQALI FEMARA (600 MG DOSE) 200 & 2.5 MG TAB THPK	2	PA S
RITUXAN HYCELA 1400-23400 MG -UT/11.7ML SOLUTION	4	PA S EX Plan Exclusion
RITUXAN HYCELA 1600-26800 MG -UT/13.4ML SOLUTION	4	PA S EX Plan Exclusion
HERCEPTIN HYLECTA 600-10000 MG-UNT/5ML SOLUTION	4	PA S EX Plan Exclusion
LONSURF 15-6.14 MG TAB	2	PA S
LONSURF 20-8.19 MG TAB	2	PA S
ANTINEOPLASTIC ENZYMES		
ERWINASE 10000 UNIT RECON SOLN	4	S EX Plan Exclusion
ERWINAZE 10000 UNIT RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYLAZE 10 MG/0.5ML SOLUTION	4	S EX Plan Exclusion
ASPARLAS 3750 UNIT/5ML SOLUTION	4	S EX Plan Exclusion
ONCASPAR 750 UNIT/ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
AZEDRA DOSIMETRIC 15 MCI/ML SOLUTION	4	S EX Plan Exclusion
AZEDRA THERAPEUTIC 15 MCI/ML SOLUTION	4	S EX Plan Exclusion
LUTATHERA 370 MBQ/ML SOLUTION	4	S EX Plan Exclusion
PLUVICTO 1000 MBQ/ML SOLUTION	4	S EX Plan Exclusion
XOFIGO 30 MCCI/ML SOLUTION	4	S EX Plan Exclusion
QUADRAMET 1850 MBQ/ML SOLUTION	4	S EX Plan Exclusion
STRONTIUM CHLORIDE SR-89 1 MCI/ML SOLUTION	4	S EX Plan Exclusion
ANTINEOPLASTICS - INTERLEUKINS & AGONISTS		
PROLEUKIN 22000000 UNIT RECON SOLN	4	S EX Plan Exclusion
ANKTIVA 400 MCG/0.4ML SOLUTION	4	S EX Plan Exclusion
ELZONRIS 1000 MCG/ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTICS - PHOTOACTIVATED AGENTS		
UVADEX 20 MCG/ML SOLUTION	4	S EX Plan Exclusion
PHOTOFRIN 75 MG RECON SOLN	4	S EX Plan Exclusion
ANTINEOPLASTICS MISC.		
<i>arsenic trioxide iv soln 10 mg/10ml (1 mg/ml)</i>	4	S EX Plan Exclusion
<i>arsenic trioxide iv soln 12 mg/6ml (2 mg/ml)</i>	4	S EX Plan Exclusion
TRISENOX 12 MG/6ML SOLUTION	4	S EX Plan Exclusion
TICE BCG 50 MG RECON SUSP	4	S EX Plan Exclusion
DACARBAZINE 100 MG RECON SOLN	4	S EX Plan Exclusion
<i>dacarbazine for inj 200 mg</i>	4	S EX Plan Exclusion
<i>hydroxyurea cap 500 mg</i>	1	
INTRON A 10000000 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
INTRON A 10000000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
INTRON A 18000000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
INTRON A 50000000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INTRON A 6000000 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
ALFERON N 5000000 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
ACTIMMUNE 100 MCG/0.5ML SOLUTION	4	PA S EX Plan Exclusion
SYNRIBO 3.5 MG RECON SOLN	4	S EX Plan Exclusion
NIPENT 10 MG RECON SOLN	4	S EX Plan Exclusion
MATULANE 50 MG CAP	2	PA S
BESREMI 500 MCG/ML SOLN PRSYR	4	S EX Plan Exclusion
AROMATASE INHIBITORS		
<i>anastrozole tab 1 mg</i>	1	
<i>exemestane tab 25 mg</i>	1	
<i>letrozole tab 2.5 mg</i>	1	
CARBOXYPEPTIDASE ENZYME AGENTS		
VORAXAZE 1000 UNIT RECON SOLN	4	S EX Plan Exclusion
CARDIAC PROTECTIVE AGENTS		
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	4	S EX Plan Exclusion
<i>dexrazoxane hcl for inj 250 mg (base equivalent)</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexrazoxane hcl for inj 500 mg (base equivalent)</i>	4	S EX Plan Exclusion
TOTECT 500 MG RECON SOLN	4	S EX Plan Exclusion
CHEMOTHERAPY ADJUNCTS - HYPERURICEMIA AGENTS		
ELITEK 1.5 MG RECON SOLN	4	S EX Plan Exclusion
ELITEK 7.5 MG RECON SOLN	4	S EX Plan Exclusion
CHEMOTHERAPY ADJUNCTS - KERATINOCYTE GROWTH FACTORS		
KEPIVANCE 5.16 MG RECON SOLN	4	S EX Plan Exclusion
KEPIVANCE 6.25 MG RECON SOLN	4	S EX Plan Exclusion
CYCLIN-DEPENDENT KINASES (CDK) INHIBITORS		
VERZENIO 100 MG TAB	2	PA S
VERZENIO 150 MG TAB	2	PA S
VERZENIO 200 MG TAB	2	PA S
VERZENIO 50 MG TAB	2	PA S
IBRANCE 100 MG CAP	2	PA S
IBRANCE 100 MG TAB	2	PA S
IBRANCE 125 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IBRANCE 125 MG TAB	2	PA S
IBRANCE 75 MG CAP	2	PA S
IBRANCE 75 MG TAB	2	PA S
KISQALI (200 MG DOSE) 200 MG TAB THPK	2	PA S
KISQALI (400 MG DOSE) 200 MG TAB THPK	2	PA S
KISQALI (600 MG DOSE) 200 MG TAB THPK	2	PA S
ESTROGEN RECEPTOR ANTAGONIST		
FASLODEX 250 MG/5ML SOLN PRSYR	4	S EX Plan Exclusion
FULVESTRANT 250 MG/5ML SOLN PRSYR	4	S EX Plan Exclusion
<i>fulvestrant inj soln pref syr 250 mg/5ml</i>	4	S EX Plan Exclusion
FOLIC ACID ANTAGONISTS RESCUE AGENTS		
LEUCOVORIN CALCIUM 100 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>leucovorin calcium for inj 100 mg</i>	4	EX Plan Exclusion
<i>leucovorin calcium tab 10 mg</i>	1	
<i>leucovorin calcium tab 15 mg</i>	1	
<i>leucovorin calcium for inj 200 mg</i>	4	EX Plan Exclusion
<i>leucovorin calcium tab 25 mg</i>	1	
<i>leucovorin calcium for inj 350 mg</i>	4	EX Plan Exclusion
LEUCOVORIN CALCIUM 500 MG/50ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>leucovorin calcium inj 500 mg/50ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>leucovorin calcium for inj 500 mg</i>	4	EX Plan Exclusion
<i>leucovorin calcium for inj 50 mg</i>	4	EX Plan Exclusion
<i>leucovorin calcium tab 5 mg</i>	1	
KHAPZORY 175 MG RECON SOLN	4	S EX Plan Exclusion
KHAPZORY 300 MG RECON SOLN	4	S EX Plan Exclusion
LEVOLEUCOVORIN CALCIUM 50 MG RECON SOLN	4	S EX Plan Exclusion
<i>levoleucovorin calcium for iv inj 50 mg (base equiv)</i>	4	S EX Plan Exclusion
<i>levoleucovorin calcium iv soln pf 175 mg/17.5ml (base equiv)</i>	4	S EX Plan Exclusion
<i>levoleucovorin calcium iv soln pf 250 mg/25ml (base equiv)</i>	4	S EX Plan Exclusion
LEVOLEUCOVORIN CALCIUM PF 250 MG/25ML SOLUTION	4	S EX Plan Exclusion
GONADOTROPIN RELEASING HORMONE (GNRH) ANTAGONISTS		
ORGOVYX 120 MG TAB	3	PA S
IMIDAZOTETRAZINES		
TEMODAR 100 MG RECON SOLN	4	S EX Plan Exclusion
<i>temozolomide cap 100 mg</i>	1	PA S
<i>temozolomide cap 140 mg</i>	1	PA S
<i>temozolomide cap 180 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>temozolomide cap 20 mg</i>	1	PA S
<i>temozolomide cap 250 mg</i>	1	PA S
<i>temozolomide cap 5 mg</i>	1	PA S
ISOCITRATE DEHYDROGENASE 1 & 2 (IDH1 & IDH2) INHIBITORS		
VORANIGO 10 MG TAB	3	PA S
VORANIGO 40 MG TAB	3	PA S
ISOCITRATE DEHYDROGENASE-1 (IDH1) INHIBITORS		
TIBSOVO 250 MG TAB	3	PA S
REZLIDHIA 150 MG CAP	3	PA S
ISOCITRATE DEHYDROGENASE-2 (IDH2) INHIBITORS		
IDHIFA 100 MG TAB	3	PA S
IDHIFA 50 MG TAB	3	PA S
JANUS ASSOCIATED KINASE (JAK) INHIBITORS		
INREBIC 100 MG CAP	3	PA S
OJJAARA 100 MG TAB	3	PA S
OJJAARA 150 MG TAB	3	PA S
OJJAARA 200 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VONJO 100 MG CAP	3	PA S
JAKAFI 10 MG TAB	3	PA S
JAKAFI 15 MG TAB	3	PA S
JAKAFI 20 MG TAB	3	PA S
JAKAFI 25 MG TAB	3	PA S
JAKAFI 5 MG TAB	3	PA S
LHRH ANALOGS		
ZOLADEX 10.8 MG IMPLANT	4	PA S EX Plan Exclusion
ZOLADEX 3.6 MG IMPLANT	4	PA S EX Plan Exclusion
VANTAS 50 MG KIT	4	S EX Plan Exclusion
ELIGARD 7.5 MG KIT	4	PA S EX Plan Exclusion
<i>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</i>	2	PA S
<i>leuprolide acetate inj kit 5 mg/ml</i>	2	PA S
LUPRON DEPOT (1-MONTH) 3.75 MG KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT (1-MONTH) 7.5 MG KIT	4	PA S EX Plan Exclusion
ELIGARD 22.5 MG KIT	4	PA S EX Plan Exclusion
LEUPROLIDE ACETATE (3 MONTH) 22.5 MG INJECTABLE	4	PA S EX Plan Exclusion
LUPRON DEPOT (3-MONTH) 11.25 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT (3-MONTH) 22.5 MG KIT	4	PA S EX Plan Exclusion
LUTRATE DEPOT 22.5 MG INJECTABLE	4	PA S EX Plan Exclusion
VABRINTY 22.5 MG KIT	4	PA S EX Plan Exclusion
ELIGARD 30 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT (4-MONTH) 30 MG KIT	4	PA S EX Plan Exclusion
ELIGARD 45 MG KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT (6-MONTH) 45 MG KIT	4	PA S EX Plan Exclusion
VABRINTY 45 MG KIT	4	PA S EX Plan Exclusion
CAMCEVI 42 MG PRSYR	4	PA S EX Plan Exclusion
TRELSTAR MIXJECT 11.25 MG RECON SUSP	4	S EX Plan Exclusion
TRELSTAR MIXJECT 22.5 MG RECON SUSP	4	S EX Plan Exclusion
TRELSTAR MIXJECT 3.75 MG RECON SUSP	4	S EX Plan Exclusion
MITOTIC INHIBITORS		
JEVTANA 60 MG/1.5ML SOLUTION	4	S EX Plan Exclusion
DOCETAXEL 160 MG/16ML SOLUTION	4	S EX Plan Exclusion
<i>docetaxel soln for iv infusion 160 mg/16ml</i>	4	S EX Plan Exclusion
DOCETAXEL 160 MG/8ML CONC	4	S EX Plan Exclusion
<i>docetaxel for inj conc 160 mg/8ml (20 mg/ml)</i>	4	S EX Plan Exclusion
DOCETAXEL 20 MG/2ML SOLUTION	4	S EX Plan Exclusion
<i>docetaxel soln for iv infusion 20 mg/2ml</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOCETAXEL 20 MG/ML CONC	4	S EX Plan Exclusion
<i>docetaxel for inj conc 20 mg/ml</i>	4	S EX Plan Exclusion
DOCETAXEL 80 MG/4ML CONC	4	S EX Plan Exclusion
<i>docetaxel for inj conc 80 mg/4ml (20 mg/ml)</i>	4	S EX Plan Exclusion
DOCETAXEL 80 MG/8ML SOLUTION	4	S EX Plan Exclusion
<i>docetaxel soln for iv infusion 80 mg/8ml</i>	4	S EX Plan Exclusion
DOCIVYX 160 MG/16ML SOLUTION	4	S EX Plan Exclusion
DOCIVYX 20 MG/2ML SOLUTION	4	S EX Plan Exclusion
DOCIVYX 80 MG/8ML SOLUTION	4	S EX Plan Exclusion
<i>eribulin mesylate inj 1 mg/2ml (0.5 mg/ml)</i>	4	S EX Plan Exclusion
HALAVEN 1 MG/2ML SOLUTION	4	S EX Plan Exclusion
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	4	S EX Plan Exclusion
ETOPOSIDE 50 MG CAP	1	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>etoposide inj 100 mg/5ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>etoposide inj 1 gm/50ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>etoposide inj 500 mg/25ml (20 mg/ml)</i>	4	S EX Plan Exclusion
ETOPOPHOS 100 MG RECON SOLN	4	S EX Plan Exclusion
IXEMPRA KIT 15 MG RECON SOLN	4	S EX Plan Exclusion
IXEMPRA KIT 45 MG RECON SOLN	4	S EX Plan Exclusion
<i>paclitaxel iv conc 100 mg/16.7ml (6 mg/ml)</i>	4	S EX Plan Exclusion
PACLITAXEL 150 MG/25ML CONC	4	S EX Plan Exclusion
<i>paclitaxel iv conc 300 mg/50ml (6 mg/ml)</i>	4	S EX Plan Exclusion
<i>paclitaxel iv conc 30 mg/5ml (6 mg/ml)</i>	4	S EX Plan Exclusion
ABRAXANE 100 MG RECON SUSP	4	S EX Plan Exclusion
PACLITAXEL PROTEIN-BOUND PART 100 MG RECON SUSP	4	S EX Plan Exclusion
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	4	S EX Plan Exclusion
TENIPOSIDE 10 MG/ML SOLUTION	4	S EX Plan Exclusion
VINBLASTINE SULFATE 1 MG/ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>vincristine sulfate iv soln 1 mg/ml</i>	4	S EX Plan Exclusion
VINCRIStINE SULFATE 1 MG/ML SOLUTION	4	S EX Plan Exclusion
VINCRIStINE SULFATE 2 MG/2ML SOLUTION	4	S EX Plan Exclusion
MARQIBO 5 MG/31ML SUSPENSION	4	S EX Plan Exclusion
NAVELBINE 10 MG/ML SOLUTION	4	S EX Plan Exclusion
NAVELBINE 50 MG/5ML SOLUTION	4	S EX Plan Exclusion
<i>vinorelbine tartrate inj 10 mg/ml (base equiv)</i>	4	S EX Plan Exclusion
<i>vinorelbine tartrate inj 50 mg/5ml (10 mg/ml) (base equiv)</i>	4	S EX Plan Exclusion
MYELOPROTECTIVE AGENTS		
COSELA 300 MG RECON SOLN	4	S EX Plan Exclusion
NITROGEN MUSTARDS AND RELATED ANALOGUES		
LEUKERAN 2 MG TAB	2	PA S
CYCLOPHOSPHAMIDE 1000 MG/10ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 1 GM/2ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 1 GM/5ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 1 GM/5ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cyclophosphamide for inj 1 gm</i>	4	S EX Plan Exclusion
<i>cyclophosphamide for inj 1 gm</i>	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 2000 MG/20ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 25 MG CAP	1	
<i>cyclophosphamide cap 25 mg</i>	1	
CYCLOPHOSPHAMIDE 25 MG TAB	3	
CYCLOPHOSPHAMIDE 2 GM/10ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 2 GM/10ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 2 GM/4ML SOLUTION	4	S EX Plan Exclusion
<i>cyclophosphamide for inj 2 gm</i>	4	S EX Plan Exclusion
<i>cyclophosphamide for inj 2 gm</i>	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 500 MG/2.5ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 500 MG/2.5ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 500 MG/5ML SOLUTION	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 500 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>cyclophosphamide for inj 500 mg</i>	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cyclophosphamide for inj 500 mg</i>	4	S EX Plan Exclusion
CYCLOPHOSPHAMIDE 50 MG CAP	1	
<i>cyclophosphamide cap 50 mg</i>	1	
CYCLOPHOSPHAMIDE 50 MG TAB	3	
FRINDOVYX 1 GM/2ML SOLUTION	4	S EX Plan Exclusion
FRINDOVYX 2 GM/4ML SOLUTION	4	S EX Plan Exclusion
FRINDOVYX 500 MG/ML SOLUTION	4	S EX Plan Exclusion
IFEX 1 GM RECON SOLN	4	S EX Plan Exclusion
IFEX 3 GM RECON SOLN	4	S EX Plan Exclusion
IFOSFAMIDE 1 GM/20ML SOLUTION	4	S EX Plan Exclusion
<i>ifosfamide iv inj 1 gm/20ml (50 mg/ml)</i>	4	S EX Plan Exclusion
<i>ifosfamide for inj 1 gm</i>	4	S EX Plan Exclusion
IFOSFAMIDE 3 GM/60ML SOLUTION	4	S EX Plan Exclusion
<i>ifosfamide iv inj 3 gm/60ml (50 mg/ml)</i>	4	S EX Plan Exclusion
IFOSFAMIDE 3 GM RECON SOLN	4	S EX Plan Exclusion
MELPHALAN 2 MG TAB	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEPAXTO 20 MG RECON SOLN	4	S EX Plan Exclusion
ALKERAN 50 MG RECON SOLN	4	S EX Plan Exclusion
EVOMELA 50 MG RECON SOLN	4	S EX Plan Exclusion
HEPZATO W/50MM CATHETER 50 MG RECON SOLN	4	S EX Plan Exclusion
HEPZATO W/62MM CATHETER 50 MG RECON SOLN	4	S EX Plan Exclusion
IVRA 90 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>melphalan hcl for inj 50 mg (base equiv)</i>	4	S EX Plan Exclusion
NITROSOUREAS		
BICNU 100 MG RECON SOLN	4	S EX Plan Exclusion
<i>carmustine for inj 100 mg</i>	4	S EX Plan Exclusion
CARMUSTINE 300 MG RECON SOLN	4	S EX Plan Exclusion
CARMUSTINE 50 MG RECON SOLN	4	S EX Plan Exclusion
GLIADEL WAFER 7.7 MG WAFER	4	S EX Plan Exclusion
GLEOSTINE 100 MG CAP	3	PA S
GLEOSTINE 10 MG CAP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLEOSTINE 40 MG CAP	3	PA S
ZANOSAR 1 GM RECON SOLN	4	S EX Plan Exclusion
OLIGONUCLEOTIDE TELOMERASE INHIBITORS		
RYTELO 188 MG RECON SOLN	4	S EX Plan Exclusion
RYTELO 47 MG RECON SOLN	4	S EX Plan Exclusion
ONCOLYTIC VIRAL AGENTS - HSV1		
IMLYGIC 100000000 UNIT/ML SUSPENSION	4	S EX Plan Exclusion
IMLYGIC 1000000 UNIT/ML SUSPENSION	4	S EX Plan Exclusion
ORNITHINE DECARBOXYLASE (ODC) INHIBITORS		
IWILFIN 192 MG TAB	3	S
OTOPROTECTIVE AGENTS		
PEDMARK 12.5 % SOLUTION	4	S EX Plan Exclusion
PHOSPHATIDYLINOSITOL 3-KINASE (PI3K) INHIBITORS		
PIQRAY (200 MG DAILY DOSE) 200 MG TAB THPK	3	PA S
PIQRAY (250 MG DAILY DOSE) 200 & 50 MG TAB THPK	3	PA S
PIQRAY (300 MG DAILY DOSE) 2 X 150 MG TAB THPK	3	PA S
ALIQOPA 60 MG RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COPIKTRA 15 MG CAP	2	PA S
COPIKTRA 25 MG CAP	2	PA S
ZYDELIG 100 MG TAB	2	PA S
ZYDELIG 150 MG TAB	2	PA S
ITOVEBI 3 MG TAB	3	PA S
ITOVEBI 9 MG TAB	3	PA S
POLY (ADP-RIBOSE) POLYMERASE (PARP) INHIBITORS		
ZEJULA 100 MG CAP	2	PA S
ZEJULA 100 MG TAB	2	PA S
ZEJULA 200 MG TAB	2	PA S
ZEJULA 300 MG TAB	2	PA S
LYNPARZA 100 MG TAB	2	PA S
LYNPARZA 150 MG TAB	2	PA S
RUBRACA 200 MG TAB	3	PA S
RUBRACA 250 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RUBRACA 300 MG TAB	3	PA S
TALZENNA 0.1 MG CAP	3	PA S
TALZENNA 0.25 MG CAP	3	PA S
TALZENNA 0.35 MG CAP	3	PA S
TALZENNA 0.5 MG CAP	3	PA S
TALZENNA 0.75 MG CAP	3	PA S
TALZENNA 1 MG CAP	3	PA S
PROGESTINS-ANTINEOPLASTIC		
<i>megestrol acetate tab 20 mg</i>	1	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate susp 40 mg/ml</i>	1	
<i>megestrol acetate tab 40 mg</i>	1	
<i>megestrol acetate susp 40 mg/ml</i>	1	
RETINOIDS		
<i>tretinoin cap 10 mg</i>	1	PA S
SELECTIVE ESTROGEN RECEPTOR DEGRADERS		
ORSERDU 345 MG TAB	3	PA S
ORSERDU 86 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene cap 75 mg</i>	1	PA S
TETRAHYDROISOQUINOLINES		
YONDELIS 1 MG RECON SOLN	4	S EX Plan Exclusion
TOPOISOMERASE I INHIBITORS		
CAMPTOSAR 100 MG/5ML SOLUTION	4	S EX Plan Exclusion
CAMPTOSAR 300 MG/15ML SOLUTION	4	S EX Plan Exclusion
CAMPTOSAR 40 MG/2ML SOLUTION	4	S EX Plan Exclusion
<i>irinotecan hcl inj 100 mg/5ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>irinotecan hcl inj 300 mg/15ml (20 mg/ml)</i>	4	S EX Plan Exclusion
<i>irinotecan hcl inj 40 mg/2ml (20 mg/ml)</i>	4	S EX Plan Exclusion
IRINOTECAN HCL 500 MG/25ML SOLUTION	4	S EX Plan Exclusion
ONIVYDE 43 MG/10ML INJECTABLE	4	S EX Plan Exclusion
HYCAMTIN 0.25 MG CAP	2	PA S
HYCAMTIN 1 MG CAP	2	PA S
HYCAMTIN 4 MG RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPOTECAN HCL 4 MG/4ML SOLUTION	4	PA S EX Plan Exclusion
<i>topotecan hcl inj 4 mg/4ml (base equiv) (for infusion)</i>	4	PA S EX Plan Exclusion
<i>topotecan hcl for inj 4 mg (base equiv)</i>	4	PA S EX Plan Exclusion
TOPOISOMERASE I INHIBITORS - ANTIBODY-DRUG COMPLEX		
DATROWAY 100 MG RECON SOLN	4	S EX Plan Exclusion
TRODELVY 180 MG RECON SOLN	4	S EX Plan Exclusion
URINARY TRACT PROTECTIVE AGENTS		
ETHYOL 500 MG RECON SOLN	4	S EX Plan Exclusion
<i>mesna inj 100 mg/ml</i>	4	PA S EX Plan Exclusion
<i>mesna tab 400 mg</i>	1	PA
MESNEX 100 MG/ML SOLUTION	4	PA S EX Plan Exclusion
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) INHIBITORS		
INLYTA 1 MG TAB	2	PA S
INLYTA 5 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AVASTIN 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
AVASTIN 400 MG/16ML SOLUTION	4	S EX Plan Exclusion
VEGZELMA 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
VEGZELMA 400 MG/16ML SOLUTION	4	S EX Plan Exclusion
MVASI 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
MVASI 400 MG/16ML SOLUTION	4	S EX Plan Exclusion
ZIRABEV 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
ZIRABEV 400 MG/16ML SOLUTION	4	S EX Plan Exclusion
ALYMSYS 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
ALYMSYS 400 MG/16ML SOLUTION	4	S EX Plan Exclusion
FRUZAQLA 1 MG CAP	3	PA S
FRUZAQLA 5 MG CAP	3	PA S
LENVIMA (10 MG DAILY DOSE) 10 MG CAP THPK	2	PA S
LENVIMA (12 MG DAILY DOSE) 3 X 4 MG CAP THPK	2	PA S
LENVIMA (14 MG DAILY DOSE) 10 & 4 MG CAP THPK	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LENVIMA (18 MG DAILY DOSE) 10 MG & 2 X 4 MG CAP THPK	2	PA S
LENVIMA (20 MG DAILY DOSE) 2 X 10 MG CAP THPK	2	PA S
LENVIMA (24 MG DAILY DOSE) 2 X 10 MG & 4 MG CAP THPK	2	PA S
LENVIMA (4 MG DAILY DOSE) 4 MG CAP THPK	2	PA S
LENVIMA (8 MG DAILY DOSE) 2 X 4 MG CAP THPK	2	PA S
CYRAMZA 100 MG/10ML SOLUTION	4	S EX Plan Exclusion
CYRAMZA 500 MG/50ML SOLUTION	4	S EX Plan Exclusion
ZALTRAP 100 MG/4ML SOLUTION	4	S EX Plan Exclusion
ZALTRAP 200 MG/8ML SOLUTION	4	S EX Plan Exclusion
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ANTICHOLINERGICS		
<i>benztropine mesylate tab 0.5 mg</i>	1	
<i>benztropine mesylate inj 1 mg/ml</i>	4	EX Plan Exclusion
<i>benztropine mesylate inj 1 mg/ml</i>	4	EX Plan Exclusion
<i>benztropine mesylate tab 1 mg</i>	1	
<i>benztropine mesylate tab 2 mg</i>	1	
COGENTIN 1 MG/ML SOLUTION	4	EX Plan Exclusion
TRIHXYPHENIDYL HCL 0.4 MG/ML SOLUTION	1	
<i>trihexyphenidyl hcl oral soln 0.4 mg/ml</i>	1	
<i>trihexyphenidyl hcl tab 2 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trihexyphenidyl hcl tab 5 mg</i>	1	
ANTIPARKINSON DOPAMINERGICS		
<i>amantadine hcl cap 100 mg</i>	1	
<i>amantadine hcl tab 100 mg</i>	1	
<i>amantadine hcl soln 50 mg/5ml</i>	1	PA
OSMOLEX ER 129 & 193 MG TB24 THPK	3	
OSMOLEX ER 129 MG TAB ER 24H	3	PA
OSMOLEX ER 193 MG TAB ER 24H	3	PA
OSMOLEX ER 258 MG TAB ER 24H	3	PA
<i>bromocriptine mesylate tab 2.5 mg (base equivalent)</i>	1	
<i>bromocriptine mesylate cap 5 mg (base equivalent)</i>	1	
INBRIJA 42 MG CAP	2	PA S
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline mesylate tab 0.5 mg (base equiv)</i>	1	
<i>rasagiline mesylate tab 1 mg (base equiv)</i>	1	
<i>selegiline hcl cap 5 mg</i>	1	
<i>selegiline hcl tab 5 mg</i>	1	
CENTRAL/PERIPHERAL COMT INHIBITORS		
<i>tolcapone tab 100 mg</i>	1	
DECARBOXYLASE INHIBITORS		
<i>carbidopa tab 25 mg</i>	1	
LEVODOPA COMBINATIONS		
<i>carbidopa & levodopa tab 10-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 10-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-100 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-100 mg</i>	1	
<i>carbidopa & levodopa tab 25-250 mg</i>	1	
<i>carbidopa & levodopa orally disintegrating tab 25-250 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carbidopa & levodopa tab er 25-100 mg</i>	1	
<i>carbidopa & levodopa tab er 50-200 mg</i>	1	
CREXONT 35-140 MG CAP ER	3	PA
CREXONT 52.5-210 MG CAP ER	3	PA
CREXONT 70-280 MG CAP ER	3	PA
CREXONT 87.5-350 MG CAP ER	3	PA
RYTARY 23.75-95 MG CAP ER	2	PA
RYTARY 36.25-145 MG CAP ER	2	PA
RYTARY 48.75-195 MG CAP ER	2	PA
RYTARY 61.25-245 MG CAP ER	2	PA
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
CARBIDOPA-LEVODOPA-ENTACAPONE 37.5-150-200 MG TAB	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
NONERGOLINE DOPAMINE RECEPTOR AGONISTS		
<i>apomorphine hcl soln cartridge 30 mg/3ml</i>	2	PA S
KYNMOBI 10 MG FILM	2	PA S
KYNMOBI 15 MG FILM	2	PA S
KYNMOBI 20 MG FILM	2	PA S
KYNMOBI 25 MG FILM	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KYNMOBI 30 MG FILM	2	PA S
<i>pramipexole dihydrochloride tab 0.125 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.25 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab 1 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.375 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 0.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 1.5 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 2.25 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3.75 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 3 mg</i>	1	
<i>pramipexole dihydrochloride tab er 24hr 4.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 0.25 mg</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 0.5 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 1 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 2 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 3 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 4 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab 5 mg</i>	1	
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ropinirole hydrochloride tab er 24hr 12 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 2 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 4 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 6 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
<i>ropinirole hydrochloride tab er 24hr 8 mg (base equivalent)</i>	1	
NEUPRO 1 MG/24HR PATCH 24HR	2	PA
NEUPRO 2 MG/24HR PATCH 24HR	2	PA
NEUPRO 3 MG/24HR PATCH 24HR	2	PA
NEUPRO 4 MG/24HR PATCH 24HR	2	PA
NEUPRO 6 MG/24HR PATCH 24HR	2	PA
NEUPRO 8 MG/24HR PATCH 24HR	2	PA
PERIPHERAL COMT INHIBITORS		
<i>entacapone tab 200 mg</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium oral solution 8 meq/5ml</i>	1	
LITHIUM CARBONATE 150 MG CAP	1	
<i>lithium carbonate cap 150 mg</i>	1	
LITHIUM CARBONATE 300 MG CAP	1	
<i>lithium carbonate cap 300 mg</i>	1	
<i>lithium carbonate tab 300 mg</i>	1	
LITHIUM CARBONATE 600 MG CAP	1	
<i>lithium carbonate cap 600 mg</i>	1	
<i>lithium carbonate tab er 300 mg</i>	1	
<i>lithium carbonate tab er 450 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPSYCHOTICS - MISC.		
VRAYLAR 1.5 & 3 MG CAP THPK	3	PA
VRAYLAR 1.5 MG CAP	3	PA
VRAYLAR 3 MG CAP	3	PA
VRAYLAR 4.5 MG CAP	3	PA
VRAYLAR 6 MG CAP	3	PA
CAPLYTA 10.5 MG CAP	3	PA
CAPLYTA 21 MG CAP	3	PA
CAPLYTA 42 MG CAP	3	PA
<i>lurasidone hcl tab 120 mg</i>	1	
<i>lurasidone hcl tab 20 mg</i>	1	
<i>lurasidone hcl tab 40 mg</i>	1	
<i>lurasidone hcl tab 60 mg</i>	1	
<i>lurasidone hcl tab 80 mg</i>	1	
NUPLAZID 10 MG TAB	3	PA S
NUPLAZID 34 MG CAP	3	PA S
<i>ziprasidone hcl cap 20 mg</i>	1	
<i>ziprasidone hcl cap 40 mg</i>	1	
<i>ziprasidone hcl cap 60 mg</i>	1	
<i>ziprasidone hcl cap 80 mg</i>	1	
<i>ziprasidone mesylate for inj 20 mg (base equivalent)</i>	1	
BENZISOXAZOLES		
FANAPT 10 MG TAB	3	PA
FANAPT 12 MG TAB	3	PA
FANAPT 1 MG TAB	3	PA
FANAPT 2 MG TAB	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FANAPT 4 MG TAB	3	PA
FANAPT 6 MG TAB	3	PA
FANAPT 8 MG TAB	3	PA
FANAPT TITRATION PACK A 1 & 2 & 4 & 6 MG TAB	3	PA
FANAPT TITRATION PACK B 1 & 2 & 6 & 8 MG TAB	3	PA
FANAPT TITRATION PACK C 1 & 2 & 6 MG TAB	3	PA
<i>paliperidone tab er 24hr 1.5 mg</i>	1	
<i>paliperidone tab er 24hr 3 mg</i>	1	
<i>paliperidone tab er 24hr 6 mg</i>	1	
<i>paliperidone tab er 24hr 9 mg</i>	1	
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	3	PA
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	3	PA
INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR	3	PA
INVEGA SUSTENNA 156 MG/ML SUSP PRSYR	3	PA
INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR	3	PA
INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR	3	PA
INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR	3	PA
INVEGA TRINZA 273 MG/0.88ML SUSP PRSYR	3	PA
INVEGA TRINZA 410 MG/1.32ML SUSP PRSYR	3	PA
INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR	3	PA
INVEGA TRINZA 819 MG/2.63ML SUSP PRSYR	3	PA
PERSERIS 120 MG PRSYR	2	PA
PERSERIS 90 MG PRSYR	2	PA
<i>risperidone tab 0.25 mg</i>	1	
<i>risperidone tab 0.25 mg</i>	1	
RISPERIDONE 0.25 MG TAB DISP	1	
<i>risperidone tab 0.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>risperidone tab 0.5 mg</i>	1	
<i>risperidone orally disintegrating tab 0.5 mg</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone soln 1 mg/ml</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone tab 1 mg</i>	1	
<i>risperidone orally disintegrating tab 1 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone tab 2 mg</i>	1	
<i>risperidone orally disintegrating tab 2 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	
<i>risperidone tab 3 mg</i>	1	
<i>risperidone orally disintegrating tab 3 mg</i>	1	
<i>risperidone tab 4 mg</i>	1	
<i>risperidone tab 4 mg</i>	1	
<i>risperidone orally disintegrating tab 4 mg</i>	1	
RYKINDO 25 MG SRER	2	PA
RYKINDO 37.5 MG SRER	2	PA
RYKINDO 50 MG SRER	2	PA
UZEDY 100 MG/0.28ML SUSP PRSYR	2	PA
UZEDY 125 MG/0.35ML SUSP PRSYR	2	PA
UZEDY 150 MG/0.42ML SUSP PRSYR	2	PA
UZEDY 200 MG/0.56ML SUSP PRSYR	2	PA
UZEDY 250 MG/0.7ML SUSP PRSYR	2	PA
UZEDY 50 MG/0.14ML SUSP PRSYR	2	PA
UZEDY 75 MG/0.21ML SUSP PRSYR	2	PA
RISPERDAL CONSTA 12.5 MG SRER	2	PA
RISPERDAL CONSTA 25 MG SRER	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RISPERDAL CONSTA 37.5 MG SRER	2	PA
RISPERDAL CONSTA 50 MG SRER	2	PA
<i>risperidone microspheres for im extended rel susp 12.5 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 25 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 37.5 mg</i>	1	
<i>risperidone microspheres for im extended rel susp 50 mg</i>	1	
BUTYROPHENONES		
<i>haloperidol tab 0.5 mg</i>	1	
<i>haloperidol tab 10 mg</i>	1	
<i>haloperidol tab 1 mg</i>	1	
<i>haloperidol tab 20 mg</i>	1	
<i>haloperidol tab 2 mg</i>	1	
<i>haloperidol tab 5 mg</i>	1	
HALDOL DECANOATE 100 MG/ML SOLUTION	4	EX Plan Exclusion
HALDOL DECANOATE 50 MG/ML SOLUTION	4	EX Plan Exclusion
<i>haloperidol decanoate im soln 100 mg/ml</i>	4	EX Plan Exclusion
<i>haloperidol decanoate im soln 50 mg/ml</i>	4	EX Plan Exclusion
HALDOL 5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>haloperidol lactate oral conc 2 mg/ml</i>	1	
<i>haloperidol lactate inj 5 mg/ml</i>	4	EX Plan Exclusion
DIBENZO-OXEPINO PYRROLES		
<i>asenapine maleate sl tab 10 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 2.5 mg (base equiv)</i>	1	
<i>asenapine maleate sl tab 5 mg (base equiv)</i>	1	
DIBENZODIAZEPINES		
<i>clozapine tab 100 mg</i>	1	
<i>clozapine tab 100 mg</i>	1	
<i>clozapine orally disintegrating tab 100 mg</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clozapine orally disintegrating tab 100 mg</i>	2	PA
<i>clozapine orally disintegrating tab 12.5 mg</i>	1	
<i>clozapine orally disintegrating tab 12.5 mg</i>	2	PA
<i>clozapine orally disintegrating tab 150 mg</i>	2	PA
CLOZAPINE 150 MG TAB DISP	2	PA
<i>clozapine tab 200 mg</i>	1	
<i>clozapine tab 200 mg</i>	1	
<i>clozapine orally disintegrating tab 200 mg</i>	2	PA
<i>clozapine tab 25 mg</i>	1	
<i>clozapine tab 25 mg</i>	1	
<i>clozapine orally disintegrating tab 25 mg</i>	2	PA
<i>clozapine orally disintegrating tab 25 mg</i>	2	PA
<i>clozapine tab 50 mg</i>	1	
<i>clozapine tab 50 mg</i>	1	
DIBENZOTHIAZEPINES		
<i>quetiapine fumarate tab 100 mg</i>	1	
QUETIAPINE FUMARATE 150 MG TAB	1	
<i>quetiapine fumarate tab 200 mg</i>	1	
<i>quetiapine fumarate tab 25 mg</i>	1	
<i>quetiapine fumarate tab 300 mg</i>	1	
<i>quetiapine fumarate tab 400 mg</i>	1	
<i>quetiapine fumarate tab 50 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 150 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 200 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 300 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 400 mg</i>	1	
<i>quetiapine fumarate tab er 24hr 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIBENZOXAZEPINES		
<i>loxapine succinate cap 10 mg</i>	1	
<i>loxapine succinate cap 25 mg</i>	1	
<i>loxapine succinate cap 50 mg</i>	1	
<i>loxapine succinate cap 5 mg</i>	1	
DIHYDROINDOLONES		
MOLINDONE HCL 10 MG TAB	1	
MOLINDONE HCL 25 MG TAB	1	
MOLINDONE HCL 5 MG TAB	1	
MUSCARINIC AGENT - COMBINATIONS		
COBENFY 100-20 MG CAP	3	PA
COBENFY 125-30 MG CAP	3	PA
COBENFY 50-20 MG CAP	3	PA
COBENFY STARTER PACK 50-20 & 100-20 MG CAP THPK	3	PA
PHENOTHIAZINES		
CHLORPROMAZINE HCL 100 MG/ML CONC	1	
<i>chlorpromazine hcl conc 100 mg/ml</i>	1	
<i>chlorpromazine hcl tab 100 mg</i>	1	
<i>chlorpromazine hcl tab 100 mg</i>	1	
<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>chlorpromazine hcl tab 10 mg</i>	1	
<i>chlorpromazine hcl tab 200 mg</i>	1	
<i>chlorpromazine hcl tab 200 mg</i>	1	
<i>chlorpromazine hcl tab 25 mg</i>	1	
<i>chlorpromazine hcl tab 25 mg</i>	1	
CHLORPROMAZINE HCL 30 MG/ML CONC	1	
<i>chlorpromazine hcl conc 30 mg/ml</i>	1	
<i>chlorpromazine hcl tab 50 mg</i>	1	
<i>chlorpromazine hcl tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluphenazine decanoate inj 25 mg/ml</i>	4	EX Plan Exclusion
<i>fluphenazine decanoate inj 25 mg/ml</i>	4	EX Plan Exclusion
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>fluphenazine hcl tab 10 mg</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
<i>fluphenazine hcl tab 1 mg</i>	1	
FLUPHENAZINE HCL 2.5 MG/5ML ELIXIR	1	
FLUPHENAZINE HCL 2.5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>fluphenazine hcl tab 2.5 mg</i>	1	
<i>fluphenazine hcl tab 2.5 mg</i>	1	
FLUPHENAZINE HCL 5 MG/ML CONC	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>fluphenazine hcl tab 5 mg</i>	1	
<i>perphenazine tab 16 mg</i>	1	
<i>perphenazine tab 2 mg</i>	1	
<i>perphenazine tab 4 mg</i>	1	
<i>perphenazine tab 8 mg</i>	1	
<i>prochlorperazine suppos 25 mg</i>	1	
<i>prochlorperazine suppos 25 mg</i>	1	
<i>prochlorperazine edisylate inj 10 mg/2ml</i>	4	EX Plan Exclusion
PROCHLORPERAZINE EDISYLATE 50 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>prochlorperazine maleate tab 10 mg (base equivalent)</i>	1	
<i>prochlorperazine maleate tab 5 mg (base equivalent)</i>	1	
<i>thioridazine hcl tab 100 mg</i>	1	
<i>thioridazine hcl tab 10 mg</i>	1	
<i>thioridazine hcl tab 25 mg</i>	1	
<i>thioridazine hcl tab 50 mg</i>	1	
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	1	
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	1	
QUINOLINONE DERIVATIVES		
ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR	2	PA
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	2	PA
ABILIFY MAINTENA 300 MG PRSYR	2	PA
ABILIFY MAINTENA 300 MG SRER	2	PA
ABILIFY MAINTENA 400 MG PRSYR	2	PA
ABILIFY MAINTENA 400 MG SRER	2	PA
<i>aripiprazole tab 10 mg</i>	1	
<i>aripiprazole orally disintegrating tab 10 mg</i>	2	PA
<i>aripiprazole tab 15 mg</i>	1	
<i>aripiprazole orally disintegrating tab 15 mg</i>	2	PA
<i>aripiprazole oral solution 1 mg/ml</i>	2	PA
<i>aripiprazole tab 20 mg</i>	1	
<i>aripiprazole tab 2 mg</i>	1	
<i>aripiprazole tab 30 mg</i>	1	
<i>aripiprazole tab 5 mg</i>	1	
ARISTADA 1064 MG/3.9ML PRSYR	3	PA
ARISTADA 441 MG/1.6ML PRSYR	3	PA
ARISTADA 662 MG/2.4ML PRSYR	3	PA
ARISTADA 882 MG/3.2ML PRSYR	3	PA
ARISTADA INITIO 675 MG/2.4ML PRSYR	3	PA
REXULTI 0.25 MG TAB	3	PA
REXULTI 0.5 MG TAB	3	PA
REXULTI 1 MG TAB	3	PA
REXULTI 2 MG TAB	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REXULTI 3 MG TAB	3	PA
REXULTI 4 MG TAB	3	PA
THIENBENZODIAZEPINES		
<i>olanzapine for im inj 10 mg</i>	1	
<i>olanzapine tab 10 mg</i>	1	
<i>olanzapine orally disintegrating tab 10 mg</i>	1	
<i>olanzapine tab 15 mg</i>	1	
<i>olanzapine orally disintegrating tab 15 mg</i>	1	
<i>olanzapine tab 20 mg</i>	1	
<i>olanzapine orally disintegrating tab 20 mg</i>	1	
<i>olanzapine tab 2.5 mg</i>	1	
<i>olanzapine tab 5 mg</i>	1	
<i>olanzapine orally disintegrating tab 5 mg</i>	1	
<i>olanzapine tab 7.5 mg</i>	1	
THIOXANTHENES		
<i>thiothixene cap 10 mg</i>	1	
<i>thiothixene cap 1 mg</i>	1	
<i>thiothixene cap 2 mg</i>	1	
<i>thiothixene cap 5 mg</i>	1	
ANTISEPTICS & DISINFECTANTS		
CHLORINE ANTISEPTICS		
BENZALKONIUM CHLORIDE SOLUTION	3	
ANTIVIRALS		
ANTIRETROVIRAL COMBINATIONS		
TRIUMEQ 600-50-300 MG TAB	2	PA
TRIUMEQ PD 60-5-30 MG TAB SOL	2	PA
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	
<i>abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIZIVIR 300-150-300 MG TAB	2	PA
EVOTAZ 300-150 MG TAB	2	PA
BIKTARVY 30-120-15 MG TAB	2	PA
BIKTARVY 50-200-25 MG TAB	2	PA
CABENUVA 400 & 600 MG/2ML SUSP	2	PA
CABENUVA 600 & 900 MG/3ML SUSP	2	PA
PREZCOBIX 675-150 MG TAB	2	PA
PREZCOBIX 800-150 MG TAB	2	PA
SYMTUZA 800-150-200-10 MG TAB	2	PA
DOVATO 50-300 MG TAB	2	PA
JULUCA 50-25 MG TAB	2	PA
DELSTRIGO 100-300-300 MG TAB	2	PA
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	1	
EFAVIRENZ-LAMIVUDINE-TENOFOVIR 400-300-300 MG TAB	1	PA
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	1	
GENVOYA 150-150-200-10 MG TAB	2	PA
STRIBILD 150-150-200-300 MG TAB	2	PA
ODEFSEY 200-25-25 MG TAB	2	PA
<i>emtricitabine- rilpivirine-tenofovir df tab 200-25-300 mg</i>	1	
DESCOVY 120-15 MG TAB	2	PA
DESCOVY 200-25 MG TAB	2	PA
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	1	
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	
CIMDUO 300-300 MG TAB	2	PA
TEMIXYS 300-300 MG TAB	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	
KALETRA 100-25 MG TAB	3	PA
KALETRA 200-50 MG TAB	3	PA
KALETRA 400-100 MG/5ML SOLUTION	3	PA
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	
ANTIRETROVIRALS - CAPSID INHIBITORS		
SUNLENCA 300 MG TAB	2	PA
SUNLENCA 463.5 MG/1.5ML SOLUTION	3	PA
SUNLENCA 4 X 300 MG TAB THPK	2	PA
SUNLENCA 5 X 300 MG TAB THPK	2	PA
YEZTUGO 300 MG TAB	3	PA
YEZTUGO 463.5 MG/1.5ML SOLUTION	3	PA
ANTIRETROVIRALS - CCR5 ANTAGONISTS (ENTRY INHIBITOR)		
<i>maraviroc tab 150 mg</i>	1	
<i>maraviroc tab 300 mg</i>	1	
SELZENTRY 20 MG/ML SOLUTION	2	PA
SELZENTRY 25 MG TAB	2	PA
SELZENTRY 75 MG TAB	2	PA
ANTIRETROVIRALS - CD4-DIRECTED POST-ATTACHMENT INHIBITOR		
TROGARZO 200 MG/1.33ML SOLUTION	4	EX Plan Exclusion
ANTIRETROVIRALS - FUSION INHIBITORS		
FUZEON 90 MG RECON SOLN	2	PA
ANTIRETROVIRALS - GP120-DIRECTED ATTACHMENT INHIBITOR		
RUKOBIA 600 MG TAB ER 12H	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIRETROVIRALS - INTEGRASE INHIBITORS		
APRETUDE 600 MG/3ML SUSP	2	PA
VOCABRIA 30 MG TAB	3	PA
TIVICAY 10 MG TAB	2	PA
TIVICAY 25 MG TAB	2	PA
TIVICAY 50 MG TAB	2	PA
TIVICAY PD 5 MG TAB SOL	2	PA
ISENTRESS 100 MG CHEW TAB	2	PA
ISENTRESS 100 MG PACKET	2	PA
ISENTRESS 25 MG CHEW TAB	2	PA
ISENTRESS 400 MG TAB	2	PA
ISENTRESS HD 600 MG TAB	2	PA
ANTIRETROVIRALS - PROTEASE INHIBITORS		
<i>atazanavir sulfate cap 150 mg (base equiv)</i>	1	
<i>atazanavir sulfate cap 200 mg (base equiv)</i>	1	
<i>atazanavir sulfate cap 300 mg (base equiv)</i>	1	
<i>darunavir tab 600 mg</i>	1	
<i>darunavir tab 800 mg</i>	1	
PREZISTA 100 MG/ML SUSPENSION	2	PA
PREZISTA 150 MG TAB	2	PA
PREZISTA 75 MG TAB	2	PA
<i>fosamprenavir calcium tab 700 mg (base equiv)</i>	1	
LEXIVA 50 MG/ML SUSPENSION	2	PA
VIRACEPT 250 MG TAB	2	PA
VIRACEPT 625 MG TAB	2	PA
NORVIR 100 MG PACKET	2	PA
NORVIR 80 MG/ML SOLUTION	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ritonavir tab 100 mg</i>	1	
APTIVUS 250 MG CAP	2	PA
ANTIRETROVIRALS - RTI-NON-NUCLEOSIDE ANALOGUES		
PIFELTRO 100 MG TAB	2	PA
EFAVIRENZ 200 MG CAP	1	
EFAVIRENZ 50 MG CAP	1	PA
<i>efavirenz tab 600 mg</i>	1	
<i>etravirine tab 100 mg</i>	1	
<i>etravirine tab 200 mg</i>	1	
INTELENCE 25 MG TAB	2	PA
<i>nevirapine tab 200 mg</i>	1	
NEVIRAPINE 50 MG/5ML SUSPENSION	1	PA
NEVIRAPINE ER 100 MG TAB ER 24H	1	PA
<i>nevirapine tab er 24hr 400 mg</i>	1	
EDURANT 25 MG TAB	2	PA
EDURANT PED 2.5 MG TAB SOL	2	PA
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PURINES		
<i>abacavir sulfate soln 20 mg/ml (base equiv)</i>	1	
<i>abacavir sulfate tab 300 mg (base equiv)</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-PYRIMIDINES		
<i>emtricitabine caps 200 mg</i>	1	
EMTRIVA 10 MG/ML SOLUTION	2	PA
<i>lamivudine oral soln 10 mg/ml</i>	1	
<i>lamivudine oral soln 10 mg/ml</i>	1	
<i>lamivudine tab 150 mg</i>	1	
<i>lamivudine tab 150 mg</i>	1	
<i>lamivudine oral soln 10 mg/ml</i>	1	
<i>lamivudine tab 300 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lamivudine tab 300 mg</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOSIDE ANALOGUES-THYMIDINES		
RETROVIR 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>zidovudine cap 100 mg</i>	1	
<i>zidovudine tab 300 mg</i>	1	
<i>zidovudine syrup 10 mg/ml</i>	1	
ANTIRETROVIRALS - RTI-NUCLEOTIDE ANALOGUES		
<i>tenofovir disoproxil fumarate tab 300 mg</i>	1	
VIREAD 150 MG TAB	2	PA
VIREAD 200 MG TAB	2	PA
VIREAD 250 MG TAB	2	PA
VIREAD 40 MG/GM POWDER	2	PA
ANTIRETROVIRALS ADJUVANTS		
TYBOST 150 MG TAB	2	PA
ANTIVIRAL COMBINATIONS		
PAXLOVID (150/100) 10 X 150 MG & 10 X 100MG TAB THPK	2	
PAXLOVID (300/100 & 150/100) 6 X 150 MG & 5 X 100MG TAB THPK	2	
PAXLOVID (300/100) 20 X 150 MG & 10 X 100MG TAB THPK	2	
PAXLOVID 6 X 150 MG & 5 X 100MG TAB THPK	2	
CMV AGENTS		
<i>cidofovir iv inj 75 mg/ml</i>	4	EX Plan Exclusion
<i>foscarnet sodium inj 6000 mg/250ml (24 mg/ml)</i>	4	EX Plan Exclusion
FOSCAVIR 6000 MG/250ML SOLUTION	4	EX Plan Exclusion
GANCICLOVIR 500 MG/250ML SOLUTION	4	EX Plan Exclusion
GANCICLOVIR SODIUM 500 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>ganciclovir sodium for inj 500 mg</i>	4	EX Plan Exclusion
PREVYMIS 120 MG PACKET	3	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREVYMIS 20 MG PACKET	3	S
PREVYMIS 240 MG/12ML SOLUTION	4	S EX Plan Exclusion
PREVYMIS 240 MG TAB	3	S
PREVYMIS 480 MG/24ML SOLUTION	4	S EX Plan Exclusion
PREVYMIS 480 MG TAB	3	S
LIVTENCITY 200 MG TAB	3	PA S
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	
<i>valganciclovir hcl tab 450 mg (base equivalent)</i>	1	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	
<i>valganciclovir hcl for soln 50 mg/ml (base equiv)</i>	1	
HEPATITIS B AGENTS		
<i>adefovir dipivoxil tab 10 mg</i>	1	
BARACLUDE 0.05 MG/ML SOLUTION	3	PA
<i>entecavir tab 0.5 mg</i>	1	
<i>entecavir tab 1 mg</i>	1	
EPIVIR HBV 5 MG/ML SOLUTION	3	PA
<i>lamivudine tab 100 mg (hbv)</i>	1	
VEMLIDY 25 MG TAB	2	PA S
HEPATITIS C AGENT - COMBINATIONS		
ZEPATIER 50-100 MG TAB	2	PA S
MAVYRET 100-40 MG TAB	2	PA S
MAVYRET 50-20 MG PACKET	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEDIPASVIR-SOFOSBUVIR 90-400 MG TAB	2	PA S
SOFOSBUVIR-VELPATASVIR 400-100 MG TAB	1	PA S
VOSEVI 400-100-100 MG TAB	2	PA S
HEPATITIS C AGENTS		
PEGASYS 180 MCG/0.5ML SOLN PRSYR	2	PA S
PEGASYS 180 MCG/ML SOLUTION	2	PA S
RIBAVIRIN 200 MG CAP	1	PA S
RIBAVIRIN 200 MG TAB	1	PA S
HERPES AGENTS - PURINE ANALOGUES		
<i>acyclovir susp 200 mg/5ml</i>	1	
<i>acyclovir cap 200 mg</i>	1	
<i>acyclovir tab 400 mg</i>	1	
<i>acyclovir susp 200 mg/5ml</i>	1	
<i>acyclovir tab 800 mg</i>	1	
<i>acyclovir sodium iv soln 50 mg/ml</i>	4	EX Plan Exclusion
ACYCLOVIR SODIUM-NACL 200-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 1 gm</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	
<i>valacyclovir hcl tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HERPES AGENTS - THYMIDINE ANALOGUES		
<i>famciclovir tab 125 mg</i>	1	
<i>famciclovir tab 250 mg</i>	1	
<i>famciclovir tab 500 mg</i>	1	
INFLUENZA AGENTS		
RIMANTADINE HCL 100 MG TAB	1	
MISC. ANTIVIRALS		
TEMBEXA 100 MG TAB	3	
TEMBEXA 10 MG/ML SUSPENSION	3	
FAVIPIRAVIR 200 MG TAB	3	
LAGEVRIO 200 MG CAP	2	
REMDESIVIR 100 MG RECON SOLN	4	EX Plan Exclusion
REMDESIVIR 150 MG RECON SOLN	4	EX Plan Exclusion
VEKLURY 100 MG/20ML SOLUTION	4	EX Plan Exclusion
VEKLURY 100 MG RECON SOLN	4	EX Plan Exclusion
TPOXX 200 MG/20ML SOLUTION	4	EX Plan Exclusion
TPOXX 200 MG CAP	3	
NEURAMINIDASE INHIBITORS		
<i>oseltamivir phosphate cap 30 mg (base equiv)</i>	1	
<i>oseltamivir phosphate cap 45 mg (base equiv)</i>	1	
<i>oseltamivir phosphate for susp 6 mg/ml (base equiv)</i>	1	
<i>oseltamivir phosphate cap 75 mg (base equiv)</i>	1	
RAPIVAB 200 MG/20ML SOLUTION	4	EX Plan Exclusion
RELENZA DISKHALER 5 MG/ACT AER POW BA	3	
PA ENDONUCLEASE INHIBITORS		
XOFLUZA (40 MG DOSE) 1 X 40 MG TAB THPK	2	
XOFLUZA (40 MG DOSE) 2 X 20 MG TAB THPK	2	
XOFLUZA (80 MG DOSE) 1 X 80 MG TAB THPK	2	
XOFLUZA (80 MG DOSE) 2 X 40 MG TAB THPK	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RSV AGENTS - NUCLEOSIDE ANALOGUES		
<i>ribavirin for inhal soln 6 gm</i>	1	PA
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol tab 12.5 mg</i>	1	
<i>carvedilol tab 25 mg</i>	1	
<i>carvedilol tab 3.125 mg</i>	1	
<i>carvedilol tab 6.25 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 10 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 20 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 40 mg</i>	1	
<i>carvedilol phosphate cap er 24hr 80 mg</i>	1	
<i>labetalol hcl tab 100 mg</i>	1	
LABETALOL HCL 10 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
<i>labetalol hcl tab 200 mg</i>	1	
LABETALOL HCL 20 MG/4ML SOLN PRSYR	4	EX Plan Exclusion
<i>labetalol hcl tab 300 mg</i>	1	
LABETALOL HCL 400 MG TAB	1	
LABETALOL HCL 5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>labetalol hcl iv soln 5 mg/ml</i>	4	EX Plan Exclusion
LABETALOL HCL-DEXTROSE 200-5 MG/200ML-% SOLUTION	4	EX Plan Exclusion
LABETALOL HCL-SODIUM CHLORIDE 100-0.72 MG/100ML-% SOLUTION	4	EX Plan Exclusion
LABETALOL HCL-SODIUM CHLORIDE 200-0.72 MG/200ML-% SOLUTION	4	EX Plan Exclusion
LABETALOL HCL-SODIUM CHLORIDE 300-0.72 MG/300ML-% SOLUTION	4	EX Plan Exclusion
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl cap 200 mg</i>	1	
<i>acebutolol hcl cap 400 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>atenolol tab 100 mg</i>	1	
<i>atenolol tab 25 mg</i>	1	
<i>atenolol tab 50 mg</i>	1	
ATENOLOL+SYRSPEND SF 1 MG/ML SUSPENSION	3	
<i>betaxolol hcl tab 10 mg</i>	1	
<i>betaxolol hcl tab 20 mg</i>	1	
<i>bisoprolol fumarate tab 10 mg</i>	1	
BISOPROLOL FUMARATE 2.5 MG TAB	1	
<i>bisoprolol fumarate tab 5 mg</i>	1	
BREVIBLOC 100 MG/10ML SOLUTION	4	EX Plan Exclusion
ESMOLOL HCL 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>esmolol hcl inj 100 mg/10ml</i>	4	EX Plan Exclusion
ESMOLOL HCL 2000 MG/100ML SOLUTION	4	EX Plan Exclusion
ESMOLOL HCL 2500 MG/250ML SOLUTION	4	EX Plan Exclusion
BREVIBLOC IN NAACL 2000 MG/100ML SOLUTION	4	EX Plan Exclusion
BREVIBLOC IN NAACL 2500 MG/250ML SOLUTION	4	EX Plan Exclusion
BREVIBLOC PREMIXED 2500 MG/250ML SOLUTION	4	EX Plan Exclusion
BREVIBLOC PREMIXED DS 2000 MG/100ML SOLUTION	4	EX Plan Exclusion
<i>esmolol hcl-sodium chloride iv soln 2000 mg/100ml</i>	4	EX Plan Exclusion
<i>esmolol hcl-sodium chloride iv soln 2500 mg/250ml</i>	4	EX Plan Exclusion
RAPIBLYK 280 MG RECON SOLN	4	EX Plan Exclusion
KAPSPARGO SPRINKLE 100 MG CP24 SPRNK	3	
KAPSPARGO SPRINKLE 200 MG CP24 SPRNK	3	
KAPSPARGO SPRINKLE 25 MG CP24 SPRNK	3	
KAPSPARGO SPRINKLE 50 MG CP24 SPRNK	3	
<i>metoprolol succinate tab er 24hr 100 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 200 mg (tartrate equiv)</i>	1	
<i>metoprolol succinate tab er 24hr 25 mg (tartrate equiv)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metoprolol succinate tab er 24hr 50 mg (tartrate equiv)</i>	1	
TOPROL XL 50 MG TAB ER 24H	2	
<i>metoprolol tartrate tab 100 mg</i>	1	
<i>metoprolol tartrate tab 25 mg</i>	1	
<i>metoprolol tartrate tab 37.5 mg</i>	1	
<i>metoprolol tartrate tab 50 mg</i>	1	
<i>metoprolol tartrate iv soln 5 mg/5ml</i>	4	EX Plan Exclusion
<i>metoprolol tartrate tab 75 mg</i>	1	
<i>nebivolol hcl tab 10 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 20 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 2.5 mg (base equivalent)</i>	1	
<i>nebivolol hcl tab 5 mg (base equivalent)</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol tab 20 mg</i>	1	
<i>nadolol tab 40 mg</i>	1	
<i>nadolol tab 80 mg</i>	1	
<i>pindolol tab 10 mg</i>	1	
<i>pindolol tab 5 mg</i>	1	
HEMANGEOL 4.28 MG/ML SOLUTION	2	PA
<i>propranolol hcl tab 10 mg</i>	1	
<i>propranolol hcl inj 1 mg/ml</i>	4	EX Plan Exclusion
PROPRANOLOL HCL 20 MG/5ML SOLUTION	2	
<i>propranolol hcl tab 20 mg</i>	1	
PROPRANOLOL HCL 40 MG/5ML SOLUTION	2	
<i>propranolol hcl tab 40 mg</i>	1	
<i>propranolol hcl tab 60 mg</i>	1	
<i>propranolol hcl tab 80 mg</i>	1	
<i>propranolol hcl cap er 24hr 120 mg</i>	1	
<i>propranolol hcl cap er 24hr 160 mg</i>	1	
<i>propranolol hcl cap er 24hr 60 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>propranolol hcl cap er 24hr 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
<i>sotalol hcl tab 120 mg</i>	1	
SOTALOL HCL 150 MG/10ML SOLUTION	4	PA EX Plan Exclusion
<i>sotalol hcl tab 160 mg</i>	1	
<i>sotalol hcl tab 240 mg</i>	1	
<i>sotalol hcl tab 80 mg</i>	1	
SOTYLIZE 5 MG/ML SOLUTION	3	PA
<i>sotalol hcl (afib/afI) tab 120 mg</i>	1	
<i>sotalol hcl (afib/afI) tab 160 mg</i>	1	
<i>sotalol hcl (afib/afI) tab 80 mg</i>	1	
<i>timolol maleate tab 10 mg</i>	1	
TIMOLOL MALEATE 20 MG TAB	1	
<i>timolol maleate tab 20 mg</i>	1	
TIMOLOL MALEATE 5 MG TAB	1	
<i>timolol maleate tab 5 mg</i>	1	
CALCIUM CHANNEL BLOCKERS		
KATERZIA 1 MG/ML SUSPENSION	3	PA
AMLODIPINE BES+SYRSPEND SF 1 MG/ML SUSPENSION	3	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 10 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 2.5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
<i>amlodipine besylate tab 5 mg (base equivalent)</i>	1	
NORLIQVA 1 MG/ML SOLUTION	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLEVIPREX 25 MG/50ML EMULSION	4	EX Plan Exclusion
CLEVIPREX 50 MG/100ML EMULSION	4	EX Plan Exclusion
DILTIAZEM HCL 100 MG RECON SOLN	4	EX Plan Exclusion
DILTIAZEM HCL 100 MG RECON SOLN	4	EX Plan Exclusion
<i>diltiazem hcl tab 120 mg</i>	1	
<i>diltiazem hcl tab 120 mg</i>	1	
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl iv soln 125 mg/25ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl iv soln 25 mg/5ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl tab 30 mg</i>	1	
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl iv soln 50 mg/10ml (5 mg/ml)</i>	4	EX Plan Exclusion
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 60 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl tab 90 mg</i>	1	
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	
<i>diltiazem hcl cap er 12hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl tab er 24hr 120 mg</i>	1	
<i>diltiazem hcl cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl tab er 24hr 180 mg</i>	1	
<i>diltiazem hcl cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl tab er 24hr 240 mg</i>	1	
<i>diltiazem hcl tab er 24hr 300 mg</i>	1	
<i>diltiazem hcl tab er 24hr 360 mg</i>	1	

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

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 120 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 180 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 240 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 300 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 360 mg</i>	1	
<i>diltiazem hcl extended release beads cap er 24hr 420 mg</i>	1	
DILTIAZEM HCL-DEXTROSE 125-5 MG/125ML-% SOLUTION	4	EX Plan Exclusion
DILTIAZEM HCL-DEXTROSE 125-5 MG/125ML-% SOLUTION	4	EX Plan Exclusion
DILTIAZEM HCL-DEXTROSE 5-125 %-MG/125ML SOLUTION	4	EX Plan Exclusion
DILTIAZEM HCL-SODIUM CHLORIDE 100-0.72 MG/100ML-% SOLUTION	4	EX Plan Exclusion
DILTIAZEM HCL-SODIUM CHLORIDE 125-0.7 MG/125ML-% SOLUTION	4	EX Plan Exclusion
DILTIAZEM HCL-SODIUM CHLORIDE 125-0.9 MG/125ML-% SOLUTION	4	EX Plan Exclusion
<i>felodipine tab er 24hr 10 mg</i>	1	
<i>felodipine tab er 24hr 2.5 mg</i>	1	
<i>felodipine tab er 24hr 5 mg</i>	1	
<i>isradipine cap 2.5 mg</i>	1	
<i>isradipine cap 5 mg</i>	1	
LEVAMLODIPINE MALEATE 2.5 MG TAB	2	
LEVAMLODIPINE MALEATE 5 MG TAB	2	
<i>nicardipine hcl cap 20 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nicardipine hcl cap 20 mg</i>	1	
<i>nicardipine hcl iv soln 2.5 mg/ml</i>	4	EX Plan Exclusion
NICARDIPINE HCL 2.5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>nicardipine hcl iv soln 2.5 mg/ml</i>	4	EX Plan Exclusion
<i>nicardipine hcl cap 30 mg</i>	1	
<i>nicardipine hcl cap 30 mg</i>	1	
CARDENE IV 20-0.86 MG/200ML-% SOLUTION	4	EX Plan Exclusion
CARDENE IV 40-0.83 MG/200ML-% SOLUTION	4	EX Plan Exclusion
NICARDIPINE HCL IN NAACL 1-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
NICARDIPINE HCL IN NAACL 20-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
<i>nicardipine hcl iv soln 20 mg/200ml in sodium chloride 0.9%</i>	4	EX Plan Exclusion
NICARDIPINE HCL IN NAACL 40-0.9 MG/200ML-% SOLUTION	4	EX Plan Exclusion
<i>nicardipine hcl iv soln 40 mg/200ml in sodium chloride 0.9%</i>	4	EX Plan Exclusion
<i>nifedipine cap 10 mg</i>	1	
<i>nifedipine cap 20 mg</i>	1	
<i>nifedipine tab er 24hr 30 mg</i>	1	
<i>nifedipine tab er 24hr 60 mg</i>	1	
<i>nifedipine tab er 24hr 90 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 30 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 60 mg</i>	1	
<i>nifedipine tab er 24hr osmotic release 90 mg</i>	1	
<i>nimodipine cap 30 mg</i>	1	
NIMODIPINE 60 MG/20ML SOLUTION	1	
<i>nisoldipine tab er 24hr 17 mg</i>	1	
NISOLDIPINE ER 20 MG TAB ER 24H	1	
NISOLDIPINE ER 25.5 MG TAB ER 24H	1	
NISOLDIPINE ER 30 MG TAB ER 24H	1	
<i>nisoldipine tab er 24hr 34 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NISOLDIPINE ER 40 MG TAB ER 24H	1	
<i>nisoldipine tab er 24hr 8.5 mg</i>	1	
<i>verapamil hcl tab 120 mg</i>	1	
<i>verapamil hcl iv soln 2.5 mg/ml</i>	4	EX Plan Exclusion
<i>verapamil hcl tab 40 mg</i>	1	
<i>verapamil hcl tab 80 mg</i>	1	
VERAPAMIL HCL ER 100 MG CAP ER 24H	1	
<i>verapamil hcl cap er 24hr 120 mg</i>	1	
<i>verapamil hcl tab er 120 mg</i>	1	
<i>verapamil hcl cap er 24hr 180 mg</i>	1	
<i>verapamil hcl tab er 180 mg</i>	1	
VERAPAMIL HCL ER 200 MG CAP ER 24H	1	
<i>verapamil hcl cap er 24hr 240 mg</i>	1	
<i>verapamil hcl tab er 240 mg</i>	1	
VERAPAMIL HCL ER 300 MG CAP ER 24H	1	
VERAPAMIL HCL ER 360 MG CAP ER 24H	1	
CARDIOTONICS		
CARDIAC GLYCOSIDES		
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
DIGOXIN 0.05 MG/ML SOLUTION	1	
<i>digoxin oral soln 0.05 mg/ml</i>	1	
<i>digoxin inj 0.25 mg/ml</i>	4	EX Plan Exclusion
<i>digoxin tab 125 mcg (0.125 mg)</i>	1	
<i>digoxin tab 250 mcg (0.25 mg)</i>	1	
<i>digoxin tab 62.5 mcg (0.0625 mg)</i>	1	
LANOXIN 0.25 MG/ML SOLUTION	4	EX Plan Exclusion
LANOXIN PEDIATRIC 0.1 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INOTROPES		
<i>dobutamine hcl inj 12.5 mg/ml</i>	4	EX Plan Exclusion
<i>dobutamine hcl inj 12.5 mg/ml</i>	4	EX Plan Exclusion
DOBUTAMINE IN D5W 2 MG/ML SOLUTION	4	EX Plan Exclusion
DOBUTAMINE-DEXTROSE 1-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
DOBUTAMINE-DEXTROSE 4-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
DOPAMINE HCL 40 MG/ML SOLUTION	4	EX Plan Exclusion
<i>dopamine hcl inj 40 mg/ml</i>	4	EX Plan Exclusion
DOPAMINE IN D5W 0.8-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
DOPAMINE IN D5W 1.6-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
DOPAMINE IN D5W 3.2-5 MG/ML-% SOLUTION	4	EX Plan Exclusion
<i>milrinone lactate iv soln 10 mg/10ml (base equivalent)</i>	4	EX Plan Exclusion
<i>milrinone lactate iv soln 20 mg/20ml (base equivalent)</i>	4	EX Plan Exclusion
<i>milrinone lactate iv soln 50 mg/50ml (base equivalent)</i>	4	EX Plan Exclusion
<i>milrinone lactate in dextrose 5% iv soln 20 mg/100ml</i>	4	EX Plan Exclusion
<i>milrinone lactate in dextrose 5% iv soln 40 mg/200ml</i>	4	EX Plan Exclusion
CARDIOVASCULAR AGENTS - MISC.		
CALCIUM CHANNEL BLOCKER & HMG COA REDUCTASE INHIBIT COMB		
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 10-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>amlodipine besylate-atorvastatin calcium tab 2.5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 2.5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-10 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-20 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-40 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
<i>amlodipine besylate-atorvastatin calcium tab 5-80 mg</i>	1	
CARDIAC MYOSIN INHIBITORS		
CAMZYOS 10 MG CAP	3	PA S
CAMZYOS 15 MG CAP	3	PA S
CAMZYOS 2.5 MG CAP	3	PA S
CAMZYOS 5 MG CAP	3	PA S
CARDIOPLEGIC SOLUTIONS		
CARDIOPLEGIA IND PLASMA-TROMET SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA INDUCTION HIGH K SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA INDUCTION LOW DEX SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA INDUCTION NON-ENR SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA MAIN LOW DEXTROSE SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA MAIN LOW TROMETHA SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CARDIOPLEGIA MAIN PLASMA-TROME SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA MAINTENANCE SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA REPERFUSATE 4:1 SOLUTION	4	EX Plan Exclusion
<i>*cardioplegic soln**</i>	4	EX Plan Exclusion
MICROPLEGIA MSA-MSG SOLUTION	4	EX Plan Exclusion
PLEGISOL SOLUTION	4	EX Plan Exclusion
ADENOCAINE SOLN PRSYR	4	EX Plan Exclusion
CARDIOPLEGIA DEL NIDO FORMULA SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIA IND PLAS/HIK/LIDO SOLUTION	4	EX Plan Exclusion
CARDIOPLEGIC SOLN W/ LIDOCAINE SOLUTION	4	EX Plan Exclusion
CARDIOVASCULAR SGLT2 INHIBITORS		
INPEFA 200 MG TAB	3	PA
INPEFA 400 MG TAB	3	PA
IMPOTENCE AGENT COMBINATIONS		
BI-MIX 150-5 MG RECON SOLN	4	QL PA EX Plan Exclusion
IFE-BIMIX 30/1 30-1 MG/ML SOLUTION	4	QL PA EX Plan Exclusion
SUPER BI-MIX 150-10 MG RECON SOLN	4	QL PA EX Plan Exclusion
SUPER TRI-MIX 150-10-100 MG-MG-MCG RECON SOLN	4	QL PA EX Plan Exclusion
TRI-MIX 150-5-50 MG-MG-MCG RECON SOLN	4	QL PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUAD-MIX 150-10-0.1-1 MG RECON SOLN	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #4a5568; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">QL</div> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">EX</div> <div>Plan Exclusion</div> </div>
SUPER QUAD-MIX 150-20-0.2-2 MG RECON SOLN	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #4a5568; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">QL</div> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">EX</div> <div>Plan Exclusion</div> </div>
IMPOTENCE AGENTS - OTHER		
PHENYLEPHRINE HCL 2 MG/2ML SOLUTION	4	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">EX</div> <div>Plan Exclusion</div> </div>
NEPRILYSIN INHIB (ARNI)-ANGIOTENSIN II RECEPT ANTAG COMB		
ENTRESTO 15-16 MG CAP SPRINK	2	
ENTRESTO 24-26 MG TAB	2	
ENTRESTO 49-51 MG TAB	2	
ENTRESTO 6-6 MG CAP SPRINK	2	
ENTRESTO 97-103 MG TAB	2	
<i>sacubitril-valsartan tab 24-26 mg</i>	1	
<i>sacubitril-valsartan tab 49-51 mg</i>	1	
<i>sacubitril-valsartan tab 97-103 mg</i>	1	
NITRATE & VASODILATOR COMBINATIONS		
BIDIL 20-37.5 MG TAB	3	
<i>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</i>	1	
PDE INHIBITOR-ENDOTHELIN RECEPTOR ANTAGONIST COMBINATIONS		
OPSYNVI 10-20 MG TAB	2	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #28a745; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">S</div> </div>
OPSYNVI 10-40 MG TAB	2	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="background-color: #dc3545; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">PA</div> <div style="background-color: #28a745; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 2px;">S</div> </div>
PERIPHERAL VASODILATORS		
ISOXSUPRINE HCL 10 MG TAB	1	
ISOXSUPRINE HCL 20 MG TAB	1	
<i>isoxsuprine hcl tab 20 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAPAVERINE HCL 30 MG/ML SOLUTION	4	EX Plan Exclusion
PROSTAGLANDIN - IMPOTENCE AGENTS		
CAVERJECT 20 MCG RECON SOLN	4	QL PA EX Plan Exclusion
CAVERJECT 20 MCG RECON SOLN	4	QL PA EX Plan Exclusion
CAVERJECT 40 MCG RECON SOLN	4	QL PA EX Plan Exclusion
CAVERJECT IMPULSE 10 MCG KIT	4	QL PA EX Plan Exclusion
CAVERJECT IMPULSE 20 MCG KIT	4	QL PA EX Plan Exclusion
EDEX 10 MCG KIT	4	QL PA EX Plan Exclusion
EDEX 20 MCG KIT	4	QL PA EX Plan Exclusion
EDEX 40 MCG KIT	4	QL PA EX Plan Exclusion
MUSE 1000 MCG PELLETT	4	QL PA EX Plan Exclusion
MUSE 250 MCG PELLETT	4	QL PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUSE 500 MCG PELLETT	4	<ul style="list-style-type: none"> QL PA EX Plan Exclusion
PROSTAGLANDIN VASODILATORS		
<i>epoprostenol sodium for inj 0.5 mg</i>	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
<i>epoprostenol sodium for inj 1.5 mg</i>	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
FLOLAN 0.5 MG RECON SOLN	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
FLOLAN 1.5 MG RECON SOLN	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
VELETTRI 0.5 MG RECON SOLN	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
VELETTRI 1.5 MG RECON SOLN	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
AURLUMYN 100 MCG/ML SOLUTION	4	<ul style="list-style-type: none"> PA S EX Plan Exclusion
VENTAVIS 10 MCG/ML SOLUTION	3	<ul style="list-style-type: none"> PA S
VENTAVIS 20 MCG/ML SOLUTION	3	<ul style="list-style-type: none"> PA S
REMODULIN 100 MG/20ML SOLUTION	3	<ul style="list-style-type: none"> PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REMODULIN 200 MG/20ML SOLUTION	2	PA S
REMODULIN 20 MG/20ML SOLUTION	3	PA S
REMODULIN 50 MG/20ML SOLUTION	3	PA S
REMODULIN 8 MG/20ML SOLUTION	3	PA S
<i>treprostinil inj soln 100 mg/20ml (5 mg/ml)</i>	1	PA S
<i>treprostinil inj soln 200 mg/20ml (10 mg/ml)</i>	1	PA S
<i>treprostinil inj soln 20 mg/20ml (1 mg/ml)</i>	1	PA S
<i>treprostinil inj soln 50 mg/20ml (2.5 mg/ml)</i>	1	PA S
TYVASO 0.6 MG/ML SOLUTION	2	PA S
TYVASO DPI INSTITUTIONAL KIT 16 MCG POWDER	2	PA S
TYVASO DPI INSTITUTIONAL KIT 32 MCG POWDER	2	PA S
TYVASO DPI INSTITUTIONAL KIT 48 MCG POWDER	2	PA S
TYVASO DPI INSTITUTIONAL KIT 64 MCG POWDER	2	PA S
TYVASO DPI MAINTENANCE KIT 112 X 32MCG & 112 X48MCG POWDER	2	PA S
TYVASO DPI MAINTENANCE KIT 16 MCG POWDER	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TYVASO DPI MAINTENANCE KIT 32 MCG POWDER	2	PA S
TYVASO DPI MAINTENANCE KIT 48 MCG POWDER	2	PA S
TYVASO DPI MAINTENANCE KIT 64 MCG POWDER	2	PA S
TYVASO DPI TITRATION KIT 112 X 16MCG & 84 X 32MCG POWDER	2	PA S
TYVASO DPI TITRATION KIT 16 & 32 & 48 MCG POWDER	2	PA S
TYVASO REFILL 0.6 MG/ML SOLUTION	2	PA S
TYVASO STARTER 0.6 MG/ML SOLUTION	2	PA S
ORENITRAM 0.125 MG TAB ER	2	PA S
ORENITRAM 0.25 MG TAB ER	2	PA S
ORENITRAM 1 MG TAB ER	2	PA S
ORENITRAM 2.5 MG TAB ER	2	PA S
ORENITRAM 5 MG TAB ER	2	PA S
ORENITRAM MONTH 1 0.125 & 0.25 MG TBER THPK	2	PA S
ORENITRAM MONTH 2 0.125 & 0.25 MG TBER THPK	2	PA S
ORENITRAM MONTH 3 0.125 & 0.25 & 1 MG TBER THPK	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PULM HYPERTEN-SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
ADEMPAS 0.5 MG TAB	2	PA S
ADEMPAS 1.5 MG TAB	2	PA S
ADEMPAS 1 MG TAB	2	PA S
ADEMPAS 2.5 MG TAB	2	PA S
ADEMPAS 2 MG TAB	2	PA S
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR 2 X 45 MG KIT	3	PA S
WINREVAIR 2 X 60 MG KIT	3	PA S
WINREVAIR 45 MG KIT	3	PA S
WINREVAIR 60 MG KIT	3	PA S
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
<i>ambrisentan tab 10 mg</i>	1	PA S
<i>ambrisentan tab 5 mg</i>	1	PA S
<i>bosentan tab 125 mg</i>	1	PA S
<i>bosentan tab for oral susp 32 mg</i>	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bosentan tab 62.5 mg</i>	1	PA S
TRACLEER 32 MG TAB SOL	3	PA S
OPSUMIT 10 MG TAB	2	PA S
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
LIQREV 10 MG/ML SUSPENSION	3	PA S
REVATIO 10 MG/12.5ML SOLUTION	4	PA S EX Plan Exclusion
REVATIO 10 MG/ML RECON SUSP	3	PA S
REVATIO 20 MG TAB	3	PA S
<i>sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)</i>	4	PA S EX Plan Exclusion
<i>sildenafil citrate for suspension 10 mg/ml</i>	1	PA S
<i>sildenafil citrate tab 20 mg</i>	1	PA S
<i>tadalafil tab 20 mg</i>	1	PA S
<i>tadalafil tab 20 mg (pah)</i>	1	PA S
<i>tadalafil tab 20 mg (pah)</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TADLIQ 20 MG/5ML SUSPENSION	2	PA S
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI 1000 MCG TAB	2	PA S
UPTRAVI 1200 MCG TAB	2	PA S
UPTRAVI 1400 MCG TAB	2	PA S
UPTRAVI 1600 MCG TAB	2	PA S
UPTRAVI 1800 MCG RECON SOLN	4	PA S EX Plan Exclusion
UPTRAVI 200 & 800 MCG TAB THPK	2	PA S
UPTRAVI 200 MCG TAB	2	PA S
UPTRAVI 400 MCG TAB	2	PA S
UPTRAVI 600 MCG TAB	2	PA S
UPTRAVI 800 MCG TAB	2	PA S
SELECTIVE CGMP PHOSPHODIESTERASE TYPE 5 INHIBITORS		
<i>avanafil tab 100 mg</i>	4	QL EX Plan Exclusion
<i>avanafil tab 200 mg</i>	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>avanafil tab 50 mg</i>	4	QL EX Plan Exclusion
STENDRA 100 MG TAB	4	QL EX Plan Exclusion
STENDRA 200 MG TAB	4	QL EX Plan Exclusion
STENDRA 50 MG TAB	4	QL EX Plan Exclusion
<i>sildenafil citrate tab 100 mg</i>	4	QL EX Plan Exclusion
<i>sildenafil citrate tab 25 mg</i>	4	QL EX Plan Exclusion
<i>sildenafil citrate tab 50 mg</i>	4	QL EX Plan Exclusion
VIAGRA 100 MG TAB	4	QL EX Plan Exclusion
VIAGRA 25 MG TAB	4	QL EX Plan Exclusion
VIAGRA 50 MG TAB	4	QL EX Plan Exclusion
CIALIS 10 MG TAB	4	QL EX Plan Exclusion
CIALIS 20 MG TAB	4	QL EX Plan Exclusion
CIALIS 2.5 MG TAB	4	QL EX Plan Exclusion
CIALIS 5 MG TAB	4	QL EX Plan Exclusion
<i>tadalafil tab 10 mg</i>	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tadalafil tab 10 mg</i>	1	QL
<i>tadalafil tab 20 mg</i>	4	QL EX Plan Exclusion
<i>tadalafil tab 20 mg</i>	1	QL
<i>tadalafil tab 2.5 mg</i>	4	QL EX Plan Exclusion
<i>tadalafil tab 2.5 mg</i>	1	QL
<i>tadalafil tab 5 mg</i>	4	QL EX Plan Exclusion
<i>tadalafil tab 5 mg</i>	1	QL
<i>vardenafil hcl tab 10 mg</i>	4	QL EX Plan Exclusion
<i>vardenafil hcl orally disintegrating tab 10 mg</i>	4	QL EX Plan Exclusion
<i>vardenafil hcl tab 20 mg</i>	4	QL EX Plan Exclusion
<i>vardenafil hcl tab 2.5 mg</i>	4	QL EX Plan Exclusion
<i>vardenafil hcl tab 5 mg</i>	4	QL EX Plan Exclusion
SEPTAL AGENTS - ABLATION		
ABLYSINOL SOLUTION	4	EX Plan Exclusion
<i>*dehydrated alcohol intra-arterial soln***</i>	4	EX Plan Exclusion
SINUS NODE INHIBITORS		
CORLANOR 5 MG/5ML SOLUTION	3	
CORLANOR 5 MG TAB	2	
CORLANOR 7.5 MG TAB	2	
<i>ivabradine hcl tab 5 mg (base equiv)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ivabradine hcl tab 7.5 mg (base equiv)</i>	1	
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO 10 MG TAB	2	PA
VERQUVO 2.5 MG TAB	2	PA
VERQUVO 5 MG TAB	2	PA
CEPHALOSPORINS		
CEPHALOSPORIN COMBINATIONS		
AVYCAZ 2.5 (2-0.5) GM RECON SOLN	4	EX Plan Exclusion
ZERBAXA 1.5 (1-0.5) GM RECON SOLN	4	EX Plan Exclusion
CEPHALOSPORINS - 1ST GENERATION		
CEFADROXIL 1 GM TAB	1	
<i>cefadroxil for susp 250 mg/5ml</i>	1	
<i>cefadroxil for susp 500 mg/5ml</i>	1	
<i>cefadroxil cap 500 mg</i>	1	
CEFAZOLIN SODIUM 100 GM RECON SOLN	4	EX Plan Exclusion
<i>cefazolin sodium for inj 10 gm</i>	4	EX Plan Exclusion
<i>cefazolin sodium for inj 10 gm</i>	4	EX Plan Exclusion
CEFAZOLIN SODIUM 1 GM/10ML SOLN PRSYR	4	EX Plan Exclusion
CEFAZOLIN SODIUM 1 GM/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>cefazolin sodium for inj 1 gm</i>	4	EX Plan Exclusion
CEFAZOLIN SODIUM 1 GM RECON SOLN	4	EX Plan Exclusion
<i>cefazolin sodium for inj 1 gm</i>	4	EX Plan Exclusion
CEFAZOLIN SODIUM 2 GM/10ML SOLN PRSYR	4	EX Plan Exclusion
CEFAZOLIN SODIUM 2 GM/20ML SOLN PRSYR	4	EX Plan Exclusion
CEFAZOLIN SODIUM 2 GM/20ML SOLN PRSYR	4	EX Plan Exclusion
CEFAZOLIN SODIUM 2 GM RECON SOLN	4	EX Plan Exclusion
CEFAZOLIN SODIUM 300 GM RECON SOLN	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEFAZOLIN SODIUM 3 GM/30ML SOLN PRSYR	4	EX Plan Exclusion
CEFAZOLIN SODIUM 3 GM RECON SOLN	4	EX Plan Exclusion
<i>cefazolin sodium for inj 500 mg</i>	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 1-4 GM/50ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 2-3 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 2-4 GM/100ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 2-5 GM/100ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 3-2 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFAZOLIN SODIUM-DEXTROSE 3-4 GM/150ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN IN SODIUM CHLORIDE 2-0.9 GM/100ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN IN SODIUM CHLORIDE 3-0.9 GM/100ML-% SOLUTION	4	EX Plan Exclusion
CEFAZOLIN IN SODIUM CHLORIDE 3-0.9 GM/100ML-% SOLUTION	4	EX Plan Exclusion
<i>cephalexin for susp 125 mg/5ml</i>	1	
<i>cephalexin for susp 250 mg/5ml</i>	1	
<i>cephalexin cap 250 mg</i>	1	
<i>cephalexin tab 250 mg</i>	1	
<i>cephalexin cap 500 mg</i>	1	
<i>cephalexin tab 500 mg</i>	1	
<i>cephalexin cap 750 mg</i>	1	
CEPHALOSPORINS - 2ND GENERATION		
CEFACLOR 125 MG/5ML RECON SUSP	1	
CEFACLOR 250 MG/5ML RECON SUSP	1	
CEFACLOR 250 MG CAP	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEFACLOR 375 MG/5ML RECON SUSP	1	
CEFACLOR 500 MG CAP	1	
CEFACLOR ER 500 MG TAB ER 12H	2	
CEFOTAN 1 GM RECON SOLN	4	EX Plan Exclusion
CEFOTAN 2 GM RECON SOLN	4	EX Plan Exclusion
<i>cefotetan disodium for inj 1 gm</i>	4	EX Plan Exclusion
<i>cefotetan disodium for inj 1 gm</i>	4	EX Plan Exclusion
<i>cefotetan disodium for inj 2 gm</i>	4	EX Plan Exclusion
CEFOTETAN DISODIUM-DEXTROSE 1-3.58 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFOTETAN DISODIUM-DEXTROSE 2-2.08 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
<i>cefoxitin sodium for iv soln 10 gm</i>	4	EX Plan Exclusion
<i>cefoxitin sodium for iv soln 1 gm</i>	4	EX Plan Exclusion
<i>cefoxitin sodium for iv soln 1 gm</i>	4	EX Plan Exclusion
<i>cefoxitin sodium for iv soln 2 gm</i>	4	EX Plan Exclusion
<i>cefoxitin sodium for iv soln 2 gm</i>	4	EX Plan Exclusion
CEFOXITIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFOXITIN SODIUM-DEXTROSE 2-2.2 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
<i>cefprozil for susp 125 mg/5ml</i>	1	
<i>cefprozil for susp 250 mg/5ml</i>	1	
<i>cefprozil tab 250 mg</i>	1	
<i>cefprozil tab 500 mg</i>	1	
<i>cefuroxime axetil tab 250 mg</i>	1	
<i>cefuroxime axetil tab 500 mg</i>	1	
<i>cefuroxime sodium for iv soln 1.5 gm</i>	4	EX Plan Exclusion
<i>cefuroxime sodium for inj 750 mg</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEPHALOSPORINS - 3RD GENERATION		
<i>cefdinir for susp 125 mg/5ml</i>	1	
<i>cefdinir for susp 250 mg/5ml</i>	1	
<i>cefdinir cap 300 mg</i>	1	
<i>cefixime for susp 100 mg/5ml</i>	1	
<i>cefixime for susp 200 mg/5ml</i>	1	
<i>cefixime cap 400 mg</i>	1	
CEFOTAXIME SODIUM 1 GM RECON SOLN	4	EX Plan Exclusion
CEFOTAXIME SODIUM 2 GM RECON SOLN	4	EX Plan Exclusion
CEFPODOXIME PROXETIL 100 MG/5ML RECON SUSP	1	
<i>cefpodoxime proxetil tab 100 mg</i>	1	
<i>cefpodoxime proxetil tab 200 mg</i>	1	
CEFPODOXIME PROXETIL 50 MG/5ML RECON SUSP	1	
<i>ceftazidime for inj 1 gm</i>	4	EX Plan Exclusion
<i>ceftazidime for iv soln 2 gm</i>	4	EX Plan Exclusion
CEFTAZIDIME 6 GM RECON SOLN	4	EX Plan Exclusion
FORTAZ 1 GM RECON SOLN	4	EX Plan Exclusion
FORTAZ 2 GM RECON SOLN	4	EX Plan Exclusion
FORTAZ 500 MG RECON SOLN	4	EX Plan Exclusion
<i>ceftazidime for inj 1 gm</i>	4	EX Plan Exclusion
TAZICEF 1 GM RECON SOLN	4	EX Plan Exclusion
<i>ceftazidime for iv soln 2 gm</i>	4	EX Plan Exclusion
TAZICEF 6 GM RECON SOLN	4	EX Plan Exclusion
CEFTAZIDIME AND DEXTROSE 1-5 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFTAZIDIME AND DEXTROSE 2-5 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
TAZICEF 1 GM/50ML SOLUTION	4	EX Plan Exclusion
CEFTRIAXONE SODIUM 100 GM RECON SOLN	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ceftriaxone sodium for inj 10 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 10 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 1 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for iv soln 1 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 1 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for iv soln 1 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 250 mg</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 250 mg</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 2 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 2 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for iv soln 2 gm</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 500 mg</i>	4	EX Plan Exclusion
<i>ceftriaxone sodium for inj 500 mg</i>	4	EX Plan Exclusion
CEFTRIAZONE SODIUM-DEXTROSE 1-3.74 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFTRIAZONE SODIUM-DEXTROSE 2-2.22 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEFTRIAZONE SODIUM IN DEXTROSE 20 MG/ML SOLUTION	4	EX Plan Exclusion
CEFTRIAZONE SODIUM IN DEXTROSE 40 MG/ML SOLUTION	4	EX Plan Exclusion
CEPHALOSPORINS - 4TH GENERATION		
CEFEPIME HCL 100 GM RECON SOLN	4	EX Plan Exclusion
CEFEPIME HCL 1 GM/50ML SOLUTION	4	EX Plan Exclusion
<i>cefepime hcl for inj 1 gm</i>	4	EX Plan Exclusion
CEFEPIME HCL 2 GM/100ML SOLUTION	4	EX Plan Exclusion
<i>cefepime hcl for iv soln 2 gm</i>	4	EX Plan Exclusion
CEFEPIME-DEXTROSE 1-5 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CEFEPIME-DEXTROSE 2-5 GM-%(50ML) RECON SOLN	4	EX Plan Exclusion
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO 400 MG RECON SOLN	4	EX Plan Exclusion
TEFLARO 600 MG RECON SOLN	4	EX Plan Exclusion
ZEVTERA 500 MG RECON SOLN	4	EX Plan Exclusion
CEPHALOSPORINS - SIDEROPHORES		
FETROJA 1 GM RECON SOLN	4	EX Plan Exclusion
CONTRACEPTIVES		
BIPHASIC CONTRACEPTIVES - ORAL		
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	1	
LO LOESTRIN FE 1 MG-10 MCG / 10 MCG TAB	2	
COMBINATION CONTRACEPTIVES - ORAL		
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
NEXTSTELLIS 3-14.2 MG TAB	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	1	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	1	
BEYAZ 3-0.02-0.451 MG TAB	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</i>	1	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	1	
SAFYRAL 3-0.03-0.451 MG TAB	3	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	1	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
TYBLUME 0.1-20 MG-MCG CHEW TAB	3	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	1	
BALCOLTRA 0.1-20 MG-MCG(21) TAB	3	
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	1	
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	1	
<i>levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
MINASTRIN 24 FE 1-20 MG-MCG(24) CHEW TAB	3	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)</i>	1	
TAYTULLA 1-20 MG-MCG(24) CAP	3	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FEMLYV 1-0.02 MG TAB DISP	3	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg</i>	1	
<i>norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 1 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
GENERESS FE 0.8-25 MG-MCG CHEW TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	
<i>norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
<i>norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg</i>	1	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
TWIRLA 120-30 MCG/24HR PATCH WK	2	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	1	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	1	
<i>norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr</i>	1	
COMBINATION CONTRACEPTIVES - VAGINAL		
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	1	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	1	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	1	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	1	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	1	
NUVARING 0.12-0.015 MG/24HR RING	2	
ANNOVERA 0.013-0.15 MG/24HR RING	2	
CONTINUOUS CONTRACEPTIVES - ORAL		
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	1	
COPPER CONTRACEPTIVES - IUD		
MIUDELLA INTRAUTERINE COPPER IUD	2	
PARAGARD INTRAUTERINE COPPER IUD	2	
EMERGENCY CONTRACEPTIVES		
ELLA 30 MG TAB	2	
EXTENDED-CYCLE CONTRACEPTIVES - ORAL		
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	1	
LOSEASONIQUE 0.1-0.02 & 0.01 MG TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUARTETTE 42-21-21-7 DAYS TAB	3	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	1	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg</i>	1	
SEASONIQUE 0.15-0.03 & 0.01 MG TAB	3	
<i>levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg</i>	1	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	1	
FOUR PHASE CONTRACEPTIVES - ORAL		
NATAZIA 3/2-2/2-3/1 MG TAB	2	
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON 68 MG IMPLANT	2	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA 150 MG/ML SUSPENSION	2	
DEPO-PROVERA 150 MG/ML SUSP PRSYR	2	
DEPO-SUBQ PROVERA 104 104 MG/0.65ML SUSP PRSYR	2	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	1	
<i>medroxyprogesterone acetate im susp 150 mg/ml</i>	1	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	1	
<i>medroxyprogesterone acetate im susp prefilled syr 150 mg/ml</i>	1	
PROGESTIN CONTRACEPTIVES - IUD		
KYLEENA 19.5 MG IUD	2	
LILETTA (52 MG) 20.1 MCG/DAY IUD	3	
MIRENA (52 MG) 20 MCG/DAY IUD	2	
SKYLA 13.5 MG IUD	2	
PROGESTIN CONTRACEPTIVES - ORAL		
SLYND 4 MG TAB	2	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
<i>norethindrone tab 0.35 mg</i>	1	
TRIPHASIC CONTRACEPTIVES - ORAL		
<i>desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg</i>	1	
VELIVET 0.1/0.125/0.15 -0.025 MG TAB	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg</i>	1	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	
ARANELLE 0.5/1/0.5-35 MG-MCG TAB	1	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	
<i>norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg</i>	1	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	
<i>norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
<i>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</i>	1	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
BETAMETHASONE SODIUM PHOSPHATE 12 MG/2ML SOLUTION	4	EX Plan Exclusion
BETAMETHASONE SODIUM PHOSPHATE 6 MG/ML SOLUTION	4	EX Plan Exclusion
<i>budesonide delayed release particles cap 3 mg</i>	1	
<i>budesonide tab er 24hr 9 mg</i>	1	
EOHILIA 2 MG/10ML SUSPENSION	3	PA
ORTIKOS 6 MG CAP ER 24H	3	PA
ORTIKOS 9 MG CAP ER 24H	3	PA
TARPEYO 4 MG CAP DR	2	PA
UCERIS 9 MG TAB ER 24H	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>deflazacort tab 18 mg</i>	1	PA S
<i>deflazacort susp 22.75 mg/ml</i>	1	PA S
<i>deflazacort tab 30 mg</i>	1	PA S
<i>deflazacort tab 36 mg</i>	1	PA S
<i>deflazacort tab 6 mg</i>	1	PA S
<i>deflazacort tab 18 mg</i>	1	PA S
<i>deflazacort susp 22.75 mg/ml</i>	1	PA S
<i>deflazacort tab 30 mg</i>	1	PA S
<i>deflazacort tab 36 mg</i>	1	PA S
<i>deflazacort tab 6 mg</i>	1	PA S
<i>deflazacort tab 18 mg</i>	1	PA S
<i>deflazacort tab 30 mg</i>	1	PA S
<i>deflazacort tab 36 mg</i>	1	PA S
<i>deflazacort tab 6 mg</i>	1	PA S
<i>deflazacort susp 22.75 mg/ml</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
<i>dexamethasone elixir 0.5 mg/5ml</i>	1	
DEXAMETHASONE 0.5 MG/5ML SOLUTION	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.5 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 0.75 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 1.5 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 1 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 2 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 4 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
<i>dexamethasone tab 6 mg</i>	1	
DEXAMETHASONE INTENSOL 1 MG/ML CONC	1	
DEXAMETHASONE ACETATE 8 MG/ML SUSPENSION	4	EX Plan Exclusion
DEXAMETHASONE (LA) 16 MG/ML SUSPENSION	4	EX Plan Exclusion
DEXAMETHASONE (LA) 8 MG/ML SUSPENSION	4	EX Plan Exclusion
ACTIVE INJECTION D 10 MG/ML KIT	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 100 mg/10ml</i>	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 10 mg/ml</i>	4	EX Plan Exclusion
DEXAMETHASONE SODIUM PHOSPHATE 10 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexamethasone sodium phosphate inj 120 mg/30ml</i>	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 20 mg/5ml</i>	4	EX Plan Exclusion
DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML SOLN PRSYR	4	EX Plan Exclusion
DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	4	EX Plan Exclusion
DEXAMETHASONE SODIUM PHOSPHATE 4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>dexamethasone sodium phosphate inj 4 mg/ml</i>	4	EX Plan Exclusion
DEXAMETHASONE SOD PHOSPHATE PF 10 MG/ML SOLN PRSYR	4	EX Plan Exclusion
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>dexamethasone sod phosphate preservative free inj 10 mg/ml</i>	4	EX Plan Exclusion
DEXAMETHASONE SOD PHOS +RFID 4 MG/ML SOLN PRSYR	4	EX Plan Exclusion
DEXAMETH SOD PHOS (PF) +RFID 10 MG/ML SOLN PRSYR	4	EX Plan Exclusion
DEXONTO 0.4% 20 MG/5ML SOLUTION	4	EX Plan Exclusion
DOUBLEDEX 10 MG/ML KIT	4	EX Plan Exclusion
IONTOSONE 0.4% 20 MG/5ML SOLUTION	4	EX Plan Exclusion
MAS CARE-PAK 10 MG/ML KIT	4	EX Plan Exclusion
READYSHARP DEXAMETHASONE 10 MG/ML KIT	4	EX Plan Exclusion
TOPIDEX 10 MG/ML KIT	4	EX Plan Exclusion
DEXAMETHASONE SOD PHOS-NACL 6-0.9 MG/25ML-% SOLUTION	4	EX Plan Exclusion
ALKINDI SPRINKLE 0.5 MG CAP SPRINK	3	PA
ALKINDI SPRINKLE 1 MG CAP SPRINK	3	PA
ALKINDI SPRINKLE 2 MG CAP SPRINK	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALKINDI SPRINKLE 5 MG CAP SPRINK	3	PA
<i>hydrocortisone tab 10 mg</i>	1	
<i>hydrocortisone tab 20 mg</i>	1	
<i>hydrocortisone tab 5 mg</i>	1	
<i>hydrocortisone sodium succinate pf for inj 100 mg</i>	4	EX Plan Exclusion
SOLU-CORTEF 1000 MG RECON SOLN	4	EX Plan Exclusion
SOLU-CORTEF 100 MG RECON SOLN	4	EX Plan Exclusion
SOLU-CORTEF 250 MG RECON SOLN	4	EX Plan Exclusion
SOLU-CORTEF 500 MG RECON SOLN	4	EX Plan Exclusion
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 16 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab 32 mg</i>	1	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab 4 mg</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
<i>methylprednisolone tab therapy pack 4 mg (21)</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
<i>methylprednisolone tab 8 mg</i>	1	
DEPO-MEDROL 20 MG/ML SUSPENSION	4	EX Plan Exclusion
DEPO-MEDROL 40 MG/ML SUSPENSION	4	EX Plan Exclusion
DEPO-MEDROL 80 MG/ML SUSPENSION	4	EX Plan Exclusion
METHYLPREDNISOLONE ACETATE 40 MG/ML SUSPENSION	4	EX Plan Exclusion
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	4	EX Plan Exclusion
METHYLPREDNISOLONE ACETATE 40 MG/ML SUSPENSION	4	EX Plan Exclusion
<i>methylprednisolone acetate inj susp 40 mg/ml</i>	4	EX Plan Exclusion
METHYLPREDNISOLONE ACETATE 50 MG/ML SUSPENSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
METHYLPREDNISOLONE ACETATE 80 MG/ML SUSPENSION	4	EX Plan Exclusion
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	4	EX Plan Exclusion
METHYLPREDNISOLONE ACETATE 80 MG/ML SUSPENSION	4	EX Plan Exclusion
<i>methylprednisolone acetate inj susp 80 mg/ml</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 1000 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 125 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 40 mg (base equiv)</i>	4	EX Plan Exclusion
<i>methylprednisolone sod succ for inj 500 mg (base equiv)</i>	4	EX Plan Exclusion
SOLU-MEDROL 1000 MG RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL 2 GM RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL 500 MG RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL (PF) 1000 MG RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL (PF) 125 MG RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL (PF) 40 MG RECON SOLN	4	EX Plan Exclusion
SOLU-MEDROL (PF) 500 MG RECON SOLN	4	EX Plan Exclusion
MILLIPRED 5 MG TAB	1	
<i>prednisolone tab 5 mg</i>	1	
<i>prednisolone soln 15 mg/5ml</i>	1	
<i>prednisolone soln 15 mg/5ml</i>	1	
<i>prednisolone tab 5 mg</i>	1	
ORAPRED ODT 10 MG TAB DISP	1	
ORAPRED ODT 15 MG TAB DISP	1	
ORAPRED ODT 30 MG TAB DISP	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEDIAPRED 6.7 (5 BASE) MG/5ML SOLUTION	1	
<i>prednisolone sod phosphate oral soln 10 mg/5ml (base equiv)</i>	1	
PREDNISOLONE SODIUM PHOSPHATE 10 MG TAB DISP	1	
PREDNISOLONE SODIUM PHOSPHATE 10 MG TAB DISP	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
<i>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</i>	1	
PREDNISOLONE SODIUM PHOSPHATE 15 MG TAB DISP	1	
PREDNISOLONE SODIUM PHOSPHATE 15 MG TAB DISP	1	
<i>prednisolone sod phosphate oral soln 20 mg/5ml (base equiv)</i>	1	
<i>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</i>	1	
PREDNISOLONE SODIUM PHOSPHATE 25 MG/5ML SOLUTION	1	
PREDNISOLONE SODIUM PHOSPHATE 30 MG TAB DISP	1	
PREDNISOLONE SODIUM PHOSPHATE 30 MG TAB DISP	1	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	
<i>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (21)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
<i>prednisone tab therapy pack 10 mg (48)</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 10 mg</i>	1	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 1 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 20 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 2.5 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab 50 mg</i>	1	
<i>prednisone tab therapy pack 5 mg (21)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>prednisone tab therapy pack 5 mg (21)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
<i>prednisone tab therapy pack 5 mg (48)</i>	1	
PREDNISONE 5 MG/5ML SOLUTION	1	
<i>prednisone tab 5 mg</i>	1	
<i>prednisone tab 5 mg</i>	1	
PREDNISONE INTENSOL 5 MG/ML CONC	1	
KENALOG-10 10 MG/ML SUSPENSION	4	PA EX Plan Exclusion
KENALOG-40 40 MG/ML SUSPENSION	4	PA EX Plan Exclusion
KENALOG-80 80 MG/ML SUSPENSION	4	PA EX Plan Exclusion
P-CARE K40 40 MG/ML KIT	4	PA EX Plan Exclusion
P-CARE K80 2 X 40 MG/ML KIT	4	PA EX Plan Exclusion
POD-CARE 100K 40 MG/ML KIT	4	PA EX Plan Exclusion
PRO-C-DURE 5 2 X 40 MG/ML KIT	4	PA EX Plan Exclusion
PRO-C-DURE 6 3 X 40 MG/ML KIT	4	PA EX Plan Exclusion
<i>triamcinolone acetonide inj susp 10 mg/ml</i>	1	PA
TRIAMCINOLONE ACETONIDE 40 MG/ML SUSPENSION	4	PA EX Plan Exclusion
<i>triamcinolone acetonide inj susp 40 mg/ml</i>	1	
<i>triamcinolone acetonide inj susp 40 mg/ml</i>	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIAMCINOLONE ACETONIDE 50 MG/ML SUSPENSION	4	PA EX Plan Exclusion
TRIAMCINOLONE ACETONIDE 80 MG/ML SUSPENSION	4	PA EX Plan Exclusion
ZILRETTA 32 MG SRER	2	PA
TRIAMCINOLONE DIACETATE 40 MG/ML SUSPENSION	1	PA
TRIAMCINOLONE DIACETATE 80 MG/ML SUSPENSION	1	PA
HEXATRIONE 20 MG/ML SUSPENSION	2	PA
AGAMREE 40 MG/ML SUSPENSION	3	PA S
MINERALOCORTICOIDS		
<i>fludrocortisone acetate tab 0.1 mg</i>	1	
STEROID COMBINATIONS		
ACTIVE INJECTION BLM-1 6 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
MARBETA-L 6 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
POD-CARE 100CMX 6 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
READYSHARP ANESTH + BETAMETH 6 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
BETA 1 KIT 30 MG/5ML KIT	4	EX Plan Exclusion
BETAMETHASONE COMBO 6 (3-3) MG/ML SUSPENSION	4	EX Plan Exclusion
BETAMETHASONE COMBO 7 (4-3) MG/ML SUSPENSION	4	EX Plan Exclusion
BETAMETHASONE SOD PHOS & ACET 6 (3-3) MG/ML SUSPENSION	4	EX Plan Exclusion
<i>betamethasone sod phosphate & acetate inj susp 6 (3-3) mg/ml</i>	4	EX Plan Exclusion
BETAMETHASONE SOD PHOS & ACET 7 (4-3) MG/ML SUSPENSION	4	EX Plan Exclusion
BSP 0820 30 MG/5ML KIT	4	EX Plan Exclusion
CELESTONE SOLUSPAN 6 (3-3) MG/ML SUSPENSION	4	EX Plan Exclusion
POD-CARE 100C 30 MG/5ML KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
READYSHARP BETAMETHASONE 30 MG/5ML KIT	4	EX Plan Exclusion
BETALOAN SUIK 30 MG/5ML KIT	4	EX Plan Exclusion
POD-CARE 100CG 30 MG/5ML KIT	4	EX Plan Exclusion
ACTIVE INJECTION BM 6 & 0.25 MG/ML-% KIT	4	EX Plan Exclusion
MARBETA-25 6 & 0.25 MG/ML-% KIT	4	EX Plan Exclusion
BETALIDO 6 & 1 MG/ML-% KIT	4	EX Plan Exclusion
DEXAMETHASONE ACE & SOD PHOS 8-4 MG/ML SUSPENSION	4	EX Plan Exclusion
DMT SUIK 10 MG/ML KIT	4	EX Plan Exclusion
ACTIVE INJECTION M-1 10 & 0.25 MG/ML-% KIT	4	EX Plan Exclusion
DEXAMETHASONE SOD PHOS-BUPIV 0.01-0.375 % SOLN PRSYR	4	EX Plan Exclusion
MARDEX-25 10 & 0.25 MG/ML-% KIT	4	EX Plan Exclusion
DEXAMETH SOD PHOS-BUPIV-EPIN 0.01-0.375 %-1:200000 SOLN PRSYR	4	EX Plan Exclusion
ACTIVE INJECTION DL 10 & 1 MG/ML-% KIT	4	EX Plan Exclusion
DEXLIDO 10 & 1 MG/ML-% KIT	4	EX Plan Exclusion
LIDOCIDEX I 5-10 MG/1.5ML SOLUTION	4	EX Plan Exclusion
ROPIDEX 10-0.5 MG/ML-% KIT	4	EX Plan Exclusion
ACTIVE INJECTION DLM 10 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
DEXLIDO-M 10 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
READYSHARP ANESTH + DEXAMETH 10 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
MEDROLOAN II SUIK 40 MG/ML KIT	4	EX Plan Exclusion
MEDROLOAN SUIK 40 MG/ML KIT	4	EX Plan Exclusion
METHYLPREDNISOLONE-BUPIVACAINE 40-5 MG/ML SUSPENSION	4	EX Plan Exclusion
METHYLPREDNISOLONE-BUPIVACAINE 80-5 MG/ML SUSPENSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHYSICIANS EZ USE M-PRED 40-0.5 MG/ML-% KIT	4	EX Plan Exclusion
ACTIVE INJECTION KIT L 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
DYURAL-L 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
METHYLPREDNISOLONE ACE-LIDO 40-10 MG/ML SUSPENSION	4	EX Plan Exclusion
METHYLPREDNISOLONE ACE-LIDO 80-10 MG/ML SUSPENSION	4	EX Plan Exclusion
MULTI-SPECIALTY 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
POINT OF CARE L.2 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
POINT OF CARE L.5 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
ACTIVE INJECTION LM-DEP-2 40 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
DYURAL-40 40 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
DYURAL-80 80 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
DYURAL 80-LM 80 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
DYURAL-LM 40 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
POINT OF CARE LM DEP 2 40 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
READYSHARP ANESTH + METHYLPRED 80 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
CONTRAST ALLERGY PREMED PACK 3 X 50 MG & 1 X 50 MG KIT	4	EX Plan Exclusion
P-CARE K40G 40 MG/ML KIT	4	EX Plan Exclusion
P-CARE K80G 40 MG/ML KIT	4	EX Plan Exclusion
POD-CARE 100KG 40 MG/ML KIT	4	EX Plan Exclusion
TRILOAN II SUIK 40 MG/ML KIT	4	EX Plan Exclusion
TRILOAN SUIK 40 MG/ML KIT	4	EX Plan Exclusion
ACTIVE INJECTION KM 40-0.5 MG/ML-% KIT	4	EX Plan Exclusion
BUPIVILOG 40 & 0.5 MG/ML-% KIT	4	EX Plan Exclusion
POINT OF CARE KM 40 & 0.5 MG/ML-% KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRIAMCINOLONE-BUPIVACAINE 40-5 MG/ML SUSPENSION	4	EX Plan Exclusion
BLT-25 40 & 0.25 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
MLK F1 40 & 0.5 & 2 MG/ML-%-% KIT	4	EX Plan Exclusion
MLK F2 40 & 0.5 & 2 MG/ML-%-% KIT	4	EX Plan Exclusion
MLK F3 40 & 0.5 & 2 MG/ML-%-% KIT	4	EX Plan Exclusion
MLK F4 40 & 0.5 & 2 MG/ML-%-% KIT	4	EX Plan Exclusion
P-CARE K40MX 40 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
P-CARE K80MX 40 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
POD-CARE 100KMX 40 & 0.5 & 1 MG/ML-%-% KIT	4	EX Plan Exclusion
LIDOLOG 40 & 2 MG/ML-% KIT	4	EX Plan Exclusion
PHYSICIANS EZ USE J/T/T KIT II 40 & 1 MG/ML-% KIT	4	EX Plan Exclusion
ACTIVE INJECTION KL-3 40-1 MG/ML-% KIT	4	EX Plan Exclusion
PHYSICIANS EZ USE JOINT/TUNNEL 40-1 MG/ML-% KIT	4	EX Plan Exclusion
COUGH/COLD/ALLERGY		
ANTITUSSIVE - NONNARCOTIC		
<i>benzonatate cap 100 mg</i>	1	
BENZONATATE 150 MG CAP	1	
<i>benzonatate cap 150 mg</i>	1	
<i>benzonatate cap 200 mg</i>	1	
ANTITUSSIVE - OPIOID		
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	
<i>hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg</i>	1	
<i>hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml</i>	1	
DECONGESTANT & ANTIHISTAMINE		
CLARINEX-D 12 HOUR 2.5-120 MG TAB ER 12H	3	
PROMETHAZINE-PHENYLEPHRINE 6.25-5 MG/5ML SYRUP	1	
<i>promethazine & phenylephrine syrup 6.25-5 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROMETHAZINE VC 6.25-5 MG/5ML SYRUP	1	
IODINE EXPECTORANTS		
POTASSIUM IODIDE (EXPECTORANT) 1 GM/ML SOLUTION	1	
SSKI 1 GM/ML SOLUTION	3	
MISC. RESPIRATORY INHALANTS		
HYPERSAL 3.5 % NEBU SOLN	3	
HYPERSAL 7 % NEBU SOLN	3	
NEBUSAL 3 % NEBU SOLN	1	
NEBUSAL 6 % NEBU SOLN	3	
PULMOSAL 7 % NEBU SOLN	1	
SODIUM CHLORIDE 0.9 % NEBU SOLN	1	
SODIUM CHLORIDE 10 % NEBU SOLN	1	
SODIUM CHLORIDE 3 % NEBU SOLN	1	
SODIUM CHLORIDE 7 % NEBU SOLN	1	
MUCOLYTICS		
<i>acetylcysteine inhal soln 10%</i>	1	
<i>acetylcysteine inhal soln 20%</i>	1	
NON-NARC ANTITUSSIVE-ANTIHISTAMINE		
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	1	
NON-NARC ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	1	
OPIOID ANTITUSSIVE-ANTIHISTAMINE		
HYDROCOD POLI-CHLORPHE POLI ER 10-8 MG/5ML SUSP	1	
<i>hydrocod polst-chlorphen polst er susp 10-8 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPIOID ANTITUSSIVE-DECONGESTANT-ANTIHISTAMINE		
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	1	
PROMETHAZINE VC/CODEINE 6.25-5-10 MG/5ML SYRUP	1	
DERMATOLOGICALS		
ACNE ANTIBIOTICS		
<i>clindamycin phosphate foam 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
CLINDAGEL 1 % GEL	3	
<i>clindamycin phosphate gel 1% (once-daily)</i>	1	
<i>clindamycin phosphate foam 1%</i>	1	
<i>clindamycin phosphate lotion 1%</i>	1	
<i>clindamycin phosphate soln 1%</i>	1	
<i>clindamycin phosphate swab 1%</i>	1	
<i>clindamycin phosphate gel 1% (twice-daily)</i>	1	
EVOCLIN 1 % FOAM	3	
<i>dapsone gel 5%</i>	1	PA PA required > 26 years
<i>dapsone gel 7.5%</i>	1	PA PA required > 26 years
ERY 2 % PAD	1	
ERYGEL 2 % GEL	3	
ERYTHROMYCIN 2 % GEL	1	
<i>erythromycin gel 2%</i>	1	
<i>erythromycin soln 2%</i>	1	
AMZEEQ 4 % FOAM	2	
KLARON 10 % LOTION	3	
<i>sulfacetamide sodium lotion 10% (acne)</i>	1	
ACNE COMBINATIONS		
<i>adapalene-benzoyl peroxide gel 0.1-2.5%</i>	1	PA PA required > 26 years
<i>adapalene-benzoyl peroxide gel 0.3-2.5%</i>	1	PA PA required > 26 years

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENZAMYCIN 5-3 % GEL	3	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	
BENZOYL PEROX-HYDROCORTISONE 5-0.5 % LOTION	1	
VANOXIDE-HC 5-0.5 % LOTION	1	
ACANYA 1.2-2.5 % GEL	3	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%</i>	1	
<i>clindamycin phosphate-benzoyl peroxide gel 1-5%</i>	1	
ONEXTON 1.2-3.75 % GEL	2	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</i>	1	
<i>clindamycin phosphate-tretinoin gel 1.2-0.025%</i>	1	PA PA required > 26 years
RESORCINOL-SULFUR 2-5 % LOTION	1	
AVAR CLEANSER 10-5 % LIQUID	1	
AVAR-E EMOLLIENT 10-5 % CREAM	1	
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	1	
AVAR-E LS 10-2 % CREAM	3	
AVAR LS CLEANSER 10-2 % LIQUID	3	
BP 10-1 10-1 % EMULSION	1	
PLEXION 9.8-4.8 % CREAM	3	
PLEXION 9.8-4.8 % LOTION	3	
PLEXION CLEANSER 9.8-4.8 % LIQUID	3	
SSS 10-5 10-5 % CREAM	1	
SULFACETAMIDE SODIUM-SULFUR 10-1 % EMULSION	1	
<i>sulfacetamide sodium w/ sulfur cream 10-2%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 10-2 % LIQUID	1	
<i>sulfacetamide sodium w/ sulfur cleanser 10-2%</i>	1	
<i>sulfacetamide sodium w/ sulfur cleansing pad 10-4%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 10-5 % CREAM	1	
<i>sulfacetamide sodium w/ sulfur cream 10-5%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFACETAMIDE SODIUM-SULFUR 10-5 % LIQUID	1	
<i>sulfacetamide sodium w/ sulfur cleanser 10-5%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 10-5 % LOTION	1	
SULFACETAMIDE SODIUM-SULFUR 10-5 % SUSPENSION	1	
SULFACETAMIDE SODIUM-SULFUR 8-4 % SUSPENSION	1	
SULFACETAMIDE SODIUM-SULFUR 8-4 % SUSPENSION	1	
<i>sulfacetamide sodium w/ sulfur susp 8-4%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 9-4.5 % LIQUID	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9-4.5%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 9-4 % LIQUID	1	
SULFACETAMIDE SODIUM-SULFUR 9-4 % LIQUID	1	
SULFACETAMIDE SODIUM-SULFUR 9.8-4.8 % CREAM	1	
<i>sulfacetamide sodium w/ sulfur cream 9.8-4.8%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 9.8-4.8 % LIQUID	1	
<i>sulfacetamide sodium w/ sulfur cleanser 9.8-4.8%</i>	1	
SULFACETAMIDE SODIUM-SULFUR 9.8-4.8 % LOTION	1	
<i>sulfacetamide sodium w/ sulfur lotion 9.8-4.8%</i>	1	
SULFACETAMIDE SOD-SULFUR WASH 9-4.5 % LIQUID	1	
SULFACETAMIDE SOD-SULFUR WASH 9-4 % LIQUID	1	
SULFACLEANSE 8/4 8-4 % SUSPENSION	1	
SULFAMEZ WASH 10-1 % EMULSION	1	
ACNE PRODUCTS		
<i>adapalene cream 0.1%</i>	1	PA PA required > 26 years
<i>adapalene gel 0.1%</i>	1	PA PA required > 26 years
ADAPALENE 0.1 % PAD	1	PA PA required > 26 years
ADAPALENE 0.1 % SOLUTION	3	PA PA required > 26 years
<i>adapalene gel 0.3%</i>	1	PA PA required > 26 years
BENZEPRO FOAMING CLOTHS 6 % MISC	1	
BENZOYL PEROXIDE 6.5 % GEL	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>benzoyl peroxide foam 9.8%</i>	1	
EPSOLAY 5 % CREAM	2	
WINLEVI 1 % CREAM	2	PA PA required > 26 years
<i>isotretinoin cap 10 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 20 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 30 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 40 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 10 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 20 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 30 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 40 mg</i>	2	QL PA PA PA required > 26 years
<i>isotretinoin cap 10 mg</i>	2	QL PA PA PA required > 26 years

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>isotretinoin cap 20 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 30 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 40 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 10 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 20 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 25 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 30 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 35 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 40 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 10 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>isotretinoin cap 20 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 30 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 40 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 10 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 20 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 30 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
<i>isotretinoin cap 40 mg</i>	2	<p>QL</p> <p>PA</p> <p>PA PA required > 26 years</p>
ARAZLO 0.045 % LOTION	2	<p>PA PA required > 26 years</p>
TAZAROTENE 0.1 % FOAM	2	<p>PA PA required > 26 years</p>
ALTRENO 0.05 % LOTION	2	<p>PA PA required > 26 years</p>
<i>tretinoin cream 0.025%</i>	1	<p>PA PA required > 26 years</p>
<i>tretinoin gel 0.025%</i>	1	<p>PA PA required > 26 years</p>
<i>tretinoin gel 0.01%</i>	1	<p>PA PA required > 26 years</p>
<i>tretinoin cream 0.025%</i>	1	<p>PA PA required > 26 years</p>
<i>tretinoin gel 0.025%</i>	1	<p>PA PA required > 26 years</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tretinoin cream 0.05%</i>	1	PA PA required > 26 years
<i>tretinoin gel 0.05%</i>	1	PA PA required > 26 years
<i>tretinoin cream 0.1%</i>	1	PA PA required > 26 years
TRETINOIN MICROSPHERE 0.04 % GEL	1	PA PA required > 26 years
<i>tretinoin microsphere gel 0.04%</i>	1	PA PA required > 26 years
<i>tretinoin microsphere gel 0.08%</i>	1	PA PA required > 26 years
TRETINOIN MICROSPHERE 0.1 % GEL	1	PA PA required > 26 years
<i>tretinoin microsphere gel 0.1%</i>	1	PA PA required > 26 years
TRETINOIN MICROSPHERE PUMP 0.04 % GEL	1	PA PA required > 26 years
<i>tretinoin microsphere gel 0.08%</i>	1	PA PA required > 26 years
TRETINOIN MICROSPHERE PUMP 0.1 % GEL	1	PA PA required > 26 years
AKLIEF 0.005 % CREAM	2	PA PA required > 26 years
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN 15 % OINTMENT	3	
AGENTS FOR FACIAL WRINKLES - RETINOIDS		
REFISSA 0.05 % CREAM	4	PA EX Plan Exclusion
RENOVA 0.02 % CREAM	4	PA EX Plan Exclusion
RENOVA PUMP 0.02 % CREAM	4	PA EX Plan Exclusion
TRETINOIN (EMOLLIENT) 0.05 % CREAM	4	PA EX Plan Exclusion
AGENTS FOR SUBMENTAL FAT		
KYBELLA 20 MG/2ML SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALOPECIA AGENTS - JANUS KINUS (JAK) INHIBITORS		
LITFULO 50 MG CAP	3	PA S
ANALGESICS - TOPICAL		
MUSCUSOLICE 2 % CREAM	3	
MUSCUSOLICE 5 % CREAM	3	
NEURAPTINE 10 % CREAM	3	
NEURORUB 10 % CREAM	3	
PRAKETAMIDE 5 % CREAM	3	
ENOVARX-TRAMADOL 5 % CREAM	3	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
DICLOFENAC EPOLAMINE 1.3 % PATCH	1	
<i>diclofenac sodium soln 1.5%</i>	1	
<i>diclofenac sodium gel 1% (1.16% diethylamine equiv)</i>	1	QL
<i>diclofenac sodium soln 2%</i>	1	
DICLOFONO 1.6 % GEL	3	
PENNSAID 2 % SOLUTION	3	
<i>*diclofenac sodium gel kit 1%**</i>	1	
ANTIBIOTICS - TOPICAL		
<i>gentamicin sulfate cream 0.1%</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	1	
<i>mupirocin oint 2%</i>	1	
<i>mupirocin calcium cream 2%</i>	1	
ANTIFUNGALS - TOPICAL		
MENTAX 1 % CREAM	3	
<i>ciclopirox solution 8%</i>	1	
<i>ciclopirox gel 0.77%</i>	1	
<i>ciclopirox shampoo 1%</i>	1	
<i>ciclopirox solution 8%</i>	1	
<i>ciclopirox olamine cream 0.77% (base equiv)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ciclopirox olamine susp 0.77% (base equiv)</i>	1	
NAFTIFINE HCL 1 % CREAM	1	
<i>naftifine hcl gel 1%</i>	1	
<i>naftifine hcl cream 2%</i>	1	
<i>naftifine hcl gel 2%</i>	1	
NAFTIN 2 % GEL	2	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin cream 100000 unit/gm</i>	1	
<i>nystatin oint 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
<i>nystatin topical powder 100000 unit/gm</i>	1	
MYCOZYL AL 1 % SOLUTION	1	
ANTIFUNGALS - TOPICAL COMBINATIONS		
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	
CLOTRIMAZOLE-BETAMETHASONE 1-0.05 % LOTION	1	
<i>clotrimazole w/ betamethasone lotion 1-0.05%</i>	1	
<i>iodoquinol-hc cream 1-1%</i>	1	
HYDROCORTISONE-IODOQUINOL 1-1 % CREAM	1	
<i>iodoquinol-hc cream 1-1%</i>	1	
IDOQUINOL-HC-ALOE POLYSACCH 1-2-1 % GEL	1	
<i>*iodoquinol-hydrocortisone-aloe polysaccharide gel 1-2-1%***</i>	1	
IDOQUIMEZ-HC 1-1.9 % CREAM	1	
IDOQUINOL-HYDROCORTISONE-ALOE 1-1.9 % CREAM	1	
<i>iodoquinol-hydrocortisone in aloe vehicle cream 1-1.9%</i>	1	
<i>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</i>	1	
<i>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</i>	1	
ANTINEOPLASTIC ALKYLATING AGENTS - TOPICAL		
VALCHLOR 0.016 % GEL	3	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTINEOPLASTIC ANTIMETABOLITES - TOPICAL		
FLUOROURACIL 0.5 % CREAM	1	
FLUOROURACIL 2 % SOLUTION	1	
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil soln 5%</i>	1	
ANTINEOPLASTIC OR PREMALIGNANT LESIONS - TOPICAL NSAID'S		
<i>diclofenac sodium (actinic keratoses) gel 3%</i>	1	QL
ANTINEOPLASTIC RETINOIDS - TOPICAL		
PANRETIN 0.1 % GEL	3	
ANTIPRURITICS - TOPICAL		
<i>doxepin hcl cream 5%</i>	1	
ZONALON 5 % CREAM	3	
ANTIPSORIATICS		
ZITHRANOL 1 % SHAMPOO	2	
<i>calcipotriene cream 0.005%</i>	1	
CALCIPOTRIENE 0.005 % FOAM	1	
<i>calcipotriene oint 0.005%</i>	1	
CALCIPOTRIENE 0.005 % SOLUTION	1	
<i>calcipotriene soln 0.005% (50 mcg/ml)</i>	1	
<i>calcipotriene oint 0.005%</i>	1	
SORILUX 0.005 % FOAM	1	
CALCITRIOL 3 MCG/GM OINTMENT	1	
<i>tazarotene cream 0.05%</i>	1	
<i>tazarotene gel 0.05%</i>	1	
<i>tazarotene cream 0.1%</i>	1	
<i>tazarotene gel 0.1%</i>	1	
ANTIPSORIATICS - SYSTEMIC		
<i>acitretin cap 10 mg</i>	1	PA
<i>acitretin cap 17.5 mg</i>	1	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>acitretin cap 25 mg</i>	1	PA
SILIQ 210 MG/1.5ML SOLN PRSYR	3	PA S
SOTYKTU 6 MG TAB	3	QL PA S
TREMFYA 100 MG/ML SOLN PRSYR	3	QL PA S
TREMFYA ONE-PRESS 100 MG/ML SOLN A-INJ	3	QL PA S
TREMFYA PEN 100 MG/ML SOLN A-INJ	3	QL PA S
TALTZ 20 MG/0.25ML SOLN PRSYR	3	QL PA S
TALTZ 40 MG/0.5ML SOLN PRSYR	3	QL PA S
TALTZ 80 MG/ML SOLN A-INJ	3	QL PA S
TALTZ 80 MG/ML SOLN PRSYR	3	QL PA S
METHOXSALLEN RAPID 10 MG CAP	1	PA
SKYRIZI (150 MG DOSE) 75 MG/0.83ML PREF SY KT	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYRIZI 150 MG/ML SOLN PRSYR	3	PA S
SKYRIZI PEN 150 MG/ML SOLN A-INJ	3	PA S
COSENTYX 125 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
COSENTYX 150 MG/ML SOLN PRSYR	3	PA S
COSENTYX (300 MG DOSE) 150 MG/ML SOLN PRSYR	3	PA S
COSENTYX 75 MG/0.5ML SOLN PRSYR	3	PA S
COSENTYX SENSOREADY (300 MG) 150 MG/ML SOLN A-INJ	3	PA S
COSENTYX SENSOREADY PEN 150 MG/ML SOLN A-INJ	3	PA S
COSENTYX UNOREADY 300 MG/2ML SOLN A-INJ	3	PA S
SPEVIGO 450 MG/7.5ML SOLUTION	4	PA S EX Plan Exclusion
ILUMYA 100 MG/ML SOLN PRSYR	3	PA S
OTULFI 45 MG/0.5ML SOLN PRSYR	2	QL PA S
OTULFI 45 MG/0.5ML SOLUTION	2	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OTULFI 90 MG/ML SOLN PRSYR	2	QL PA S
STARJEMZA 45 MG/0.5ML SOLN PRSYR	2	QL PA S
STARJEMZA 45 MG/0.5ML SOLUTION	2	QL PA S
STARJEMZA 90 MG/ML SOLN PRSYR	2	QL PA S
ANTISEBORRHEIC PRODUCTS		
SELENIUM SULFIDE 2.25 % SHAMPOO	1	
<i>selenium sulfide shampoo 2.25%</i>	1	
SELENIUM SULFIDE 2.3 % SHAMPOO	1	
<i>selenium sulfide shampoo 2.3%</i>	1	
SELENIUM SULFIDE 2.5 % LOTION	1	
<i>selenium sulfide lotion 2.5%</i>	1	
OVACE PLUS 10 % CREAM	3	
OVACE PLUS 10 % SHAMPOO	3	
OVACE PLUS 9.8 % FOAM	3	
OVACE PLUS 9.8 % LOTION	2	
OVACE PLUS WASH 10 % GEL	3	
OVACE PLUS WASH 10 % LIQUID	3	
OVACE WASH 10 % LIQUID	3	
PLEXION NS 9.8 % SHAMPOO	1	
SODIUM SULFACETAMIDE 10 % SHAMPOO	1	
<i>sulfacetamide sodium shampoo 10%</i>	1	
SODIUM SULFACETAMIDE 9.8 % SHAMPOO	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SODIUM SULFACETAMIDE WASH 10 % LIQUID	1	
SODIUM SULFACETAMIDE WASH 10 % LIQUID	1	
<i>sulfacetamide sodium liquid 10%</i>	1	
SULFACETAMIDE SODIUM 10 % (CLEANS) GEL	1	
SULFACETAMIDE SODIUM 10 % LIQUID	1	
<i>sulfacetamide sodium liquid 10%</i>	1	
SULFACETAMIDE SODIUM (CLEANS) 10 % GEL	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir cream 5%</i>	1	
<i>acyclovir oint 5%</i>	1	
<i>penciclovir cream 1%</i>	1	
ASTRINGENTS		
XERAC AC 6.25 % SOLUTION	2	
ATOPIC DERMATITIS - JANUS KINASE (JAK) INHIBITORS		
CIBINQO 100 MG TAB	3	PA S
CIBINQO 200 MG TAB	3	PA S
CIBINQO 50 MG TAB	3	PA S
ATOPIC DERMATITIS - MONOCLONAL ANTIBODIES		
DUPIXENT 100 MG/0.67ML SOLN PRSYR	2	PA S
DUPIXENT 200 MG/1.14ML SOLN A-INJ	2	PA S
DUPIXENT 200 MG/1.14ML SOLN PRSYR	2	PA S
DUPIXENT 300 MG/2ML SOLN A-INJ	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUPIXENT 300 MG/2ML SOLN PRSYR	2	PA S
EBGLYSS 250 MG/2ML SOLN A-INJ	2	PA S
EBGLYSS 250 MG/2ML SOLN PRSYR	2	PA S
ADBRY 150 MG/ML SOLN PRSYR	2	PA S
ADBRY 300 MG/2ML SOLN A-INJ	2	PA S
BURN PRODUCTS		
MAFENIDE ACETATE 5 % PACKET	1	
<i>mafenide acetate packet for topical soln 5% (50 gm)</i>	1	
SULFAMYLON 5 % PACKET	3	
SULFAMYLON 85 MG/GM CREAM	3	
<i>silver sulfadiazine cream 1%</i>	1	
<i>silver sulfadiazine cream 1%</i>	1	
CAUTERIZING AGENT COMBINATIONS		
ARZOL SILVER NIT APPLICATORS 75-25 % MISC	3	
GRAFCO SILVER NIT APPLICATOR 75-25 % MISC	3	
CAUTERIZING AGENTS		
SILVER NITRATE 0.5 % SOLUTION	2	
<i>silver nitrate soln 0.5%</i>	2	
CORTICOSTEROIDS - TOPICAL		
<i>alclometasone dipropionate cream 0.05%</i>	1	
ALCLOMETASONE DIPROPIONATE 0.05 % OINTMENT	1	
<i>alclometasone dipropionate oint 0.05%</i>	1	
AMCINONIDE 0.1 % CREAM	1	
AMCINONIDE 0.1 % LOTION	1	
AMCINONIDE 0.1 % OINTMENT	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>amcinonide oint 0.1%</i>	1	
<i>betamethasone dipropionate augmented cream 0.05%</i>	1	
BETAMETHASONE DIPROPIONATE AUG 0.05 % GEL	1	
<i>betamethasone dipropionate augmented lotion 0.05%</i>	1	
<i>betamethasone dipropionate augmented oint 0.05%</i>	1	
<i>betamethasone dipropionate cream 0.05%</i>	1	
<i>betamethasone dipropionate lotion 0.05%</i>	1	
<i>betamethasone dipropionate oint 0.05%</i>	1	
<i>betamethasone valerate aerosol foam 0.12%</i>	1	
<i>betamethasone valerate cream 0.1% (base equivalent)</i>	1	
BETAMETHASONE VALERATE 0.1 % LOTION	1	
<i>betamethasone valerate lotion 0.1% (base equivalent)</i>	1	
<i>betamethasone valerate oint 0.1% (base equivalent)</i>	1	
CLOBETASOL PROPIONATE 0.025 % CREAM	1	
<i>clobetasol propionate cream 0.05%</i>	1	
<i>clobetasol propionate foam 0.05%</i>	1	
<i>clobetasol propionate gel 0.05%</i>	1	
<i>clobetasol propionate spray 0.05%</i>	1	
<i>clobetasol propionate lotion 0.05%</i>	1	
<i>clobetasol propionate oint 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate soln 0.05%</i>	1	
<i>clobetasol propionate shampoo 0.05%</i>	1	
<i>clobetasol propionate emollient base cream 0.05%</i>	1	
<i>clobetasol propionate emollient base cream 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	1	
<i>clobetasol propionate emulsion foam 0.05%</i>	1	
CLOCORTOLONE PIVALATE 0.1 % CREAM	1	
<i>clocortolone pivalate cream 0.1%</i>	1	
<i>desonide cream 0.05%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DESONIDE 0.05 % GEL	1	
<i>desonide lotion 0.05%</i>	1	
<i>desonide oint 0.05%</i>	1	
<i>desonide gel 0.05%</i>	1	
<i>desoximetasone cream 0.05%</i>	1	
DESOXIMETASONE 0.05 % GEL	1	
<i>desoximetasone oint 0.05%</i>	1	
<i>desoximetasone cream 0.25%</i>	1	
<i>desoximetasone spray 0.25%</i>	1	
<i>desoximetasone oint 0.25%</i>	1	
DIFLORASONE DIACETATE 0.05 % CREAM	1	
<i>diflorasone diacetate oint 0.05%</i>	1	
<i>fluocinolone acetonide cream 0.01%</i>	1	
<i>fluocinolone acetonide soln 0.01%</i>	1	
<i>fluocinolone acetonide cream 0.025%</i>	1	
<i>fluocinolone acetonide oint 0.025%</i>	1	
<i>fluocinolone acetonide oil 0.01% (body oil)</i>	1	
<i>fluocinolone acetonide oil 0.01% (scalp oil)</i>	1	
<i>fluocinonide cream 0.05%</i>	1	
<i>fluocinonide gel 0.05%</i>	1	
<i>fluocinonide oint 0.05%</i>	1	
<i>fluocinonide soln 0.05%</i>	1	
<i>fluocinonide cream 0.1%</i>	1	
<i>fluocinonide emulsified base cream 0.05%</i>	1	
FLURANDRENOLIDE 0.05 % CREAM	1	
<i>flurandrenolide cream 0.05%</i>	1	
FLURANDRENOLIDE 0.05 % LOTION	1	
<i>flurandrenolide lotion 0.05%</i>	1	
<i>flurandrenolide oint 0.05%</i>	1	
<i>flurandrenolide cream 0.05%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>flurandrenolide lotion 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>fluticasone propionate cream 0.05%</i>	1	
FLUTICASONE PROPIONATE 0.05 % LOTION	1	
<i>fluticasone propionate lotion 0.05%</i>	1	
<i>halcinonide cream 0.1%</i>	1	
<i>halcinonide soln 0.1%</i>	1	
<i>halobetasol propionate cream 0.05%</i>	1	
<i>halobetasol propionate foam 0.05%</i>	1	
<i>halobetasol propionate oint 0.05%</i>	1	
<i>halobetasol propionate foam 0.05%</i>	1	
HYDROCORTISONE BUTYRATE 0.1 % CREAM	1	
<i>hydrocortisone butyrate lotion 0.1%</i>	1	
HYDROCORTISONE BUTYRATE 0.1 % OINTMENT	1	
<i>hydrocortisone butyrate oint 0.1%</i>	1	
HYDROCORTISONE BUTYRATE 0.1 % SOLUTION	1	
<i>hydrocortisone butyrate hydrophilic lipo base cream 0.1%</i>	1	
HYDROCORTISONE BUTYR LIPO BASE 0.1 % CREAM	1	
LOCOID LIPOCREAM 0.1 % CREAM	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone cream 1%</i>	1	
<i>hydrocortisone oint 1%</i>	1	
<i>hydrocortisone cream 2.5%</i>	1	
HYDROCORTISONE 2.5 % LOTION	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone oint 2.5%</i>	1	
HYDROCORTISONE 2.5 % SOLUTION	1	
HYDROCORTISONE 2 % LOTION	1	
<i>hydrocortisone valerate cream 0.2%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocortisone valerate oint 0.2%</i>	1	
<i>mometasone furoate cream 0.1%</i>	1	
<i>mometasone furoate oint 0.1%</i>	1	
<i>mometasone furoate solution 0.1% (lotion)</i>	1	
PREDNICARBATE 0.1 % OINTMENT	1	
<i>triamcinolone acetonide cream 0.025%</i>	1	
TRIAMCINOLONE ACETONIDE 0.025 % LOTION	1	
<i>triamcinolone acetonide lotion 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.025%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	1	
TRIAMCINOLONE ACETONIDE 0.147 MG/GM AERO SOLN	1	
<i>triamcinolone acetonide aerosol soln 0.147 mg/gm</i>	1	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide lotion 0.1%</i>	1	
<i>triamcinolone acetonide oint 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	1	
<i>triamcinolone acetonide cream 0.1%</i>	1	
<i>triamcinolone acetonide cream 0.5%</i>	1	
<i>triamcinolone acetonide oint 0.05%</i>	1	
DEPIGMENTING AGENTS		
BLANCHE 4 % CREAM	4	EX Plan Exclusion
HYDROQUINONE 4 % CREAM	4	EX Plan Exclusion
<i>hydroquinone cream 4%</i>	4	EX Plan Exclusion
KAXM 4 % EMULSION	4	EX Plan Exclusion
KEIDO 6 % EMULSION	4	EX Plan Exclusion
KEXM 6 % EMULSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KUTEA 8 % EMULSION	4	EX Plan Exclusion
KUXM 8 % EMULSION	4	EX Plan Exclusion
MEDORFA 6 % EMULSION	4	EX Plan Exclusion
MEDORFA HP 8 % EMULSION	4	EX Plan Exclusion
MEDORFA HP PLUS 8 % EMULSION	4	EX Plan Exclusion
MEDORFA LP 4 % EMULSION	4	EX Plan Exclusion
MEDORFA PLUS 6 % EMULSION	4	EX Plan Exclusion
DEPIGMENTING COMBINATIONS		
TRI-LUMA 0.01-4-0.05 % CREAM	4	EX Plan Exclusion
KEYA 6-0.5 % EMULSION	4	EX Plan Exclusion
MIMORA 6-0.5 % EMULSION	4	EX Plan Exclusion
KATARYA 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion
KATARYAXN 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion
KETARYA 6-0.5-0.025 % EMULSION	4	EX Plan Exclusion
KEVARYA 6-0.5-0.05 % EMULSION	4	EX Plan Exclusion
KUTARYAXM 8-0.5-0.025 % EMULSION	4	EX Plan Exclusion
KUTARYAXMPA 8-0.5-0.025 % EMULSION	4	EX Plan Exclusion
KUVARYA 8-0.5-0.05 % EMULSION	4	EX Plan Exclusion
KUVARYE 8-1-0.05 % EMULSION	4	EX Plan Exclusion
MECORIX 8-0.5-0.025 % EMULSION	4	EX Plan Exclusion
MECORIX HP 8-0.5-0.05 % EMULSION	4	EX Plan Exclusion
MECORIX PLUS 8-0.5-0.025 % EMULSION	4	EX Plan Exclusion
MEKAM 6-0.5-0.025 % EMULSION	4	EX Plan Exclusion
MEKAM HP 6-0.5-0.05 % EMULSION	4	EX Plan Exclusion
MELIDU 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion
MELONDIS 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MELONDIS PLUS 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion
MOLEXI 4-2.5-0.025 % EMULSION	4	EX Plan Exclusion
MYTHIUS 8-1-0.05 % EMULSION	4	EX Plan Exclusion
YAXATARXYN 4-0.5-0.025 % EMULSION	4	EX Plan Exclusion
YOKATAR 4-2.5-0.025 % EMULSION	4	EX Plan Exclusion
KATARVIA 4-0.025 % EMULSION	4	EX Plan Exclusion
KEVARTIA 6-0.05 % EMULSION	4	EX Plan Exclusion
KUTAR 8-0.025 % EMULSION	4	EX Plan Exclusion
KUTARVIA 8-0.025 % EMULSION	4	EX Plan Exclusion
MOKURA 8-0.025 % EMULSION	4	EX Plan Exclusion
MOKURA LP 4-0.025 % EMULSION	4	EX Plan Exclusion
MOKURA MOD 6-0.05 % EMULSION	4	EX Plan Exclusion
MOKURA PLUS 8-0.025 % EMULSION	4	EX Plan Exclusion
KATARAXAP 4-0.025-0.025 % EMULSION	4	EX Plan Exclusion
KEVARAXAP 6-0.05-0.025 % EMULSION	4	EX Plan Exclusion
KOTARAXAP 5-0.025-0.025 % EMULSION	4	EX Plan Exclusion
MAVILO 5-0.025-0.025 % EMULSION	4	EX Plan Exclusion
MAVILO HP 6-0.05-0.025 % EMULSION	4	EX Plan Exclusion
MAVILO LP 4-0.025-0.025 % EMULSION	4	EX Plan Exclusion
MYVORI 10-4 % CREAM	4	EX Plan Exclusion
PROOXIA 10-4 % CREAM	4	EX Plan Exclusion
EMOLLIENT/KERATOLYTIC AGENTS		
<i>urea lotion 40%</i>	1	
DERMACINRX UREA 41 % CREAM	1	
DERMACURE 41 % CREAM	1	
<i>urea foam 40%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UREA 20 % CREAM	1	
UREA 39 % CREAM	1	
<i>urea cream 39%</i>	1	
UREA 40 % CREAM	1	
<i>urea cream 40%</i>	1	
UREA 40 % LOTION	1	
UREA 41 % CREAM	1	
<i>urea cream 41%</i>	1	
UREA 45 % CREAM	1	
UREA 47 % CREAM	1	
<i>urea cream 47%</i>	1	
<i>urea gel 45%</i>	1	
UREDEB 39 % CREAM	1	
UREMEZ-40 40 % CREAM	1	
XUREA 39 % CREAM	1	
EMOLLIENTS		
<i>lactic acid (ammonium lactate) cream 12%</i>	1	
<i>lactic acid (ammonium lactate) lotion 12%</i>	1	
LACTIC ACID 10 % LOTION	3	
ENZYMES - TOPICAL		
NEXOBRID 8.8 % GEL	3	
SANTYL 250 UNIT/GM OINTMENT	3	
GLABELLAR LINES (FROWN LINES) AGENTS		
BOTOX COSMETIC 100 UNIT RECON SOLN	4	EX Plan Exclusion
BOTOX COSMETIC 50 UNIT RECON SOLN	4	EX Plan Exclusion
JEUVEAU 100 UNIT RECON SOLN	4	EX Plan Exclusion
HAIR GROWTH AGENT - COMBINATIONS		
HEMTARA 0.05-5 % SOLUTION	4	EX Plan Exclusion
HEMTARA HP 0.05-7 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OXOPID 0.05-5 % SOLUTION	4	EX Plan Exclusion
OXOPOD 0.05-7 % SOLUTION	4	EX Plan Exclusion
HESMILLA 0.05-5-2-0.5 % SOLUTION	4	EX Plan Exclusion
OXOPIDAXIAQUP 0.05-5-2-0.5 % SOLUTION	4	EX Plan Exclusion
FLYPROGPIDTAR 0.1-0.1-5-0.025 % SOLUTION	4	EX Plan Exclusion
HARISIS 0.1-0.1-5-0.025 % SOLUTION	4	EX Plan Exclusion
FINAPID 0.1-5 % SOLUTION	4	EX Plan Exclusion
FINAPOD 0.1-7 % SOLUTION	4	EX Plan Exclusion
HARVIVA 0.1-5 % SOLUTION	4	EX Plan Exclusion
HARVIVA HP 0.1-7 % SOLUTION	4	EX Plan Exclusion
FINAPODTAR 0.1-7-0.025 % SOLUTION	4	EX Plan Exclusion
HONISTA 0.1-7-0.025 % SOLUTION	4	EX Plan Exclusion
HEVONA 0.01-5-0.025 % SOLUTION	4	EX Plan Exclusion
TETPIDTAR 0.01-5-0.025 % SOLUTION	4	EX Plan Exclusion
HOVITRA 7-4 % SOLUTION	4	EX Plan Exclusion
PODOXIA 7-4 % SOLUTION	4	EX Plan Exclusion
HENTIS 5-0.1-0.025 % SOLUTION	4	EX Plan Exclusion
HENTIS HP 7-0.1-0.025 % SOLUTION	4	EX Plan Exclusion
PIDPROGTAR 5-0.1-0.025 % SOLUTION	4	EX Plan Exclusion
PODPROGTAR 7-0.1-0.025 % SOLUTION	4	EX Plan Exclusion
HOLIZAR 7-0.025 % SOLUTION	4	EX Plan Exclusion
PODTAR 7-0.025 % SOLUTION	4	EX Plan Exclusion
HOLIXIA 0.1-7 % SOLUTION	4	EX Plan Exclusion
PODPROG 0.1-7 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMIDAZOLE-RELATED ANTIFUNGALS - TOPICAL		
<i>clotrimazole cream 1%</i>	1	
<i>clotrimazole soln 1%</i>	1	
<i>econazole nitrate cream 1%</i>	1	
JUBLIA 10 % SOLUTION	3	PA
<i>ketoconazole cream 2%</i>	1	
<i>ketoconazole foam 2%</i>	1	
<i>ketoconazole shampoo 2%</i>	1	
<i>ketoconazole foam 2%</i>	1	
LULICONAZOLE 1 % CREAM	1	
<i>oxiconazole nitrate cream 1%</i>	1	
SULCONAZOLE NITRATE 1 % CREAM	1	
SULCONAZOLE NITRATE 1 % SOLUTION	1	
IMMUNOMODULATORS IMIDAZOQUINOLINAMINES - TOPICAL		
<i>imiquimod cream 3.75%</i>	1	
<i>imiquimod cream 5%</i>	1	
<i>imiquimod cream 3.75%</i>	1	
INTERLEUKIN-31 RECEPTOR ANTAGONISTS - SYSTEMIC		
NEMLUVIO 30 MG A-INJ	2	PA S
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
CANTHARIDIN 0.7 % SOLUTION	3	
YCANTH 0.7 % SOLUTION	3	
<i>podofilox gel 0.5%</i>	1	
PODOFILOX 0.5 % SOLUTION	1	
<i>podofilox soln 0.5%</i>	1	
ACNESIC 0.5 % GEL	3	
KERALYT 6 % SHAMPOO	1	
<i>salicylic acid foam 6%</i>	1	
SALICYLIC ACID 6 % GEL	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SALICYLIC ACID 6 % SHAMPOO	1	
SALICYLIC ACID ER 28.5 % SOLUTION	1	
<i>salicylic acid film forming liquid 27.5%</i>	1	
SALICYLIC ACID WART REMOVER 27.5 % LIQUID	1	
<i>salicylic acid gel 6%</i>	1	
SALICYLIC ACID-CLEANSER 6 % (CREAM) KIT	1	
<i>*salicylic acid cream 6% & cleanser liqd kit**</i>	1	
LOCAL ANESTHETICS - TOPICAL		
QUTENZA (2 PATCH) 8 % KIT	3	S
QUTENZA (4 PATCH) 8 % KIT	3	S
QUTENZA 8 % KIT	3	S
<i>lidocaine oint 5%</i>	1	
<i>lidocaine patch 5%</i>	1	
<i>lidocaine patch 5%</i>	1	
PREMIUM LIDOCAINE 5 % OINTMENT	1	
<i>lidocaine patch 5%</i>	1	
<i>lidocaine patch 5%</i>	1	
LIDOCAINE HCL 3 % CREAM	1	
<i>lidocaine hcl cream 3%</i>	1	
LIDOPIN 3 % CREAM	1	
MACROLIDE IMMUNOSUPPRESSANTS - TOPICAL		
ELIDEL 1 % CREAM	3	PA
<i>pimecrolimus cream 1%</i>	1	
<i>tacrolimus oint 0.03%</i>	1	
<i>tacrolimus oint 0.1%</i>	1	
MICROTUBULE INHIBITORS - TOPICAL		
KLISYRI (250 MG) 1 % OINTMENT	2	
KLISYRI (350 MG) 1 % OINTMENT	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MISC. DERMATOLOGICAL PRODUCTS		
ALADERM PLUS EMULSION	4	EX Plan Exclusion
ALEVAMAX CREAM	4	EX Plan Exclusion
ALEVICYN ANTIPRURITIC GEL	4	EX Plan Exclusion
ALEVICYN ANTIPRURITIC SG GEL	4	EX Plan Exclusion
ATOPADERM CREAM	4	EX Plan Exclusion
ATOPICLAIR CREAM	4	EX Plan Exclusion
CERACADE EMULSION	4	EX Plan Exclusion
CERAMAX CREAM	4	EX Plan Exclusion
CERAMAX LOTION	4	EX Plan Exclusion
DERMASO PLUS CREAM	4	EX Plan Exclusion
DEXERYL CREAM	4	EX Plan Exclusion
ELESTONE CREAM	4	EX Plan Exclusion
EMULSION SB EMULSION	4	EX Plan Exclusion
ENTTY SPRAY EMULSION	4	EX Plan Exclusion
EPICERAM EMULSION	4	EX Plan Exclusion
GENADUR KIT	4	EX Plan Exclusion
GENADUR LIQUID	4	EX Plan Exclusion
HALUCORT GEL	4	EX Plan Exclusion
HPR PLUS CREAM	4	EX Plan Exclusion
HPR PLUS FOAM	4	EX Plan Exclusion
HPR PLUS HYDROGEL KIT	4	EX Plan Exclusion
HYLAGUARD CREAM	4	EX Plan Exclusion
HYLATOPIC PLUS CREAM	4	EX Plan Exclusion
HYLATOPIC PLUS LOTION	4	EX Plan Exclusion
ILIDERM EMULSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KAMDOY EMULSION	4	EX Plan Exclusion
KIVIK EMULSION	4	EX Plan Exclusion
LEVICYN GEL	4	EX Plan Exclusion
LOYON SOLUTION	4	EX Plan Exclusion
MIMYX CREAM	4	EX Plan Exclusion
NEOSALUS CREAM	4	EX Plan Exclusion
NEOSALUS FOAM	4	EX Plan Exclusion
NEOSALUS LOTION	4	EX Plan Exclusion
NIVATOPIC PLUS CREAM	4	EX Plan Exclusion
NUVAIL SOLUTION	4	EX Plan Exclusion
PENLEN EMULSION	4	EX Plan Exclusion
PHLAG SPRAY EMULSION	4	EX Plan Exclusion
PR CREAM KIT	4	EX Plan Exclusion
PRESERA FOAM	4	EX Plan Exclusion
PRUCLAIR CREAM	4	EX Plan Exclusion
PRUMYX CREAM	4	EX Plan Exclusion
REMIGEN CREAM	4	EX Plan Exclusion
SEBUDERM GEL	4	EX Plan Exclusion
STRATA CTX GEL	4	EX Plan Exclusion
STRATA MARK GEL	4	EX Plan Exclusion
STRATA XRT GEL	4	EX Plan Exclusion
SUVICORT EMULSION	4	EX Plan Exclusion
SYNERDERM EMULSION	4	EX Plan Exclusion
TETRIX CREAM	4	EX Plan Exclusion
XERALUX CREAM	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MISC. TOPICAL		
DRYSOL 20 % SOLUTION	2	
BORIC ACID GRANULES	3	
ORNITHINE DECARBOXYLASE (ODC) INHIBITORS - TOPICAL		
VANIQA 13.9 % CREAM	4	EX Plan Exclusion
OXABOROLE-RELATED ANTIFUNGALS - TOPICAL		
<i>tavaborole soln 5%</i>	1	
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
EUCRISA 2 % OINTMENT	3	PA
ZORYVE 0.3 % FOAM	3	PA
ZORYVE 0.15 % CREAM	3	PA
ZORYVE 0.3 % CREAM	3	PA
PHOTODYNAMIC THERAPY AGENTS - TOPICAL		
AMELUZ 10 % GEL	3	
LEVULAN KERASTICK 20 % RECON SOLN	3	
PROSTAGLANDINS - TOPICAL		
<i>bimatoprost soln 0.03%</i>	4	EX Plan Exclusion
LATISSE 0.03 % SOLUTION	4	EX Plan Exclusion
ROSACEA AGENTS		
<i>azelaic acid gel 15%</i>	1	
FINACEA 15 % FOAM	3	
<i>brimonidine tartrate gel 0.33% (base equivalent)</i>	1	
MIRVASO 0.33 % GEL	3	
<i>ivermectin cream 1%</i>	1	
SOOLANTRA 1 % CREAM	2	
METROCREAM 0.75 % CREAM	3	
METROGEL 1 % GEL	2	
METROLOTION 0.75 % LOTION	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
<i>metronidazole lotion 0.75%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole gel 1%</i>	1	
<i>metronidazole cream 0.75%</i>	1	
<i>metronidazole gel 0.75%</i>	1	
ZILXI 1.5 % FOAM	2	
RHOFADE 1 % CREAM	2	
SCABICIDES & PEDICULICIDES		
IVERMECTIN 0.5 % LOTION	1	
<i>malathion lotion 0.5%</i>	1	
OVIDE 0.5 % LOTION	3	
ELIMITE 5 % CREAM	3	
<i>permethrin cream 5%</i>	1	
NATROBA 0.9 % SUSPENSION	3	
SPINOSAD 0.9 % SUSPENSION	1	
SULFURATED LIME SOLUTION	3	
SCAR TREATMENT PRODUCTS		
BEAU RX GEL	4	EX Plan Exclusion
CELACYN GEL	4	EX Plan Exclusion
COPASIL GEL	4	EX Plan Exclusion
DERMELLE GEL	4	EX Plan Exclusion
JUVAZIN GEL	4	EX Plan Exclusion
KELARX GEL	4	EX Plan Exclusion
RECEDO GEL	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SCARCIN GEL	4	EX Plan Exclusion
SCARCIN LIQUID	4	EX Plan Exclusion
SCARSILK GEL	4	EX Plan Exclusion
STRATA TRIZ GEL	4	EX Plan Exclusion
SCAR TREATMENT PRODUCTS - COMBINATIONS		
SILIPAC KIT	4	EX Plan Exclusion
SEBORRHEIC KERATOSIS PRODUCTS		
ESKATA 40 % SOLUTION	3	
SKIN PROTECTANTS		
<i>benzoin compound tincture</i>	1	
STEROID-LOCAL ANESTHETIC COMBINATIONS		
HYDROCAINE 3-0.5 % CREAM	3	
LIDOCAINE-HYDROCORTISONE ACE 1-1 % CREAM	2	
EPIFOAM 1-1 % FOAM	3	
HYDROCORTISONE ACE-PRAMOXINE 2.5-1 % CREAM	2	
PRAMOSONE 1-1 % CREAM	3	
PRAMOSONE 1-1 % OINTMENT	3	
PRAMOSONE 1-2.5 % CREAM	3	
PRAMOSONE 1-2.5 % OINTMENT	3	
PRAMOXINE-HC 1-2.35 % CREAM	3	
TISSUE REPLACEMENTS		
STRATAGRAFT SHEET	4	PA S EX Plan Exclusion
PALINGEN INOVOFLO 0.25 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN INOVOFLO 0.5 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN INOVOFLO 1 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN INOVOFLO 2 ML INJECTABLE	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFFINITY 1.5 CM X 1.5 CM SHEET	4	EX Plan Exclusion
AFFINITY 2.5 CM X 2.5 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 2 CM X 12 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 3 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 4 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 4 CM X 6 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 6 CM X 16 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 6 CM X 6 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 6 CM X 9 CM SHEET	4	EX Plan Exclusion
AMNIOCORE AMNIOTIC MEMBRANE 9 CM X 20 CM SHEET	4	EX Plan Exclusion
AMNIOCORE HUMAN TISSUE 9 CM X 20 CM SHEET	4	EX Plan Exclusion
AMNIOFIX 100 MG RECON SUSP	4	EX Plan Exclusion
AMNIOFIX 160 MG RECON SUSP	4	EX Plan Exclusion
AMNIOFIX 20 MG RECON SUSP	4	EX Plan Exclusion
AMNIOFIX 40 MG RECON SUSP	4	EX Plan Exclusion
AMNIOTEXT 10 CM X 10 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 1 CM X 1 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 2 CM X 2 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 2 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 3 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 4 CM X 3 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 4 CM X 4 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMNIOTEXT 4 CM X 6 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 4 CM X 8 CM SHEET	4	EX Plan Exclusion
AMNIOTEXT 8 CM X 8 CM SHEET	4	EX Plan Exclusion
AMPHENOL-40 40 MG RECON SUSP	4	EX Plan Exclusion
BIOVANCE 1 CM X 2 CM SHEET	4	EX Plan Exclusion
BIOVANCE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
BIOVANCE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
BIOVANCE 6 CM X 6 CM SHEET	4	EX Plan Exclusion
CYGNUS DUAL 2 CM X 3 CM SHEET	4	EX Plan Exclusion
CYGNUS DUAL 4 CM X 4 CM SHEET	4	EX Plan Exclusion
CYGNUS DUAL 4 CM X 6 CM SHEET	4	EX Plan Exclusion
EPIFIX 14 MM DISK	4	EX Plan Exclusion
EPIFIX 18 MM DISK	4	EX Plan Exclusion
EPIFIX 24 MM DISK	4	EX Plan Exclusion
EPIFIX 2 CM X 2 CM SHEET	4	EX Plan Exclusion
EPIFIX 2 CM X 3 CM SHEET	4	EX Plan Exclusion
EPIFIX 2 CM X 4 CM SHEET	4	EX Plan Exclusion
EPIFIX 3.5 CM X 3.5 CM SHEET	4	EX Plan Exclusion
EPIFIX 3 CM X 3 CM SHEET	4	EX Plan Exclusion
EPIFIX 3 CM X 5 CM SHEET	4	EX Plan Exclusion
EPIFIX 4 CM X 3 CM SHEET	4	EX Plan Exclusion
EPIFIX 4 CM X 4.5 CM SHEET	4	EX Plan Exclusion
EPIFIX 4 CM X 4 CM SHEET	4	EX Plan Exclusion
EPIFIX 4 CM X 6 CM SHEET	4	EX Plan Exclusion
EPIFIX 5 CM X 5.5 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPIFIX 5 CM X 6 CM SHEET	4	EX Plan Exclusion
EPIFIX 7 CM X 7 CM SHEET	4	EX Plan Exclusion
EPIFIX MICRONIZED 100 MG RECON SUSP	4	EX Plan Exclusion
EPIFIX MICRONIZED 160 MG RECON SUSP	4	EX Plan Exclusion
EPIFIX MICRONIZED 40 MG RECON SUSP	4	EX Plan Exclusion
KARDIAMEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
KARDIAMEMBRANE 6 CM X 8 CM SHEET	4	EX Plan Exclusion
KARDIAMEMBRANE 8 CM X 8 CM SHEET	4	EX Plan Exclusion
NEOX 100 2 CM X 2 CM SHEET	4	EX Plan Exclusion
NEOX 100 3 CM X 3 CM SHEET	4	EX Plan Exclusion
NEOX 100 4 CM X 4 CM SHEET	4	EX Plan Exclusion
NEOX 100 7 CM X 7 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 1.5 CM X 1.5 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 1 CM X 2 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 2.5 CM X 2.5 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 2 CM X 2 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 2 CM X 3 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 3 CM X 3 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 4 CM X 3 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 6 CM X 3 CM SHEET	4	EX Plan Exclusion
NEOX CORD 1K 8 CM X 3 CM SHEET	4	EX Plan Exclusion
NUSHIELD 14 MM DISK	4	EX Plan Exclusion
NUSHIELD 1.6 CM DISK	4	EX Plan Exclusion
NUSHIELD 2 CM X 3 CM SHEET	4	EX Plan Exclusion
NUSHIELD 2 CM X 4 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUSHIELD 3.2 CM X 3.2 CM SHEET	4	EX Plan Exclusion
NUSHIELD 4 CM X 3 CM SHEET	4	EX Plan Exclusion
NUSHIELD 4 CM X 4 CM SHEET	4	EX Plan Exclusion
NUSHIELD 4 CM X 6 CM SHEET	4	EX Plan Exclusion
NUSHIELD 6 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 1 CM X 1 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 1 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 2 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 2 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 2 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 2 CM X 9 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 4 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN HYDROMEMBRANE 8 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 1 CM X 1 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 1 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 2 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 2 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 2 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 2 CM X 9 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 4 CM X 6 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALINGEN MEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN MEMBRANE 8 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 1 CM X 1 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 1 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 2 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 2 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 2 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 2 CM X 9 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 4 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS HYDROMEMBRANE 8 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 1 CM X 1 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 1 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 2 CM X 2 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 2 CM X 3 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 2 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 2 CM X 6 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 2 CM X 9 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 4 CM X 4 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 4 CM X 6 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PALINGEN XPLUS MEMBRANE 4 CM X 8 CM SHEET	4	EX Plan Exclusion
PALINGEN XPLUS MEMBRANE 8 CM X 8 CM SHEET	4	EX Plan Exclusion
SIMPLIGRAFT 2 CM X 3 CM SHEET	4	EX Plan Exclusion
SIMPLIGRAFT 4 CM X 4 CM SHEET	4	EX Plan Exclusion
SIMPLIGRAFT 4 CM X 8 CM SHEET	4	EX Plan Exclusion
STRAVIX 2 CM X 4 CM SHEET	4	EX Plan Exclusion
STRAVIX 6 CM X 3 CM SHEET	4	EX Plan Exclusion
VIA MATRIX 10 CM X 11 CM SHEET	4	EX Plan Exclusion
VIA MATRIX 2 CM X 3 CM SHEET	4	EX Plan Exclusion
VIA MATRIX 4 CM X 4 CM SHEET	4	EX Plan Exclusion
VIA MATRIX 4 CM X 6 CM SHEET	4	EX Plan Exclusion
NUCEL 0.5 ML INJECTABLE	4	EX Plan Exclusion
NUCEL 1 ML INJECTABLE	4	EX Plan Exclusion
NUCEL 2.5 ML INJECTABLE	4	EX Plan Exclusion
NUCEL 2 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN FLOW 0.25 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN FLOW 0.5 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN FLOW 1 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN FLOW 2 ML INJECTABLE	4	EX Plan Exclusion
PALINGEN FLOW 4 ML INJECTABLE	4	EX Plan Exclusion
OSTEOCONDUCTIVE MATRIX PLUS 10 ML INJECTABLE	4	EX Plan Exclusion
OSTEOCONDUCTIVE MATRIX PLUS 2 ML INJECTABLE	4	EX Plan Exclusion
OSTEOCONDUCTIVE MATRIX PLUS 5 ML INJECTABLE	4	EX Plan Exclusion
NOVACHOR 1.5 CM X 2.75 CM SHEET	4	EX Plan Exclusion
NOVACHOR 2.5 CM X 2.5 CM SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
APLIGRAF DISK	4	EX Plan Exclusion
TRANSCYTE SHEET	4	EX Plan Exclusion
GRAFIX CORE 1.5CM X 2CM MISC	4	EX Plan Exclusion
GRAFIX CORE 16MM MISC	4	EX Plan Exclusion
GRAFIX CORE 2CM X 3CM MISC	4	EX Plan Exclusion
GRAFIX CORE 3CM X 4CM MISC	4	EX Plan Exclusion
GRAFIX CORE 5CM X 5CM MISC	4	EX Plan Exclusion
GRAFIX PRIME 1.5CM X 2CM MISC	4	EX Plan Exclusion
GRAFIX PRIME 16MM MISC	4	EX Plan Exclusion
GRAFIX PRIME 2CM X 3CM MISC	4	EX Plan Exclusion
GRAFIX PRIME 3CM X 4CM MISC	4	EX Plan Exclusion
GRAFIX PRIME 5CM X 5CM MISC	4	EX Plan Exclusion
GRAFIX XC 7.5CM X 15CM MISC	4	EX Plan Exclusion
TRUSKIN 2 CM X 4 CM SHEET	4	EX Plan Exclusion
TRUSKIN 4 CM X 8 CM SHEET	4	EX Plan Exclusion
CORETEXT 1 ML SUSPENSION	4	EX Plan Exclusion
CORETEXT 2 ML SUSPENSION	4	EX Plan Exclusion
EPICORD 1 CM X 2 CM SHEET	4	EX Plan Exclusion
EPICORD 2 CM X 3 CM SHEET	4	EX Plan Exclusion
EPICORD 3 CM X 5 CM SHEET	4	EX Plan Exclusion
PROTEXT 0.25 ML SUSPENSION	4	EX Plan Exclusion
PROTEXT 0.5 ML SUSPENSION	4	EX Plan Exclusion
PROTEXT 1 ML SUSPENSION	4	EX Plan Exclusion
PROTEXT 2 ML SUSPENSION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPICAL ANESTHETIC COMBINATIONS		
CETACAINE 2-2-14 % AEROSOL	3	
CETACAINE 2-2-14 % LIQUID	3	
LEVATIO 0.03-5 % PATCH	3	
VENIPUNCTURE PX1 PHLEBOTOMY 2 % KIT	4	EX Plan Exclusion
SX1 MEDICATED POST-OPERATIVE 2 % KIT	4	EX Plan Exclusion
LIDOTHOL 4-1 % PATCH	1	
ZERUVIA 4-1 % PATCH	1	
ACCUCAINE 1 % KIT	4	EX Plan Exclusion
AGONEAZE 2.5-2.5 % KIT	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
LIDO BDK 2.5-2.5 % KIT	1	
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
LIVIXIL PAK 2.5-2.5 % KIT	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
PRILOVIX 2.5-2.5 % KIT	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
PRILOVIX PLUS 2.5-2.5 % KIT	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>lidocaine-prilocaine cream kit 2.5-2.5%</i>	1	
<i>*lidocaine ointment 5% & transparent dressing kit***</i>	1	
<i>*lidocaine ointment 5% & transparent dressing kit***</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>*lidocaine ointment 5% & transparent dressing kit***</i>	1	
TOPICAL SELECTIVE RETINOID X RECEPTOR AGONISTS		
<i>bexarotene gel 1%</i>	1	S
TARGRETIN 1 % GEL	3	S
TOPICAL STEROID COMBINATIONS		
<i>calcipotriene-betamethasone dipropionate oint 0.005-0.064%</i>	1	
<i>calcipotriene-betamethasone dipropionate susp 0.005-0.064%</i>	1	
TYPE II 5-ALPHA REDUCTASE INHIBITORS		
<i>finasteride tab 1 mg</i>	4	EX Plan Exclusion
PROPECIA 1 MG TAB	4	EX Plan Exclusion
WOUND CARE COMBINATIONS		
BALSAM PERU-CASTOR OIL OINTMENT	4	EX Plan Exclusion
B & C OINTMENT	4	EX Plan Exclusion
BPCO OINTMENT	4	EX Plan Exclusion
VENELEX OINTMENT	4	EX Plan Exclusion
XEROFORM OCCLUSIVE GAUZE PATCH 3 % PAD	4	EX Plan Exclusion
XEROFORM OCCLUSIVE GAUZE STRIP PAD	4	EX Plan Exclusion
XEROFORM OIL EMULSION 2"X2" PAD	4	EX Plan Exclusion
XEROFORM OIL EMULSION GAUZE PAD	4	EX Plan Exclusion
XEROFORM OIL EMULSION STRIP MISC	4	EX Plan Exclusion
XEROFORM OIL ROLL 4"X9' 3 % MISC	4	EX Plan Exclusion
XEROFORM PETROLAT GAUZE 1"X8" MISC	4	EX Plan Exclusion
XEROFORM PETROLAT GAUZE 5"X9" MISC	4	EX Plan Exclusion
XEROFORM PETROLAT PATCH 2"X2" PAD	4	EX Plan Exclusion
XEROFORM PETROLAT PATCH 4"X4" PAD	4	EX Plan Exclusion
XEROFORM PETROLATUM DRES 4"X4" 3 % PAD	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XEROFORM PETROLATUM DRES 5"X9" 3 % PAD	4	EX Plan Exclusion
XEROFORM PETROLATUM ROLL 4"X9' MISC	4	EX Plan Exclusion
LIDOTREX (ALOE VERA) 2 % GEL	4	EX Plan Exclusion
REGENECARE 2 % GEL	4	EX Plan Exclusion
REGENECARE 2 % GEL	4	EX Plan Exclusion
REXASIL PATCH & VITAMIN E LIQ KIT	4	EX Plan Exclusion
SCARCARE GEL-PAD KIT/LARGE KIT	4	EX Plan Exclusion
WOUND TREATMENT - AUTOLOGOUS CELLULAR GENE THERAPY		
ZEVASKYN SHEET	4	PA S EX Plan Exclusion
WOUND TREATMENT - GENE THERAPY		
VYJUVEK 5000000000 PFU/2.5ML GEL	4	PA S EX Plan Exclusion
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC BIOLOGICALS		
ALFALFA 1:20 SOLUTION	4	EX Plan Exclusion
ALMOND (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
ALMOND (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
ALTERNARIA ALTERNAT (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
AMERICAN ELM (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
AMERICAN LOBSTER (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
APPLE (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
APPLE (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
ASPERGILLUS FUMIGAT (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
ASPERGILLUS FUMIGATUS 1:20 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATLANTIC COD (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
ATLANTIC/EASTERN OYSTER(DIAGN) 1:20 SOLUTION	4	EX Plan Exclusion
ATLANTIC SALMON (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
AUREOBASIDIUM PULLULANS 1:20 SOLUTION	4	EX Plan Exclusion
AVOCADO (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
BANANA (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
BANANA (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
BEEF (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
BEEF (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BIPOLARIS SOROKIN (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BLACK WALNUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BLACK WILLOW (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BLUE CRAB (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BOTRYTIS CINEREA 1:20 SOLUTION	4	EX Plan Exclusion
BRAZIL NUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
BROWN SHRIMP (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
CANDIDA ALBICANS SKN TST ANTGN 1:10 SOLUTION	4	EX Plan Exclusion
CANDIDA ALBICANS SKN TST ANTGN SOLUTION	4	EX Plan Exclusion
CANDIN SOLUTION	4	EX Plan Exclusion
CANTALOUPE (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
CASEIN (DIAGNOSTIC) 1:100 SOLUTION	4	EX Plan Exclusion
CASHEW NUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
CELERY (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
CHICKEN MEAT (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
CHICKEN MEAT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLADOSPORIUM SPHAER (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
SPHERUSOL 127 MCG/0.1ML SOLUTION	4	EX Plan Exclusion
COCOA BEAN (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
COCONUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
CORN (ZEA MAYS) (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
COW MILK (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
CRAB (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
DOG EPITHELIUM (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
EASTERN COTTONWOOD(DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
EGG WHITE (DIAGNOSTIC) 1:100 SOLUTION	4	EX Plan Exclusion
ENGLISH PLANTAIN (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
ENGLISH WALNUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
HAZELNUT (FILBERT)(DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
HORSE EPITHELIUM (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
LAMBS QUARTERS (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
MOSQUITO (DIAGNOSTIC) 1:100 SOLUTION	4	EX Plan Exclusion
MOUNTAIN CEDAR (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
MOUSE EPITHELIUM (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
NETTLE (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
NORTHERN QUAHOG CLAM(DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
OAT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
OAT GRAIN (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
ORANGE (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
ORANGE (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
PEANUT (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEANUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
PECAN NUT (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
PECAN NUT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
PENICILLIUM NOTATUM 1:20 SOLUTION	4	EX Plan Exclusion
PENICILLIUM NOTATUM (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
PINEAPPLE (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
PISTACHIO NUT (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
PORK (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
PORK (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
RED MAPLE (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
RED OAK (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
RICE (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
RICE (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SACCHAROMYCES CEREVISIAE 1:20 SOLUTION	4	EX Plan Exclusion
SAGEBRUSH (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SEA SCALLOPS (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SESAME SEED (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
SESAME SEED (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SHRIMP (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
SOYBEAN (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
SOYBEAN (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
STRAWBERRY (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
STRAWBERRY (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
SWEET CHERRY (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SWEET CORN (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOMATO (DIAGNOSTIC) 1:10 SOLUTION	4	EX Plan Exclusion
TOMATO (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
TRICHOPHYTON MENTAG (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
APLISOL 5 UNIT/0.1ML SOLUTION	4	EX Plan Exclusion
TUBERSOL 5 UNIT/0.1ML SOLUTION	4	EX Plan Exclusion
WESTERN JUNIPER (DIAGNOSTIC) 1:40 SOLUTION	4	EX Plan Exclusion
WHITE ALDER (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
WHITE ASH (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
WHITE BIRCH (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
WHITE POTATO (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
WHOLE EGG (DIAGNOSTIC) 1:100 SOLUTION	4	EX Plan Exclusion
WHOLE GRAIN BARLEY(DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
WHOLE WHEAT (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
DIAGNOSTIC DRUGS		
<i>adenosine iv soln 3 mg/ml (diagnostic)</i>	4	EX Plan Exclusion
GLEOLAN 1.5 GM RECON SOLN	4	EX Plan Exclusion
R-GENE 10 10 % SOLUTION	4	EX Plan Exclusion
PRE-PEN 0.25 ML SOLUTION	4	EX Plan Exclusion
CORTROSYN 0.25 MG RECON SOLN	4	EX Plan Exclusion
<i>cosyntropin for inj 0.25 mg</i>	4	EX Plan Exclusion
DIPYRIDAMOLE 5 MG/ML SOLUTION	4	EX Plan Exclusion
D-XYLOSE POWDER	4	EX Plan Exclusion
GLUCAGON HCL (DIAGNOSTIC) 1 MG RECON SOLN	4	EX Plan Exclusion
GLUCAGEN DIAGNOSTIC 1 MG RECON SOLN	4	EX Plan Exclusion
CYSVIEW 100 MG RECON SOLN	4	EX Plan Exclusion
HISTATROL 0.275 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HISTATROL 2.75 MG/ML SOLUTION	4	EX Plan Exclusion
BLUDIGO 8 MG/ML SOLUTION	4	EX Plan Exclusion
INDIGO CARMINE 8 MG/ML SOLUTION	4	EX Plan Exclusion
IC GREEN 25 MG RECON SOLN	4	EX Plan Exclusion
INDOCYANINE GREEN 25 MG RECON SOLN	4	EX Plan Exclusion
SPY AGENT GREEN 25 MG RECON SOLN	4	EX Plan Exclusion
SPY- MIS KIT 25 MG RECON SOLN	4	EX Plan Exclusion
SPY-PHI KIT 25 MG RECON SOLN	4	EX Plan Exclusion
<i>isosulfan blue subcutaneous soln 1%</i>	4	EX Plan Exclusion
MACRILEN 60 MG PACKET	4	S EX Plan Exclusion
ARIDOL 0 & 5 & 10 & 20 & 40 MG KIT	4	EX Plan Exclusion
METHACHOLINE CHLORIDE KIT	4	EX Plan Exclusion
PROVOCHOLINE 100 MG RECON SOLN	4	EX Plan Exclusion
PROVOCHOLINE KIT	4	EX Plan Exclusion
VUEBLU 50 MG/10ML SOLUTION	4	EX Plan Exclusion
METOPIRONE 250 MG CAP	4	EX Plan Exclusion
CYTALUX 3.2 MG/1.6ML SOLUTION	4	EX Plan Exclusion
LUMISIGHT 39 MG RECON SOLN	4	EX Plan Exclusion
LEXISCAN 0.4 MG/5ML SOLUTION	4	EX Plan Exclusion
<i>regadenoson iv inj 0.4 mg/5ml (0.08 mg/ml)</i>	4	EX Plan Exclusion
SECREFLO 16 MCG RECON SOLN	4	EX Plan Exclusion
CHIRHOSTIM 16 MCG RECON SOLN	4	EX Plan Exclusion
KINEVAC 5 MCG RECON SOLN	4	EX Plan Exclusion
SINCALIDE 5 MCG RECON SOLN	4	EX Plan Exclusion
THYROGEN 0.9 MG RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIAGNOSTIC INFECTION TEST COMBINATIONS		
BD VERITOR SARS-COV-2/FLU A+B KIT	4	EX Plan Exclusion
SOFIA2 FLU+SARS ANTIGEN FIA KIT	4	EX Plan Exclusion
STATUS COVID-19/FLU A&B KIT	4	EX Plan Exclusion
TYFAST FLU A/B COVID-19 MULTIP KIT	4	EX Plan Exclusion
COBAS LIAT SARS-COV-2-AB CNTRL KIT	4	EX Plan Exclusion
COBAS LIAT SARS-COV-2-AB ASSAY KIT	4	EX Plan Exclusion
LUCIRA COVID-19 & FLU TEST KIT	4	EX Plan Exclusion
DIAGNOSTIC PRODUCTS, MISC.		
BREEZA FOR ORAL IODINATED CONT SOLUTION	4	EX Plan Exclusion
BREEZA NEUTRAL ABD/PELVIC IMAG SOLUTION	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - BRAIN		
NEURACEQ 1.4-135 MCI/ML SOLUTION	4	EX Plan Exclusion
AMYVID 500-1900 MBQ/ML SOLUTION	4	EX Plan Exclusion
TAUVID 300-1900 MBQ/ML SOLUTION	4	EX Plan Exclusion
TAUVID 300-3700 MBQ/ML SOLUTION	4	EX Plan Exclusion
FLUORODOPA F 18 37-1480 MBQ/ML SOLUTION	4	EX Plan Exclusion
VIZAMYL 4.05 MCI/ML SOLUTION	4	EX Plan Exclusion
DATSCAN 185 MBQ/2.5ML SOLUTION	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - CARDIAC		
AMMONIA N 13 3.75-260 MCI/ML SOLUTION	4	EX Plan Exclusion
AMMONIA N 13 3.75-37.5 MCI/ML SOLUTION	4	EX Plan Exclusion
AMMONIA N 13 3.75-37.5 MCI/ML SOLUTION	4	EX Plan Exclusion
FLYRCADO 5-55 MCI/ML SOLUTION	4	EX Plan Exclusion
CARDIOGEN-82 RECON SOLN	4	EX Plan Exclusion
CARDIOLITE KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TECHNETIUM TC 99M SESTAMIBI KIT	4	EX Plan Exclusion
MYOVIEW 30ML KIT	4	EX Plan Exclusion
MYOVIEW KIT	4	EX Plan Exclusion
THALLOUS CHLORIDE TL 201 2 MCI/ML SOLUTION	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - ENDOCRINE		
DETECTNET 1 MCI/ML SOLUTION	4	EX Plan Exclusion
NETSPOT KIT	4	EX Plan Exclusion
DOTATOC GA 68 0.5-4 MCI/ML SOLUTION	4	EX Plan Exclusion
INDIUM IN-111 PENTETREOTIDE KIT	4	EX Plan Exclusion
ADREVIEW 10 MCI/5ML SOLUTION	4	EX Plan Exclusion
INDIUM IN 111 DTPA SOLUTION	4	EX Plan Exclusion
SODIUM IODIDE I-123 3.7 MBQ CAP	4	EX Plan Exclusion
SODIUM IODIDE I-123 7.4 MBQ CAP	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - GASES		
XENON XE 133 10 MCI GAS	4	EX Plan Exclusion
XENON XE 133 20 MCI GAS	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - HEPATOBILIARY		
CHOLETEC KIT	4	EX Plan Exclusion
TECHNETIUM TC 99M MEBROFENIN KIT	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - LYMPHATIC SYSTEM		
LYMPHOSEEK KIT	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - MISCELLANEOUS		
FLUDEOXYGLUCOSE F 18 20-200 MCI/ML SOLUTION	4	EX Plan Exclusion
FLUDEOXYGLUCOSE F 18 20-300 MCI/ML SOLUTION	4	EX Plan Exclusion
FLUDEOXYGLUCOSE F 18 20-500 MCI/ML SOLUTION	4	EX Plan Exclusion
CERIANNA 4-100 MCI/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GALLIUM CITRATE GA 67 2 MCI/ML SOLUTION	4	EX Plan Exclusion
VOLUMEX 25 MCCI/ML SOLN PRSYR	4	EX Plan Exclusion
NEUROLITE KIT	4	EX Plan Exclusion
TECHNETIUM TC 99M PYROPHOS KIT	4	EX Plan Exclusion
LEU TECHNELITE KIT	4	EX Plan Exclusion
TECHNELITE KIT	4	EX Plan Exclusion
TECHNET TC 99M SULFUR COLLOID KIT	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - PROSTATIC		
POSLUMA 296-5846 MBQ/ML SOLUTION	4	EX Plan Exclusion
AXUMIN 9-221 MCI/ML SOLUTION	4	EX Plan Exclusion
LOCAMETZ 25 MCG KIT	4	EX Plan Exclusion
GALLIUM GA 68 PSMA-11 0.5-5 MCI/ML SOLUTION	4	EX Plan Exclusion
ILLUCCIX CONFIGURATION A 25 MCG KIT	4	EX Plan Exclusion
ILLUCCIX CONFIGURATION B 25 MCG KIT	4	EX Plan Exclusion
PYLARIFY 1-80 MCI/ML SOLUTION	4	EX Plan Exclusion
PYLARIFY 9 MCI SOLN PRSYR	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS - SKELETAL		
SODIUM FLUORIDE F 18 10-200 MCI/ML SOLUTION	4	EX Plan Exclusion
TECHNETIUM TC 99M MEDRONATE KIT	4	EX Plan Exclusion
DIAGNOSTIC RADIOPHARMACEUTICALS-IMMUNE CELL RADIOLABELING		
INDIUM IN 111 OXYQUINOLINE 1 MCI/ML SOLUTION	4	EX Plan Exclusion
CERETEC KIT	4	EX Plan Exclusion
DIAGNOSTIC SUPPLIES		
CERVICAL SPECIMEN COLLECTION SWAB	4	EX Plan Exclusion
ULTRASOUND GEL GEL	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIAGNOSTIC TESTS		
CHOLESTEROL AND LIPID TEST TEST	4	EX Plan Exclusion
DX1 ORAGENOMIC DNA SCREEN KIT	4	EX Plan Exclusion
DX2 ORAGENOMIC DNA SCREEN KIT	4	EX Plan Exclusion
MEDICATED DNA COLLECTION 2 KIT	4	EX Plan Exclusion
MEDICATED DNA COLLECTION KIT	4	EX Plan Exclusion
PRO DNA COLLECTION 2 % KIT	4	EX Plan Exclusion
PROFESSIONAL DNA COLLECTION KIT	4	EX Plan Exclusion
12-PANEL POC TOXICOLOGY SYSTEM KIT	4	EX Plan Exclusion
TOXICOLOGY MED COLLECTION SYS KIT	4	EX Plan Exclusion
UDSX MEDICATED SYSTEM 20 MG KIT	4	EX Plan Exclusion
UDSXMP MEDICATED SYSTEM 20 MG KIT	4	EX Plan Exclusion
HOME PAP KIT 2.5 % KIT	4	EX Plan Exclusion
PH STRIPS TEST	4	EX Plan Exclusion
DIGITAL DIAGNOSTIC AIDS		
CANVAS DX DIAGNOSIS AID AUTISM MISC	4	EX Plan Exclusion
INFECTION TESTS		
ECOTEST COVID-19 RAPID TEST KIT	4	EX Plan Exclusion
FASTEP COVID-19 RAPID TEST KIT	4	EX Plan Exclusion
BD VERITOR SYSTEM SARS-COV-2 KIT	4	EX Plan Exclusion
BINAXNOW COVID-19 AG CARD KIT	4	EX Plan Exclusion
QUICKVUE SARS ANTIGEN TEST KIT	4	EX Plan Exclusion
SOFIA2 SARS ANTIGEN FIA KIT	4	EX Plan Exclusion
SOFIA SARS ANTIGEN FIA KIT	4	EX Plan Exclusion
LUCIRA COVID-19 ALL-IN-ONE KIT	4	EX Plan Exclusion
COBAS LIAT SARS-COV-2 CONTROL KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ID NOW COVID-19 CONTROL KIT	4	EX Plan Exclusion
ACCUA SARS-COV-2 KIT	4	EX Plan Exclusion
COBAS LIAT SARS-COV-2 ASSAY KIT	4	EX Plan Exclusion
ID NOW COVID-19 2.0 TEST KIT	4	EX Plan Exclusion
ID NOW COVID-19 KIT	4	EX Plan Exclusion
LYRA DIRECT SARS-COV-2 ASSAY KIT	4	EX Plan Exclusion
LYRA SARS-COV-2 ASSAY KIT	4	EX Plan Exclusion
XPERT XPRESS SARS-COV-2 KIT	4	EX Plan Exclusion
ID NOW INFLUENZA A & B 2 CONTR KIT	4	EX Plan Exclusion
CONSULT INFLUENZA A&B TESTS KIT	3	
ID NOW INFLUENZA A & B 2 KIT	4	EX Plan Exclusion
QUICKVUE INFLUENZA A+B TEST KIT	4	EX Plan Exclusion
SOFIA INFLUENZA A+B FIA KIT	4	EX Plan Exclusion
ID NOW RSV CONTROL SWAB KIT	4	EX Plan Exclusion
ID NOW RSV KIT	4	EX Plan Exclusion
ID NOW STEP A2 CONTROL SWAB KIT	4	EX Plan Exclusion
BD VERITOR SYSTEM GROUP A STRP KIT	4	EX Plan Exclusion
ID NOW STREP A2 KIT	4	EX Plan Exclusion
QUICKVUE DIPSTICK STREP A TEST KIT	4	EX Plan Exclusion
QUICKVUE IN-LINE STREP A TEST KIT	4	EX Plan Exclusion
QUICKVUE + STREP A TEST KIT	4	EX Plan Exclusion
SOFIA STREP A FIA KIT	4	EX Plan Exclusion
SOFIA STREP A+ FIA KIT	4	EX Plan Exclusion
MISCELLANEOUS CONTRAST MEDIA		
EXEM 10 ML FOAM	4	EX Plan Exclusion
MULTIHANCE 529 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GADAVIST 10 MMOL/10ML SOLN PRSYR	4	EX Plan Exclusion
GADAVIST 15 MMOL/15ML SOLN PRSYR	4	EX Plan Exclusion
GADAVIST 1 MMOL/ML SOLUTION	4	EX Plan Exclusion
GADAVIST 7.5 MMOL/7.5ML SOLN PRSYR	4	EX Plan Exclusion
<i>gadobutrol inj 1 mmol/ml (604.72 mg/ml)</i>	4	EX Plan Exclusion
OMNISCAN 287 MG/ML INJECTABLE	4	EX Plan Exclusion
OMNISCAN 287 MG/ML SOLUTION	4	EX Plan Exclusion
ELUCIREM 0.5 MMOL/ML SOLUTION	4	EX Plan Exclusion
VUEWAY 0.5 MMOL/ML SOLUTION	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln prefilled syringe 10 mmol/20ml</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 10 mmol/20ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 2.5 mmol/5ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 50 mmol/100ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln prefilled syringe 5 mmol/10ml</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 5 mmol/10ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln prefilled syringe 7.5 mmol/15ml</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 7.5 mmol/15ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
DOTAREM 10 MMOL/20ML SOLN PRSYR	4	EX Plan Exclusion
DOTAREM 10 MMOL/20ML SOLUTION	4	EX Plan Exclusion
DOTAREM 2.5 MMOL/5ML SOLUTION	4	EX Plan Exclusion
DOTAREM 50 MMOL/100ML SOLUTION	4	EX Plan Exclusion
DOTAREM 5 MMOL/10ML SOLN PRSYR	4	EX Plan Exclusion
DOTAREM 5 MMOL/10ML SOLUTION	4	EX Plan Exclusion
DOTAREM 7.5 MMOL/15ML SOLN PRSYR	4	EX Plan Exclusion
DOTAREM 7.5 MMOL/15ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>gadoterate meglumine iv soln 10 mmol/20ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 2.5 mmol/5ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 50 mmol/100ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 5 mmol/10ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoterate meglumine iv soln 7.5 mmol/15ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
<i>gadoteridol iv soln 279.3 mg/ml (0.5 mmol/ml)</i>	4	EX Plan Exclusion
PROHANCE 279.3 MG/ML SOLUTION	4	EX Plan Exclusion
EOVIST 0.25 MOL/L SOLUTION	4	EX Plan Exclusion
DEFINITY 6.52 MG/ML SUSPENSION	4	EX Plan Exclusion
DEFINITY RT 6.52 MG/ML SUSPENSION	4	EX Plan Exclusion
OPTISON SUSPENSION	4	EX Plan Exclusion
LUMASON 60.7-25 MG RECON SUSP	4	EX Plan Exclusion
XENOVUE 1 % GAS	4	EX Plan Exclusion
MISCELLANEOUS CONTRAST MEDIA COMBINATIONS		
BL-C KIT	4	EX Plan Exclusion
BL-CONTRAST KIT	4	EX Plan Exclusion
MULTIPLE SKIN TESTS		
COCKROACH MIXED (DIAGNOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
T.R.U.E. TEST TEST	4	EX Plan Exclusion
SHEEP SORREL-DOCK (DIAGOSTIC) 1:20 SOLUTION	4	EX Plan Exclusion
SHORT-GIANT RAGWEED (DIAGNOST) 1:20 SOLUTION	4	EX Plan Exclusion
RADIOGRAPHIC CONTRAST MEDIA - BARIUM		
BARIUM SULFATE POWDER	4	EX Plan Exclusion
ENTERO VU 24 % SUSPENSION	4	EX Plan Exclusion
E-Z-DISK 700 MG TAB	4	EX Plan Exclusion
E-Z-HD 98 % RECON SUSP	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
E-Z-PAQUE 96 % RECON SUSP	4	EX Plan Exclusion
E-Z-PASTE 60 % CREAM	4	EX Plan Exclusion
LIQUID E-Z-PAQUE 60 % SUSPENSION	4	EX Plan Exclusion
LIQUID POLIBAR PLUS 105 % SUSPENSION	4	EX Plan Exclusion
NEULUMEX 0.1 % SUSPENSION	4	EX Plan Exclusion
READI-CAT 2 2 % SUSPENSION	4	EX Plan Exclusion
SITZMARKS CAP	4	EX Plan Exclusion
SITZMARKS COMBO PACKAGE CAP THPK	4	EX Plan Exclusion
SITZMARKS FOR KIDS CAP	4	EX Plan Exclusion
TAGITOL V 40 % SUSPENSION	4	EX Plan Exclusion
VANILLA SILQ 2.1 % SUSPENSION	4	EX Plan Exclusion
VARIBAR HONEY 40 % SUSPENSION	4	EX Plan Exclusion
VARIBAR NECTAR 40 % SUSPENSION	4	EX Plan Exclusion
VARIBAR PUDDING 40 % PASTE	4	EX Plan Exclusion
VARIBAR THIN HONEY 40 % SUSPENSION	4	EX Plan Exclusion
VARIBAR THIN LIQUID 40 % RECON SUSP	4	EX Plan Exclusion
RADIOGRAPHIC CONTRAST MEDIA - IODINATED		
CYSTOGRAFIN 30 % SOLUTION	4	EX Plan Exclusion
CYSTOGRAFIN-DILUTE 18 % SOLUTION	4	EX Plan Exclusion
<i>diatrizoate meglumine & sodium oral soln 66-10%</i>	4	EX Plan Exclusion
GASTROGRAFIN 66-10 % SOLUTION	4	EX Plan Exclusion
LIPIODOL 480 MG/ML OIL	4	EX Plan Exclusion
<i>iodixanol inj 270 mg/ml (iodine equivalent)</i>	4	EX Plan Exclusion
<i>iodixanol inj 320 mg/ml (iodine equivalent)</i>	4	EX Plan Exclusion
VISIPAQUE 270 MG/ML SOLUTION	4	EX Plan Exclusion
VISIPAQUE 320 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IOHEXOL 240 MG/ML SOLUTION	4	EX Plan Exclusion
IOHEXOL 300 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 12 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 140 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 180 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 240 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 300 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 350 MG/ML SOLUTION	4	EX Plan Exclusion
OMNIPAQUE 9 MG/ML SOLUTION	4	EX Plan Exclusion
<i>iopamidol inj 41%</i>	4	EX Plan Exclusion
<i>iopamidol iv soln 41%</i>	4	EX Plan Exclusion
<i>iopamidol inj 51%</i>	4	EX Plan Exclusion
<i>iopamidol inj 61%</i>	4	EX Plan Exclusion
<i>iopamidol iv soln 61%</i>	4	EX Plan Exclusion
<i>iopamidol iv soln 76%</i>	4	EX Plan Exclusion
ISOVUE-200 41 % SOLUTION	4	EX Plan Exclusion
ISOVUE-250 51 % SOLUTION	4	EX Plan Exclusion
ISOVUE-300 61 % SOLUTION	4	EX Plan Exclusion
ISOVUE-370 76 % SOLUTION	4	EX Plan Exclusion
ISOVUE-370 76 % SOLUTION	4	EX Plan Exclusion
ISOVUE-M 200 41 % SOLUTION	4	EX Plan Exclusion
ISOVUE-M 300 61 % SOLUTION	4	EX Plan Exclusion
ULTRAVIST 62 % SOLUTION	4	EX Plan Exclusion
ULTRAVIST 77 % SOLUTION	4	EX Plan Exclusion
CONRAY 60 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYSTO-CONRAY II 17.2 % SOLUTION	4	EX Plan Exclusion
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
DIETARY MANAGEMENT PRODUCT COMBINATIONS		
ASTAMED MYO CAP	4	EX Plan Exclusion
AXONA PACKET	4	EX Plan Exclusion
ENLYTE CAP	4	EX Plan Exclusion
FOSTEUM PLUS CAP	4	EX Plan Exclusion
LDL CARE POWDER	4	EX Plan Exclusion
LORMATE CAP	4	EX Plan Exclusion
METHAVER CAP	4	EX Plan Exclusion
NEOKE BHB POWDER	4	EX Plan Exclusion
NICAPRIN TAB	4	EX Plan Exclusion
NICAZYME TAB	4	EX Plan Exclusion
OMNIVEX TAB	4	EX Plan Exclusion
PRO-CRITIC PACKET	4	EX Plan Exclusion
PROLEEVA CAP	4	EX Plan Exclusion
PROLEVA TAB	4	EX Plan Exclusion
PROTEOLIN TAB	4	EX Plan Exclusion
RHEUMATE CAP	4	EX Plan Exclusion
RIBOZEL CAP	4	EX Plan Exclusion
TOBAKIENT CAP	4	EX Plan Exclusion
VASCULERA TAB	4	EX Plan Exclusion
VB6 P5P POWDER	4	EX Plan Exclusion
XYZBAC TAB	4	EX Plan Exclusion
ZYVEXOL TAB	4	EX Plan Exclusion
MEDACTIV TAB	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIMBREL250 250-50 MG CAP	4	EX Plan Exclusion
LIMBREL500 500-50 MG CAP	4	EX Plan Exclusion
FOSTEUM 27-20-200 MG-MG-UNIT CAP	4	EX Plan Exclusion
DEPLIN 15 15-90.314 MG CAP	4	EX Plan Exclusion
DEPLIN 7.5 7.5-90.314 MG CAP	4	EX Plan Exclusion
L-METHYLFOLATE-ALGAE 15-90.314 MG CAP	4	EX Plan Exclusion
L-METHYLFOLATE FORTE 15-90.314 MG CAP	4	EX Plan Exclusion
L-METHYLFOLATE FORTE 7.5-90.314 MG CAP	4	EX Plan Exclusion
CEREFOLIN NAC 6-90.314-2-600 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE CA ME-CBL NAC 6-90.314-2-600 MG TAB	4	EX Plan Exclusion
METAFOLBIC PLUS RF 6-90.314-2-600 MG TAB	4	EX Plan Exclusion
METHYLFOL-ALGAE-B12-ACETYLCYST 6-90.314-2-600 MG TAB	4	EX Plan Exclusion
CEREFOLIN BRAIN WELLNESS 6-2-600 MG TAB	4	EX Plan Exclusion
L-METHYL-MC NAC 6-2-600 MG TAB	4	EX Plan Exclusion
METAFOLBIC PLUS 6-2-600 MG TAB	4	EX Plan Exclusion
METANX PRO NERVE HEALTH 3-2-35-500 MG CAP	4	EX Plan Exclusion
METANX RR 3-2-35-500 MG CAP	4	EX Plan Exclusion
FOLTANX RF 3-90.314-2-35 MG CAP	4	EX Plan Exclusion
L-METHYLFOLATE-ALGAE-B12-B6 3-90.314-2-35 MG CAP	4	EX Plan Exclusion
METANX 3-90.314-2-35 MG CAP	4	EX Plan Exclusion
CEREFOLIN 6-1-50-5 MG TAB	4	EX Plan Exclusion
L-METHYL-MC 6-1-50-5 MG TAB	4	EX Plan Exclusion
METAFOLBIC 6-1-50-5 MG TAB	4	EX Plan Exclusion
ELFOLATE PLUS 3-35-2 MG TAB	4	EX Plan Exclusion
FOLBIC RF 1.13-25-2 MG TAB	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FOLTANX 3-35-2 MG TAB	4	EX Plan Exclusion
FOLTX 1.13-25-2 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE-B6-B12 3-35-2 MG TAB	4	EX Plan Exclusion
METANX FC 3-35-2 MG CAP	4	EX Plan Exclusion
PODIAPN CAP	4	EX Plan Exclusion
DIETARY MANAGEMENT PRODUCTS		
AVAILNEX 750 MG CHEW TAB	4	EX Plan Exclusion
LIMBREL 250 MG CAP	4	EX Plan Exclusion
LIMBREL 500 MG CAP	4	EX Plan Exclusion
GALAXTRA POWDER	4	EX Plan Exclusion
DEPLIN FC 15 MG CAP	4	EX Plan Exclusion
DEPLIN FC 7.5 MG CAP	4	EX Plan Exclusion
ELFOLATE 15 MG TAB	4	EX Plan Exclusion
ELFOLATE 7.5 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE 15 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE 7.5 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE CALCIUM 15 MG TAB	4	EX Plan Exclusion
L-METHYLFOLATE CALCIUM 7.5 MG TAB	4	EX Plan Exclusion
VASCAZEN 1 GM CAP	4	EX Plan Exclusion
ENTERAGAM 5 GM PACKET	4	EX Plan Exclusion
NUTRITIONAL SUPPLEMENTS		
AMINOPMRMS CAP	4	EX Plan Exclusion
ASILNASALRMS CAP	4	EX Plan Exclusion
CAMINO PRO COMPLETE/GLYTACTIN BAR	4	EX Plan Exclusion
ENU NUTRITIONAL SHAKE LIQUID	4	EX Plan Exclusion
ENU PRO3 PLUS POWDER	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EQUACARE JR POWDER	4	EX Plan Exclusion
ESSENTIAL CARE JR POWDER	4	EX Plan Exclusion
GLYTACTIN BETTERMILK 15 PACKET	4	EX Plan Exclusion
GLYTACTIN BETTERMILK DE-LITE PACKET	4	EX Plan Exclusion
GLYTACTIN BETTERMILK POWDER	4	EX Plan Exclusion
GLYTACTIN BUILD 10PE PACKET	4	EX Plan Exclusion
GLYTACTIN BUILD 20/20 PACKET	4	EX Plan Exclusion
GLYTACTIN BUILD 20/20 PKU PACKET	4	EX Plan Exclusion
GLYTACTIN BURST PACKET	4	EX Plan Exclusion
GLYTACTIN COMPLETE 10PE BAR	4	EX Plan Exclusion
GLYTACTIN RESTORE 10 LIQUID	4	EX Plan Exclusion
GLYTACTIN RESTORE 5 PACKET	4	EX Plan Exclusion
GLYTACTIN RESTORE LITE 10 LIQUID	4	EX Plan Exclusion
GLYTACTIN RESTORE LITE 10PE PACKET	4	EX Plan Exclusion
GLYTACTIN RTD 10 LIQUID	4	EX Plan Exclusion
GLYTACTIN RTD 15 LIQUID	4	EX Plan Exclusion
GLYTACTIN RTD LITE 15 LIQUID	4	EX Plan Exclusion
GLYTACTIN SWIRL 15 PACKET	4	EX Plan Exclusion
GLYTACTIN SWIRL 15PE PACKET	4	EX Plan Exclusion
HCU EASY TAB	4	EX Plan Exclusion
HCU EXPRESS 15 PLUS+ PACKET	4	EX Plan Exclusion
HCU EXPRESS 20 PLUS+ PACKET	4	EX Plan Exclusion
HOMACTIN AA PLUS LIQUID	4	EX Plan Exclusion
HOMACTIN AA PLUS PACKET	4	EX Plan Exclusion
ISOVACTIN AA PLUS PACKET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KETOVIE 3:1 LIQUID	4	EX Plan Exclusion
KETOVIE 4:1 LIQUID	4	EX Plan Exclusion
KETOVIE LIQUID	4	EX Plan Exclusion
KETOVIE PEPTIDE LIQUID	4	EX Plan Exclusion
MSUD EASY TAB	4	EX Plan Exclusion
PHENYLADE GMP MIX DHA/FIBER POWDER	4	EX Plan Exclusion
PKU EASY MICROTABS PLUS TAB DR	4	EX Plan Exclusion
PKU EASY MICROTABS TAB DR	4	EX Plan Exclusion
PKU EASY TAB	4	EX Plan Exclusion
PKU EXPRESS 15 PLUS+ PACKET	4	EX Plan Exclusion
PKU EXPRESS 20 PLUS+ PACKET	4	EX Plan Exclusion
PKU GO PACKET	4	EX Plan Exclusion
THRIVACIN 30 LIQUID	4	EX Plan Exclusion
THRIVACIN DETOX LIQUID	4	EX Plan Exclusion
TYLACTIN BUILD 20PE TYR PACKET	4	EX Plan Exclusion
TYLACTIN COMPLETE 15 PE BAR	4	EX Plan Exclusion
TYLACTIN RESTORE 10 LIQUID	4	EX Plan Exclusion
TYLACTIN RESTORE 5PE PACKET	4	EX Plan Exclusion
TYLACTIN RTD 15 LIQUID	4	EX Plan Exclusion
TYR EASY TAB	4	EX Plan Exclusion
TYR EXPRESS 15 PLUS+ PACKET	4	EX Plan Exclusion
TYR EXPRESS 20 PLUS+ PACKET	4	EX Plan Exclusion
VILACTIN AA PLUS LIQUID	4	EX Plan Exclusion
VILACTIN AA PLUS PACKET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUTRITIONAL SUPPLEMENTS - DIET AIDS		
APP SLIM RMS CAP	4	EX Plan Exclusion
SWEETENERS		
SODIUM SACCHARIN GRANULES	4	EX Plan Exclusion
SODIUM SACCHARIN GRANULES	4	EX Plan Exclusion
SODIUM SACCHARIN POWDER	4	EX Plan Exclusion
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON 12000-38000 UNIT CP DR PART	2	
CREON 24000-76000 UNIT CP DR PART	2	
CREON 3000-9500 UNIT CP DR PART	2	
CREON 36000-114000 UNIT CP DR PART	2	
CREON 6000-19000 UNIT CP DR PART	2	
PANCREAZE 10500-35500 UNIT CP DR PART	3	
PANCREAZE 16800-56800 UNIT CP DR PART	3	
PANCREAZE 21000-54700 UNIT CP DR PART	3	
PANCREAZE 2600-8800 UNIT CP DR PART	3	
PANCREAZE 37000-97300 UNIT CP DR PART	3	
PANCREAZE 4200-14200 UNIT CP DR PART	3	
PERTZYE 16000-57500 UNIT CP DR PART	3	
PERTZYE 16000 UNIT CP DR PART	3	
PERTZYE 24000-86250 UNIT CP DR PART	3	
PERTZYE 4000-14375 UNIT CP DR PART	3	
PERTZYE 4000 UNIT CP DR PART	3	
PERTZYE 8000 UNIT CP DR PART	3	
VIOKACE 10440-39150 UNIT TAB	2	
VIOKACE 20880-78300 UNIT TAB	2	
ZENPEP 10000-32000 UNIT CP DR PART	2	
ZENPEP 15000-47000 UNIT CP DR PART	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZENPEP 20000-63000 UNIT CP DR PART	2	
ZENPEP 25000-79000 UNIT CP DR PART	2	
ZENPEP 3000-10000 UNIT CP DR PART	2	
ZENPEP 40000-126000 UNIT CP DR PART	2	
ZENPEP 5000-24000 UNIT CP DR PART	2	
ZENPEP 60000-189600 UNIT CP DR PART	2	
SUCRAID 8500 UNIT/ML SOLUTION	2	PA S
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 125 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
<i>acetazolamide tab 250 mg</i>	1	
<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide cap er 12hr 500 mg</i>	1	
<i>acetazolamide sodium for inj 500 mg</i>	4	EX Plan Exclusion
<i>acetazolamide sodium for inj 500 mg</i>	4	EX Plan Exclusion
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 25 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
<i>methazolamide tab 50 mg</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE-HYDROCHLOROTHIAZIDE 5-50 MG TAB	1	
<i>amiloride & hydrochlorothiazide tab 5-50 mg</i>	1	
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOOP DIURETICS		
<i>bumetanide tab 0.5 mg</i>	1	
<i>bumetanide tab 1 mg</i>	1	
<i>bumetanide tab 2 mg</i>	1	
<i>ethacrynate sodium for inj 50 mg</i>	4	EX Plan Exclusion
SODIUM EDECRIN 50 MG RECON SOLN	4	EX Plan Exclusion
<i>ethacrynic acid tab 25 mg</i>	1	
FUROSEMIDE 10 MG/ML SOLUTION	4	EX Plan Exclusion
FUROSEMIDE 10 MG/ML SOLUTION	1	
<i>furosemide inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>furosemide inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>furosemide oral soln 10 mg/ml</i>	1	
<i>furosemide tab 20 mg</i>	1	
<i>furosemide tab 40 mg</i>	1	
<i>furosemide tab 80 mg</i>	1	
FUROSEMIDE 8 MG/ML SOLUTION	1	
FUROSEMIDE IN SODIUM CHLORIDE 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
<i>torseamide tab 100 mg</i>	1	
<i>torseamide tab 10 mg</i>	1	
<i>torseamide tab 20 mg</i>	1	
<i>torseamide tab 5 mg</i>	1	
OSMOTIC DIURETICS		
MANNITOL 20 % SOLUTION	4	EX Plan Exclusion
MANNITOL 25 % SOLUTION	4	EX Plan Exclusion
OSMITROL 10 % SOLUTION	4	EX Plan Exclusion
OSMITROL 15 % SOLUTION	4	EX Plan Exclusion
OSMITROL 20 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POTASSIUM SPARING DIURETICS		
<i>amiloride hcl tab 5 mg</i>	1	
<i>amiloride hcl tab 5 mg</i>	1	
<i>spironolactone tab 100 mg</i>	1	
<i>spironolactone susp 25 mg/5ml</i>	1	
<i>spironolactone tab 25 mg</i>	1	
<i>spironolactone tab 50 mg</i>	1	
<i>triamterene cap 100 mg</i>	1	
<i>triamterene cap 50 mg</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorothiazide sodium for inj 500 mg</i>	4	EX Plan Exclusion
SODIUM DIURIL 500 MG RECON SOLN	4	EX Plan Exclusion
<i>chlorthalidone tab 25 mg</i>	1	
<i>chlorthalidone tab 50 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide cap 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 12.5 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 25 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>hydrochlorothiazide tab 50 mg</i>	1	
<i>indapamide tab 1.25 mg</i>	1	
<i>indapamide tab 2.5 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
<i>metolazone tab 10 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 2.5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	
<i>metolazone tab 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ABORTIFACIENT - PROGESTERONE RECEPTOR ANTAGONISTS		
<i>mifepristone tab 200 mg</i>	1	
ACID SPHINGOMYELINASE DEFICIENCY (ASMD) - AGENTS		
XENPOZYME 20 MG RECON SOLN	4	PA S EX Plan Exclusion
XENPOZYME 4 MG RECON SOLN	4	PA S EX Plan Exclusion
ADENOSINE DEAMINASE SCID TREATMENT - AGENTS		
REVCОВI 2.4 MG/1.5ML SOLUTION	3	PA S
ALKAPTONURIA (AKU) TREATMENT - AGENTS		
HARLIKU 2 MG TAB	3	PA S
ALPHA-MANNOSIDOSIS TREATMENT - AGENTS		
LAMZEDE 10 MG RECON SOLN	4	PA S EX Plan Exclusion
AROMATIC AMINO ACID DECARBOXYLATE DEFICIENCY - AGENTS		
KEBILIDI 280000000000 VG/0.5ML SUSPENSION	4	PA S EX Plan Exclusion
BISPHOSPHONATES		
<i>alendronate sodium tab 10 mg</i>	1	
<i>alendronate sodium tab 35 mg</i>	1	
ALENDRONATE SODIUM 5 MG TAB	1	
<i>alendronate sodium oral soln 70 mg/75ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>alendronate sodium tab 70 mg</i>	1	
<i>ibandronate sodium tab 150 mg (base equivalent)</i>	1	
<i>ibandronate sodium iv soln 3 mg/3ml (base equivalent)</i>	4	EX Plan Exclusion
<i>pamidronate disodium iv soln 3 mg/ml</i>	4	S EX Plan Exclusion
PAMIDRONATE DISODIUM 6 MG/ML SOLUTION	4	S EX Plan Exclusion
<i>pamidronate disodium iv soln 9 mg/ml</i>	4	S EX Plan Exclusion
<i>risedronate sodium tab 150 mg</i>	1	
<i>risedronate sodium tab 30 mg</i>	1	
<i>risedronate sodium tab 35 mg</i>	1	
<i>risedronate sodium tab delayed release 35 mg</i>	1	
<i>risedronate sodium tab 5 mg</i>	1	
RECLAST 5 MG/100ML SOLUTION	4	S EX Plan Exclusion
ZOLEDRONIC ACID 4 MG/100ML SOLUTION	4	PA S EX Plan Exclusion
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	4	PA S EX Plan Exclusion
<i>zoledronic acid inj conc for iv infusion 4 mg/5ml</i>	2	PA
<i>zoledronic acid iv soln 5 mg/100ml</i>	4	PA S EX Plan Exclusion
CALCIMIMETIC AGENTS		
<i>cinacalcet hcl tab 30 mg (base equiv)</i>	1	
<i>cinacalcet hcl tab 60 mg (base equiv)</i>	1	
<i>cinacalcet hcl tab 90 mg (base equiv)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARSABIV 10 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
PARSABIV 2.5 MG/0.5ML SOLUTION	4	PA S EX Plan Exclusion
PARSABIV 5 MG/ML SOLUTION	4	PA S EX Plan Exclusion
CALCITONINS		
<i>calcitonin (salmon) nasal soln 200 unit/act</i>	2	PA
CARNITINE REPLENISHER - AGENTS		
CARNITOR 1 GM/10ML SOLUTION	3	PA
CARNITOR 200 MG/ML SOLUTION	4	PA EX Plan Exclusion
CARNITOR 330 MG TAB	3	PA
CARNITOR SF 1 GM/10ML SOLUTION	3	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	PA
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	PA
<i>levocarnitine inj 200 mg/ml</i>	4	PA EX Plan Exclusion
<i>levocarnitine tab 330 mg</i>	1	PA
<i>levocarnitine tab 330 mg</i>	1	PA
LEVOCARNITINE 500 MG/ML SOLUTION	4	PA EX Plan Exclusion
<i>levocarnitine oral soln 1 gm/10ml (10%)</i>	1	PA
CKD AGENT-SODIUM/HYDROGEN EXCHANGER 3 (NHE3) INHIBITOR		
XPHOZAH 20 MG TAB	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XPHOZAH 30 MG TAB	3	PA
CORTICOTROPIN		
ACTHAR GEL 40 UNIT/0.5ML PEN	3	PA S
ACTHAR GEL 80 UNIT/ML PEN	3	PA S
CORTROPHIN GEL 40 UNIT/0.5ML PRSYR	3	PA S
CORTROPHIN GEL 80 UNIT/ML PRSYR	3	PA S
CORTICOTROPIN-RELEASING FACTOR (CRF) RECEPTOR TYPE 1 ANTAG		
CRENESSITY 100 MG CAP	3	PA S
CRENESSITY 25 MG CAP	3	PA S
CRENESSITY 50 MG CAP	3	PA S
CRENESSITY 50 MG/ML SOLUTION	3	PA S
CORTISOL SYNTHESIS INHIBITORS		
RECORLEV 150 MG TAB	3	PA S
ISTURISA 10 MG TAB	3	PA S
ISTURISA 1 MG TAB	3	PA S
ISTURISA 5 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOPAMINE RECEPTOR AGONISTS		
<i>cabergoline tab 0.5 mg</i>	1	
FABRY DISEASE - AGENTS		
FABRAZYME 35 MG RECON SOLN	4	PA S EX Plan Exclusion
FABRAZYME 5 MG RECON SOLN	4	PA S EX Plan Exclusion
GALAFOLD 123 MG CAP	2	PA S
ELFABRIO 20 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
ELFABRIO 5 MG/2.5ML SOLUTION	4	PA S EX Plan Exclusion
GAA DEFICIENCY TREATMENT - AGENTS		
LUMIZYME 50 MG RECON SOLN	4	PA S EX Plan Exclusion
NEXVIAZYME 100 MG RECON SOLN	4	PA S EX Plan Exclusion
POMBILITI 105 MG RECON SOLN	4	PA S EX Plan Exclusion
OPFOLDA 65 MG CAP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GNRH/LHRH ANTAGONISTS		
<i>cetorelix acetate for inj kit 0.25 mg</i>	4	PA S EX Plan Exclusion
CETROTIDE 0.25 MG KIT	4	PA S EX Plan Exclusion
ORILISSA 150 MG TAB	2	PA
ORILISSA 200 MG TAB	2	PA
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	4	PA S EX Plan Exclusion
GANIRELIX ACETATE 250 MCG/0.5ML SOLN PRSYR	4	PA S EX Plan Exclusion
<i>ganirelix acetate soln prefilled syringe 250 mcg/0.5ml</i>	4	PA S EX Plan Exclusion
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT 10 MG RECON SOLN	4	PA S EX Plan Exclusion
SOMAVERT 15 MG RECON SOLN	4	PA S EX Plan Exclusion
SOMAVERT 20 MG RECON SOLN	4	PA S EX Plan Exclusion
SOMAVERT 25 MG RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SOMAVERT 30 MG RECON SOLN	4	PA S EX Plan Exclusion
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA SV 2 MG RECON SOLN	4	PA S EX Plan Exclusion
EGRIFTA WR 11.6 MG KIT	4	PA S EX Plan Exclusion
GROWTH HORMONES		
SKYTROFA 0.7 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 11 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 13.3 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 1.4 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 1.8 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 2.1 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 2.5 MG CARTRIDGE	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SKYTROFA 3.6 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 3 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 4.3 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 5.2 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 6.3 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 7.6 MG CARTRIDGE	4	PA S EX Plan Exclusion
SKYTROFA 9.1 MG CARTRIDGE	4	PA S EX Plan Exclusion
SOGROYA 10 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
SOGROYA 15 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
SOGROYA 5 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NGENLA 24 MG/1.2ML SOLN PEN	4	PA S EX Plan Exclusion
NGENLA 60 MG/1.2ML SOLN PEN	4	PA S EX Plan Exclusion
GENOTROPIN 12 MG CARTRIDGE	4	PA S EX Plan Exclusion
GENOTROPIN 5 MG CARTRIDGE	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 0.2 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 0.4 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 0.6 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 0.8 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 1.2 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 1.4 MG PRSYR	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENOTROPIN MINIQUICK 1.6 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 1.8 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 1 MG PRSYR	4	PA S EX Plan Exclusion
GENOTROPIN MINIQUICK 2 MG PRSYR	4	PA S EX Plan Exclusion
HUMATROPE 12 MG CARTRIDGE	4	PA S EX Plan Exclusion
HUMATROPE 24 MG CARTRIDGE	4	PA S EX Plan Exclusion
HUMATROPE 6 MG CARTRIDGE	4	PA S EX Plan Exclusion
NORDITROPIN FLEXPOR 10 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
NORDITROPIN FLEXPOR 15 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
NORDITROPIN FLEXPOR 30 MG/3ML SOLN PEN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORDITROPIN FLEXPRO 5 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
NUTROPIN AQ NUSPIN 10 10 MG/2ML SOLN PEN	4	PA S EX Plan Exclusion
NUTROPIN AQ NUSPIN 20 20 MG/2ML SOLN PEN	4	PA S EX Plan Exclusion
NUTROPIN AQ NUSPIN 5 5 MG/2ML SOLN PEN	4	PA S EX Plan Exclusion
OMNITROPE 10 MG/1.5ML SOLN CART	4	PA S EX Plan Exclusion
OMNITROPE 5.8 MG RECON SOLN	4	PA S EX Plan Exclusion
OMNITROPE 5 MG/1.5ML SOLN CART	4	PA S EX Plan Exclusion
ZOMACTON 10 MG RECON SOLN	4	PA S EX Plan Exclusion
ZOMACTON 5 MG RECON SOLN	4	PA S EX Plan Exclusion
ZOMACTON (FOR ZOMA-JET 10) 10 MG RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAIZEN 5 MG RECON SOLN	4	PA S EX Plan Exclusion
SAIZEN 8.8 MG RECON SOLN	4	PA S EX Plan Exclusion
SAIZENPREP 8.8 MG RECON SOLN	4	PA S EX Plan Exclusion
SEROSTIM 4 MG RECON SOLN	4	PA S EX Plan Exclusion
SEROSTIM 5 MG RECON SOLN	4	PA S EX Plan Exclusion
SEROSTIM 6 MG RECON SOLN	4	PA S EX Plan Exclusion
ZORBTIVE 8.8 MG RECON SOLN	4	PA S EX Plan Exclusion
HEREDITARY OROTIC ACIDURIA TREATMENT - AGENTS		
XURIDEN 2 GM PACKET	3	PA S
HEREDITARY TYROSINEMIA TYPE 1 (HT-1) TREATMENT - AGENTS		
<i>nitisinone cap 10 mg</i>	1	PA S
<i>nitisinone cap 20 mg</i>	1	PA S
<i>nitisinone cap 2 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nitisinone cap 5 mg</i>	1	PA S
NITYR 10 MG TAB	3	PA S
NITYR 2 MG TAB	3	PA S
NITYR 5 MG TAB	3	PA S
ORFADIN 10 MG CAP	2	PA S
ORFADIN 20 MG CAP	2	PA S
ORFADIN 2 MG CAP	2	PA S
ORFADIN 4 MG/ML SUSPENSION	2	PA S
ORFADIN 5 MG CAP	2	PA S
HOMOCYSTINURIA TREATMENT - AGENTS		
<i>*betaine powder for oral solution***</i>	1	PA S
HYPERAMMONEMIA TREATMENT - AGENTS		
CARBAGLU 200 MG TAB SOL	3	PA S
<i>carglumic acid soluble tab 200 mg</i>	1	PA S
HYPERPARATHYROID TREATMENT - VITAMIN D ANALOGS		
RAYALDEE 30 MCG CAP ER	3	PA
<i>calcitriol cap 0.25 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>calcitriol cap 0.5 mcg</i>	1	
CALCITRIOL 1 MCG/ML SOLUTION	4	PA EX Plan Exclusion
<i>calcitriol oral soln 1 mcg/ml</i>	1	
DOXERCALCIFEROL 0.5 MCG CAP	1	
<i>doxercalciferol cap 0.5 mcg</i>	1	
DOXERCALCIFEROL 1 MCG CAP	1	
<i>doxercalciferol cap 1 mcg</i>	1	
DOXERCALCIFEROL 2.5 MCG CAP	1	
<i>doxercalciferol cap 2.5 mcg</i>	1	
<i>doxercalciferol inj 4 mcg/2ml (2 mcg/ml)</i>	4	PA EX Plan Exclusion
HECTOROL 4 MCG/2ML SOLUTION	4	PA EX Plan Exclusion
<i>paricalcitol cap 1 mcg</i>	1	PA
<i>paricalcitol cap 2 mcg</i>	1	PA
<i>paricalcitol iv soln 2 mcg/ml</i>	4	PA EX Plan Exclusion
<i>paricalcitol cap 4 mcg</i>	1	PA
<i>paricalcitol iv soln 5 mcg/ml</i>	4	PA EX Plan Exclusion
ZEMPLAR 2 MCG/ML SOLUTION	4	PA EX Plan Exclusion
ZEMPLAR 5 MCG/ML SOLUTION	4	PA EX Plan Exclusion
HYPOPARATHYROID TREATMENT - PARATHYROID HORMONE ANALOGS		
YORVIPATH 168 MCG/0.56ML SOLN PEN	3	PA S
YORVIPATH 294 MCG/0.98ML SOLN PEN	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
YORVIPATH 420 MCG/1.4ML SOLN PEN	3	PA S
HYPOPHOSPHATASIA (HPP) AGENTS		
STRENSIQ 18 MG/0.45ML SOLUTION	3	PA S
STRENSIQ 28 MG/0.7ML SOLUTION	3	PA S
STRENSIQ 40 MG/ML SOLUTION	3	PA S
STRENSIQ 80 MG/0.8ML SOLUTION	3	PA S
INSULIN-LIKE GROWTH FACTOR-1 RECEPTOR INHIBITORS(IGF-1R)		
TEPEZZA 500 MG RECON SOLN	4	S EX Plan Exclusion
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX 40 MG/4ML SOLUTION	4	PA S EX Plan Exclusion
INCRELEX 40 MG/4ML SOLUTION	3	PA S
LEPTIN ANALOGUES		
MYALEPT 11.3 MG RECON SOLN	3	PA S
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SUPPRELIN LA 50 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT-PED (1-MONTH) 11.25 MG KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LUPRON DEPOT-PED (1-MONTH) 15 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT-PED (1-MONTH) 7.5 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT-PED (3-MONTH) 11.25 MG (PED) KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT-PED (3-MONTH) 30 MG KIT	4	PA S EX Plan Exclusion
FENSOLVI (6 MONTH) 45 MG KIT	4	PA S EX Plan Exclusion
LUPRON DEPOT-PED (6-MONTH) 45 MG KIT	4	PA S EX Plan Exclusion
SYNAREL 2 MG/ML SOLUTION	4	PA S EX Plan Exclusion
TRIPTODUR 22.5 MG SRER	4	PA S EX Plan Exclusion
LIPOPROTEIN LIPASE DEFICIENCY (LPLD) DEFICIENCY - AGENTS		
TRYNGOLZA 80 MG/0.8ML SOLN A-INJ	3	PA S
LYSOSOMAL ACID LIPASE (LAL) DEFICIENCY - AGENTS		
KANUMA 20 MG/10ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MOLYBDENUM COFACTOR DEFICIENCY (MOCD) - AGENTS		
NULIBRY 9.5 MG RECON SOLN	4	PA S EX Plan Exclusion
MUCOPOLYSACCHARIDOSIS I (MPS I) - AGENTS		
ALDURAZYME 2.9 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
MUCOPOLYSACCHARIDOSIS II (MPS II) - AGENTS		
ELAPRASE 6 MG/3ML SOLUTION	4	PA S EX Plan Exclusion
MUCOPOLYSACCHARIDOSIS IV (MPS IV) - AGENTS		
VIMIZIM 5 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
MUCOPOLYSACCHARIDOSIS VI (MPS VI) - AGENTS		
NAGLAZYME 1 MG/ML SOLUTION	4	PA S EX Plan Exclusion
MUCOPOLYSACCHARIDOSIS VII (MPS VII) - AGENTS		
MEPSEVII 10 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
NATRIURETIC PEPTIDES		
VOXZOGO 0.4 MG RECON SOLN	3	PA S
VOXZOGO 0.56 MG RECON SOLN	3	PA S
VOXZOGO 1.2 MG RECON SOLN	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEUROKININ 3 (NK3) RECEPTOR ANTAGONISTS		
VEOZAH 45 MG TAB	2	
NON-STEROIDAL MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA 10 MG TAB	2	
KERENDIA 20 MG TAB	2	
KERENDIA 40 MG TAB	2	
OVULATION STIMULANTS-GONADOTROPINS		
OVIDREL 250 MCG/0.5ML SOLN PRSYR	4	PA S EX Plan Exclusion
CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
CHORIONIC GONADOTROPIN 10000 UNIT RECON SOLN	2	PA S
NOVAREL 10000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVAREL 5000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
PREGNYL 10000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
GONAL-F 1050 UNIT RECON SOLN	4	PA S EX Plan Exclusion
GONAL-F 450 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GONAL-F RFF 75 UNIT RECON SOLN	4	PA S EX Plan Exclusion
GONAL-F RFF REDIJECT 300 UNIT/0.5ML SOLN PEN	4	PA S EX Plan Exclusion
GONAL-F RFF REDIJECT 450 UNT/0.75ML SOLN PEN	4	PA S EX Plan Exclusion
GONAL-F RFF REDIJECT 900 UNT/1.44ML SOLN PEN	4	PA S EX Plan Exclusion
FOLLISTIM AQ 300 UNT/0.36ML SOLUTION	4	PA S EX Plan Exclusion
FOLLISTIM AQ 600 UNT/0.72ML SOLUTION	4	PA S EX Plan Exclusion
FOLLISTIM AQ 900 UNT/1.08ML SOLUTION	4	PA S EX Plan Exclusion
MENOPUR 75 UNIT RECON SOLN	4	PA S EX Plan Exclusion
OVULATION STIMULANTS-SYNTHETIC		
<i>clomiphene citrate tab 50 mg</i>	4	EX Plan Exclusion
<i>clomiphene citrate tab 50 mg</i>	4	EX Plan Exclusion
<i>clomiphene citrate tab 50 mg</i>	1	
CLOMIPHENE CITRATE 50 MG TAB	4	EX Plan Exclusion
<i>clomiphene citrate tab 50 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARATHYROID HORMONE AND DERIVATIVES		
TYMLOS 3120 MCG/1.56ML SOLN PEN	3	PA S
NATPARA 100 MCG CARTRIDGE	3	PA S
NATPARA 25 MCG CARTRIDGE	3	PA S
NATPARA 50 MCG CARTRIDGE	3	PA S
NATPARA 75 MCG CARTRIDGE	3	PA S
TERIPARATIDE 560 MCG/2.24ML SOLN PEN	2	PA S
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	1	PA S
<i>teriparatide soln pen-inj 560 mcg/2.24ml</i>	2	PA S
PHENYLKETONURIA TREATMENT - AGENTS		
PALYNZIQ 10 MG/0.5ML SOLN PRSYR	3	PA S
PALYNZIQ 20 MG/ML SOLN PRSYR	3	PA S
PALYNZIQ 2.5 MG/0.5ML SOLN PRSYR	3	PA S
<i>sapropterin dihydrochloride powder packet 100 mg</i>	1	PA S
<i>sapropterin dihydrochloride tab 100 mg</i>	1	PA S
<i>sapropterin dihydrochloride powder packet 500 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KUVAN 100 MG PACKET	3	PA S
KUVAN 100 MG TAB	3	PA S
KUVAN 500 MG PACKET	3	PA S
<i>sapropterin dihydrochloride powder packet 100 mg</i>	1	PA S
<i>sapropterin dihydrochloride tab 100 mg</i>	1	PA S
<i>sapropterin dihydrochloride powder packet 500 mg</i>	1	PA S
<i>sapropterin dihydrochloride powder packet 100 mg</i>	1	PA S
<i>sapropterin dihydrochloride powder packet 500 mg</i>	1	PA S
RANK LIGAND (RANKL) INHIBITORS		
XGEVA 120 MG/1.7ML SOLUTION	3	PA S
JUBBONTI 60 MG/ML SOLN PRSYR	2	PA S
SCLEROSTIN INHIBITORS		
EVENITY 105 MG/1.17ML SOLN PRSYR	3	PA S
SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERMS)		
OSPHENA 60 MG TAB	2	
<i>raloxifene hcl tab 60 mg</i>	1	
SELECTIVE VASOPRESSIN V2-RECEPTOR ANTAGONISTS		
JYNARQUE 15 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JYNARQUE 15 MG TAB THPK	3	PA S
JYNARQUE 30 & 15 MG TAB THPK	3	PA S
JYNARQUE 30 MG TAB	3	PA S
JYNARQUE 45 & 15 MG TAB THPK	3	PA S
JYNARQUE 60 & 30 MG TAB THPK	3	PA S
JYNARQUE 90 & 30 MG TAB THPK	3	PA S
SAMSCA 15 MG TAB	3	PA S
SAMSCA 30 MG TAB	3	PA S
TOLVAPTAN 15 MG TAB	1	PA S
<i>tolvaptan tab 15 mg</i>	1	PA S
<i>tolvaptan tab therapy pack 15 mg</i>	1	PA S
<i>tolvaptan tab therapy pack 30 & 15 mg</i>	1	PA S
<i>tolvaptan tab 30 mg</i>	1	PA S
<i>tolvaptan tab therapy pack 45 & 15 mg</i>	1	PA S
<i>tolvaptan tab therapy pack 60 & 30 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tolvaptan tab therapy pack 90 & 30 mg</i>	1	PA S
SOMATOSTATIC AGENTS		
LANREOTIDE ACETATE 120 MG/0.5ML SOLUTION	1	PA S
<i>lanreotide acetate extended release inj 120 mg/0.5ml</i>	1	PA S
SOMATULINE DEPOT 120 MG/0.5ML SOLUTION	2	PA S
SOMATULINE DEPOT 60 MG/0.2ML SOLUTION	2	PA S
SOMATULINE DEPOT 90 MG/0.3ML SOLUTION	2	PA S
MYCAPSSA 20 MG CAP DR	3	PA S
<i>octreotide acetate inj 1000 mcg/ml (1 mg/ml)</i>	1	PA S
OCTREOTIDE ACETATE 100 MCG/ML SOLN PRSYR	1	PA S
<i>octreotide acetate inj 100 mcg/ml (0.1 mg/ml)</i>	1	PA S
<i>octreotide acetate for im inj kit 10 mg</i>	1	PA S
<i>octreotide acetate inj 200 mcg/ml (0.2 mg/ml)</i>	1	PA S
<i>octreotide acetate for im inj kit 20 mg</i>	1	PA S
<i>octreotide acetate for im inj kit 30 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OCTREOTIDE ACETATE 500 MCG/ML SOLN PRSYR	1	PA S
<i>octreotide acetate inj 500 mcg/ml (0.5 mg/ml)</i>	1	PA S
OCTREOTIDE ACETATE 50 MCG/ML SOLN PRSYR	1	PA S
<i>octreotide acetate inj 50 mcg/ml (0.05 mg/ml)</i>	1	PA S
SANDOSTATIN 100 MCG/ML SOLUTION	3	PA S
SANDOSTATIN 500 MCG/ML SOLUTION	3	PA S
SANDOSTATIN 50 MCG/ML SOLUTION	3	PA S
SANDOSTATIN LAR DEPOT 10 MG KIT	3	PA S
SANDOSTATIN LAR DEPOT 20 MG KIT	3	PA S
SANDOSTATIN LAR DEPOT 30 MG KIT	3	PA S
SIGNIFOR 0.3 MG/ML SOLUTION	3	PA S
SIGNIFOR 0.6 MG/ML SOLUTION	3	PA S
SIGNIFOR 0.9 MG/ML SOLUTION	3	PA S
SIGNIFOR LAR 10 MG SRER	3	PA S
SIGNIFOR LAR 20 MG SRER	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SIGNIFOR LAR 30 MG SRER	3	PA S
SIGNIFOR LAR 40 MG SRER	3	PA S
SIGNIFOR LAR 60 MG SRER	3	PA S
UREA CYCLE DISORDER - AGENTS		
RAVICTI 1.1 GM/ML LIQUID	3	PA S
AMMONUL 10-10 % SOLUTION	4	PA EX Plan Exclusion
<i>sodium benzoate & sodium phenylacetate iv soln 10-10%</i>	4	PA EX Plan Exclusion
BUPHENYL 3 GM/TSP POWDER	3	PA S
BUPHENYL 500 MG TAB	3	PA S
OLPRUVA (2 GM DOSE) 2 GM THER PACK	3	PA S
OLPRUVA (3 GM DOSE) 3 GM THER PACK	3	PA S
OLPRUVA (4 GM DOSE) 2 & 2 GM THER PACK	3	PA S
OLPRUVA (5 GM DOSE) 2 & 3 GM THER PACK	3	PA S
OLPRUVA (6.67 GM DOSE) 3 & 3.67 GM THER PACK	3	PA S
OLPRUVA (6 GM DOSE) 3 & 3 GM THER PACK	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHEBURANE 483 MG/GM PELLETT	2	PA S
<i>sodium phenylbutyrate oral powder 3 gm/teaspoonful</i>	1	PA S
<i>sodium phenylbutyrate tab 500 mg</i>	1	PA S
V1A/V2-ARGININE VASOPRESSIN (AVP) RECEPTOR ANTAGONISTS		
VAPRISOL 20-5 MG/100ML-% SOLUTION	4	S EX Plan Exclusion
VASOPRESSIN		
<i>desmopressin acetate tab 0.1 mg</i>	1	
<i>desmopressin acetate tab 0.2 mg</i>	1	
DESMOPRESSIN ACETATE 1.5 MG/ML SOLUTION	3	PA S
NOCDURNA 27.7 MCG SL TAB	3	
NOCDURNA 55.3 MCG SL TAB	3	
STIMATE 1.5 MG/ML SOLUTION	3	PA S
<i>desmopressin acetate nasal spray soln 0.01%</i>	1	PA
DESMOPRESSIN ACETATE SPRAY 0.01 % SOLUTION	1	PA
<i>desmopressin acetate nasal spray soln 0.01% (refrigerated)</i>	1	
TERLIVAZ 0.85 MG RECON SOLN	4	EX Plan Exclusion
VASOPRESSIN 20 UNIT/ML SOLUTION	4	EX Plan Exclusion
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	4	EX Plan Exclusion
VASOPRESSIN 5 UNIT/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>vasopressin iv soln 20 unit/ml (for iv infusion)</i>	4	EX Plan Exclusion
VASOSTRICT 20 UNIT/ML SOLUTION	4	EX Plan Exclusion
VASOPRESSIN-DEXTROSE 20-5 UT/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VASOPRESSIN-DEXTROSE 50-5 UT/50ML-% SOLUTION	4	EX Plan Exclusion
VASOPRESSIN-DEXTROSE 5-5 UNIT/5ML-% SOLN PRSYR	4	EX Plan Exclusion
VASOSTRICT 20-5 UT/100ML-% SOLUTION	4	EX Plan Exclusion
VASOSTRICT 40-5 UT/100ML-% SOLUTION	4	EX Plan Exclusion
VASOPRESSIN-SODIUM CHLORIDE 20-0.9 UT/100ML-% SOLUTION	4	EX Plan Exclusion
VASOPRESSIN-SODIUM CHLORIDE 2-0.9 UNIT/2ML-% SOLN PRSYR	4	EX Plan Exclusion
VASOPRESSIN-SODIUM CHLORIDE 40-0.9 UT/100ML-% SOLUTION	4	EX Plan Exclusion
X-LINKED HYPOPHOSPHATEMIA (XLH) TREATMENT - AGENTS		
CRYSVITA 10 MG/ML SOLUTION	3	PA S
CRYSVITA 20 MG/ML SOLUTION	3	PA S
CRYSVITA 30 MG/ML SOLUTION	3	PA S
ESTROGENS		
ESTROGEN & ANDROGEN		
COVARYX 1.25-2.5 MG TAB	1	
COVARYX HS 0.625-1.25 MG TAB	1	
EEMT 1.25-2.5 MG TAB	1	
EEMT HS 0.625-1.25 MG TAB	1	
<i>esterified estrogens & methyltestosterone tab 0.625-1.25 mg</i>	1	
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i>	1	
EST ESTROGENS-METHYLTEST 1.25-2.5 MG TAB	1	
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i>	1	
EST ESTROGENS-METHYLTEST DS 1.25-2.5 MG TAB	1	
<i>esterified estrogens & methyltestosterone tab 0.625-1.25 mg</i>	1	
EST ESTROGENS-METHYLTEST HS 0.625-1.25 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>esterified estrogens & methyltestosterone tab 1.25-2.5 mg</i>	1	
ESTRATEST H.S. 0.625-1.25 MG TAB	1	
ESTROGEN & PROGESTIN		
PREMPHASE 0.625-5 MG TAB	2	
PREMPRO 0.3-1.5 MG TAB	2	
PREMPRO 0.45-1.5 MG TAB	2	
PREMPRO 0.625-2.5 MG TAB	2	
PREMPRO 0.625-5 MG TAB	2	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
COMBIPATCH 0.05-0.14 MG/DAY PATCH TW	2	
COMBIPATCH 0.05-0.25 MG/DAY PATCH TW	2	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
<i>estradiol & norethindrone acetate tab 1-0.5 mg</i>	1	
BIJUVA 0.5-100 MG CAP	2	
BIJUVA 1-100 MG CAP	2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	1	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	1	
ESTROGEN-PROGESTIN-GNRH ANTAGONIST		
ORIAHNN 300-1-0.5 & 300 MG CAP THPK	2	PA
MYFEMBREE 40-1-0.5 MG TAB	2	PA
ESTROGEN-SELECTIVE ESTROGEN RECEPTOR MODULATOR COMB		
DUAVEE 0.45-20 MG TAB	2	PA
MENEST 0.3 MG TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MENEST 0.625 MG TAB	3	
MENEST 1.25 MG TAB	3	
MENEST 2.5 MG TAB	3	
ALORA 0.025 MG/24HR PATCH TW	3	
ALORA 0.05 MG/24HR PATCH TW	3	
ALORA 0.075 MG/24HR PATCH TW	3	
ALORA 0.1 MG/24HR PATCH TW	3	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
ELESTRIN 0.52 MG/0.87 GM (0.06%) GEL	2	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.0375 mg/24hr (37.5 mcg/24hr)</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.06 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
<i>estradiol td patch weekly 0.1 mg/24hr</i>	1	
<i>estradiol td gel 0.25 mg/0.25gm (0.1%)</i>	1	
<i>estradiol td gel 0.5 mg/0.5gm (0.1%)</i>	1	
<i>estradiol tab 0.5 mg</i>	1	
<i>estradiol td gel 0.75 mg/0.75gm (0.1%)</i>	1	
<i>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</i>	1	
<i>estradiol td gel 1.25 mg/1.25gm (0.1%)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>estradiol td gel 1 mg/gm (0.1%)</i>	1	
<i>estradiol tab 1 mg</i>	1	
<i>estradiol tab 2 mg</i>	1	
<i>estradiol td patch twice weekly 0.025 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.0375 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.05 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.075 mg/24hr</i>	1	
<i>estradiol td patch twice weekly 0.1 mg/24hr</i>	1	
DEPO-ESTRADIOL 5 MG/ML OIL	3	
DELESTROGEN 10 MG/ML OIL	3	
DELESTROGEN 20 MG/ML OIL	3	
DELESTROGEN 40 MG/ML OIL	3	
<i>estradiol valerate im in oil 10 mg/ml</i>	1	
<i>estradiol valerate im in oil 20 mg/ml</i>	1	
<i>estradiol valerate im in oil 40 mg/ml</i>	1	
PREMARIN 0.3 MG TAB	2	
PREMARIN 0.45 MG TAB	2	
PREMARIN 0.625 MG TAB	2	
PREMARIN 0.9 MG TAB	2	
PREMARIN 1.25 MG TAB	2	
FLUOROQUINOLONES		
<i>ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)</i>	1	
<i>ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)</i>	1	
CIPROFLOXACIN HCL 100 MG TAB	1	
<i>ciprofloxacin hcl tab 250 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 500 mg (base equiv)</i>	1	
<i>ciprofloxacin hcl tab 750 mg (base equiv)</i>	1	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	4	EX Plan Exclusion
CIPROFLOXACIN IN D5W 200 MG/100ML SOLUTION	4	EX Plan Exclusion
<i>ciprofloxacin 400 mg/200ml in d5w</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIPROFLOXACIN IN D5W 400 MG/200ML SOLUTION	4	EX Plan Exclusion
BAXDELA 300 MG RECON SOLN	4	EX Plan Exclusion
BAXDELA 450 MG TAB	3	PA
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin tab 250 mg</i>	1	
<i>levofloxacin oral soln 25 mg/ml</i>	1	
LEVOFLOXACIN 25 MG/ML SOLUTION	4	EX Plan Exclusion
<i>levofloxacin iv soln 25 mg/ml</i>	4	EX Plan Exclusion
<i>levofloxacin oral soln 25 mg/ml</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 500 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>levofloxacin tab 750 mg</i>	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	4	EX Plan Exclusion
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	4	EX Plan Exclusion
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	4	EX Plan Exclusion
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	4	EX Plan Exclusion
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	4	EX Plan Exclusion
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	4	EX Plan Exclusion
MOXIFLOXACIN HCL 400 MG/250ML SOLUTION	4	EX Plan Exclusion
<i>moxifloxacin hcl tab 400 mg (base equiv)</i>	1	
MOXIFLOXACIN HCL IN NAACL 400 MG/250ML SOLUTION	4	EX Plan Exclusion
OFLOXACIN 300 MG TAB	1	
OFLOXACIN 400 MG TAB	1	
<i>ofloxacin tab 400 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
MOTEGRITY 1 MG TAB	3	PA
MOTEGRITY 2 MG TAB	3	PA
<i>prucalopride succinate tab 1 mg (base equivalent)</i>	2	PA
<i>prucalopride succinate tab 2 mg (base equivalent)</i>	2	PA
BILE ACID SYNTHESIS DISORDER AGENTS		
CTEXLI 250 MG TAB	3	S
CHOLBAM 250 MG CAP	3	PA S
CHOLBAM 50 MG CAP	3	PA S
CIC AGENTS - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
TRULANCE 3 MG TAB	3	PA
FARNESOID X RECEPTOR (FXR) AGONISTS		
OCALIVA 10 MG TAB	3	PA S
OCALIVA 5 MG TAB	3	PA S
GALLSTONE SOLUBILIZING AGENTS		
CHENODAL 250 MG TAB	3	S
<i>ursodiol tab 250 mg</i>	1	
<i>ursodiol cap 300 mg</i>	1	
<i>ursodiol tab 500 mg</i>	1	
URSODIOL+SYRSPEND SF 30 MG/ML SUSPENSION	3	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium oral conc 100 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone cap 24 mcg</i>	2	PA
<i>lubiprostone cap 8 mcg</i>	2	PA
GASTROINTESTINAL STIMULANTS		
DEXPANTHENOL 250 MG/ML SOLUTION	4	EX Plan Exclusion
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl tab 10 mg (base equivalent)</i>	1	
METOCLOPRAMIDE HCL 10 MG TAB DISP	2	
<i>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</i>	1	
<i>metoclopramide hcl inj 5 mg/ml (base equivalent)</i>	1	
<i>metoclopramide hcl tab 5 mg (base equivalent)</i>	1	
METOCLOPRAMIDE HCL 5 MG TAB DISP	2	
GLUCAGON-LIKE PEPTIDE-2 (GLP-2) ANALOGS		
GATTEX 5 MG KIT	3	PA S
HEPATOTROPICS - THYROID HORMONE RECEPTOR-BETA AGONISTS		
REZDIFFRA 100 MG TAB	3	PA S
REZDIFFRA 60 MG TAB	3	PA S
REZDIFFRA 80 MG TAB	3	PA S
IBS AGENT - GUANYLATE CYCLASE-C (GC-C) AGONISTS		
LINZESS 145 MCG CAP	3	PA
LINZESS 290 MCG CAP	3	PA
LINZESS 72 MCG CAP	3	PA
IBS AGENT - SELECTIVE 5-HT3 RECEPTOR ANTAGONISTS		
<i>alosetron hcl tab 0.5 mg (base equiv)</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>alosetron hcl tab 1 mg (base equiv)</i>	2	PA
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
LIVMARLI 10 MG TAB	3	PA S
LIVMARLI 15 MG TAB	3	PA S
LIVMARLI 19 MG/ML SOLUTION	3	PA S
LIVMARLI 20 MG TAB	3	PA S
LIVMARLI 30 MG TAB	3	PA S
LIVMARLI 9.5 MG/ML SOLUTION	3	PA S
BYLVAY 1200 MCG CAP	3	PA S
BYLVAY 400 MCG CAP	3	PA S
BYLVAY (PELLETS) 200 MCG CAP SPRINK	3	PA S
BYLVAY (PELLETS) 600 MCG CAP SPRINK	3	PA S
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium cap 750 mg</i>	1	
APRISO 0.375 GM CAP ER 24H	3	
ASACOL HD 800 MG TAB DR	3	
DELZICOL 400 MG CAP DR	3	
LIALDA 1.2 GM TAB DR	3	
<i>mesalamine suppos 1000 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mesalamine tab delayed release 1.2 gm</i>	1	
<i>mesalamine cap dr 400 mg</i>	1	
<i>mesalamine enema 4 gm</i>	1	
<i>mesalamine tab delayed release 800 mg</i>	1	
<i>mesalamine cap er 24hr 0.375 gm</i>	1	
<i>mesalamine cap er 500 mg</i>	1	
PENTASA 250 MG CAP ER	2	
PENTASA 500 MG CAP ER	2	
SFROWASA 4 GM/60ML ENEMA	3	
<i>*mesalamine rectal enema 4 gm & cleanser wipe kit**</i>	1	
ROWASA 4 GM KIT	3	
DIPENTUM 250 MG CAP	3	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab 500 mg</i>	1	
<i>sulfasalazine tab delayed release 500 mg</i>	1	
INTEGRIN RECEPTOR ANTAGONISTS		
ENTYVIO 300 MG RECON SOLN	4	PA S EX Plan Exclusion
ENTYVIO PEN 108 MG/0.68ML SOLN A-INJ	3	PA S
INTERLEUKIN ANTAGONISTS		
TREMFYA 200 MG/20ML SOLUTION	4	QL PA S EX Plan Exclusion
TREMFYA 200 MG/2ML SOLN PRSYR	3	QL PA S
TREMFYA CROHNS INDUCTION 200 MG/2ML SOLN A-INJ	3	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TREMFYA PEN 200 MG/2ML SOLN A-INJ	3	QL PA S
OMVOH 300 MG/15ML SOLUTION	4	PA S EX Plan Exclusion
SKYRIZI 180 MG/1.2ML SOLN CART	3	PA S
SKYRIZI 360 MG/2.4ML SOLN CART	3	PA S
SKYRIZI 600 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
OTULFI 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
SELARSDI 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
WEZLANA 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
STELARA 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
USTEKINUMAB 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
YESINTEK 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMULDOSA 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
STEQEYMA 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
PYZCHIVA 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
USTEKINUMAB-TTWE 130 MG/26ML SOLUTION	4	PA S EX Plan Exclusion
INTESTINAL ACIDIFIERS		
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
<i>lactulose (encephalopathy) solution 10 gm/15ml</i>	1	
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
<i>alvimopan cap 12 mg</i>	2	PA
ENTEREG 12 MG CAP	3	PA
SYMPROIC 0.2 MG TAB	2	PA
MOVANTIK 12.5 MG TAB	2	PA
MOVANTIK 25 MG TAB	2	PA
PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR AGONISTS		
IQIRVO 80 MG TAB	3	PA S
LIVDELZI 10 MG CAP	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
<i>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</i>	1	
<i>calcium acetate (phosphate binder) tab 667 mg</i>	1	
PHOSLYRA 667 MG/5ML SOLUTION	3	PA
AURYXIA 1 GM 210 MG(Fe) TAB	2	
FERRIC CITRATE 1 GM 210 MG(Fe) TAB	1	
<i>lanthanum carbonate chew tab 1000 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 500 mg (elemental)</i>	1	
<i>lanthanum carbonate chew tab 750 mg (elemental)</i>	1	
<i>sevelamer carbonate packet 0.8 gm</i>	1	
<i>sevelamer carbonate packet 2.4 gm</i>	1	
<i>sevelamer carbonate tab 800 mg</i>	1	
<i>sevelamer hcl tab 400 mg</i>	1	
<i>sevelamer hcl tab 800 mg</i>	1	
VELPHORO 500 MG CHEW TAB	3	PA
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS (GI)		
VELSIPITY 2 MG TAB	2	PA S
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO 250 MG TAB	3	PA S
TUMOR NECROSIS FACTOR ALPHA BLOCKERS		
CIMZIA (1 SYRINGE) 200 MG/ML PREF SY KT	2	QL PA S
CIMZIA (2 SYRINGE) 200 MG/ML PREF SY KT	2	QL PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CIMZIA 2 X 200 MG KIT	2	QL PA S
CIMZIA-STARTER 200 MG/ML PEF SY KT	2	QL PA S
INFLIXIMAB 100 MG RECON SOLN	4	PA S EX Plan Exclusion
REMICADE 100 MG RECON SOLN	4	PA S EX Plan Exclusion
RENFLEXIS 100 MG RECON SOLN	4	PA S EX Plan Exclusion
AVSOLA 100 MG RECON SOLN	4	PA S EX Plan Exclusion
INFLECTRA 100 MG RECON SOLN	4	PA S EX Plan Exclusion
ZYMFENTRA (1 PEN) 120 MG/ML AUT-IJ KIT	3	PA S
ZYMFENTRA (2 PEN) 120 MG/ML AUT-IJ KIT	3	PA S
ZYMFENTRA (2 SYRINGE) 120 MG/ML PEF SY KT	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
AMIDATE 2 MG/ML SOLUTION	4	EX Plan Exclusion
<i>etomidate iv soln 2 mg/ml</i>	4	EX Plan Exclusion
KETALAR 100 MG/ML SOLUTION	4	EX Plan Exclusion
KETALAR 10 MG/ML SOLUTION	4	EX Plan Exclusion
KETALAR 50 MG/ML SOLUTION	4	EX Plan Exclusion
KETAMINE HCL 0.6 MG/ML SOLUTION	4	EX Plan Exclusion
KETAMINE HCL 100 MG/100ML SOLUTION	4	EX Plan Exclusion
KETAMINE HCL 100 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 100 MG/ML SOLUTION	4	EX Plan Exclusion
<i>ketamine hcl inj 100 mg/ml</i>	4	EX Plan Exclusion
KETAMINE HCL 100 MG TROCHE	4	EX Plan Exclusion
KETAMINE HCL 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>ketamine hcl inj 10 mg/ml</i>	4	EX Plan Exclusion
KETAMINE HCL 1 MG/ML SOLUTION	4	EX Plan Exclusion
KETAMINE HCL 20 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 25 MG/ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 300 MG/30ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 30 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL 50 MG/ML SOLN PRSYR	4	EX Plan Exclusion
<i>ketamine hcl inj 50 mg/ml</i>	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 1000-0.65 MG/100ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 1000-0.69 MG/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KETAMINE HCL-SODIUM CHLORIDE 1000-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 100-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 10-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 1250-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 20-0.9 MG/2ML-% SOLN PRSYR	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 2500-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 500-0.8 MG/100ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 500-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
KETAMINE HCL-SODIUM CHLORIDE 50-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
ANESTHESIA S/I-40A 200 MG/20ML KIT	4	EX Plan Exclusion
ANESTHESIA S/I-40H 200 MG/20ML KIT	4	EX Plan Exclusion
ANESTHESIA S/I-40S 200 MG/20ML KIT	4	EX Plan Exclusion
DIPRIVAN 1000 MG/100ML EMULSION	4	EX Plan Exclusion
DIPRIVAN 100 MG/10ML EMULSION	4	EX Plan Exclusion
DIPRIVAN 200 MG/20ML EMULSION	4	EX Plan Exclusion
DIPRIVAN 500 MG/50ML EMULSION	4	EX Plan Exclusion
<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i>	4	EX Plan Exclusion
FRESENIUS PROPOVEN 2000 MG/100ML EMULSION	4	EX Plan Exclusion
<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>propofol iv emul 200 mg/20ml (10 mg/ml)</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>propofol iv emul 500 mg/50ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>propofol iv emul 1000 mg/100ml (10 mg/ml)</i>	4	EX Plan Exclusion
BARBITURATE ANESTHETICS		
BREVITAL SODIUM 500 MG RECON SOLN	4	EX Plan Exclusion
METHOHEXITAL SODIUM 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>methohexital sodium for inj 500 mg</i>	4	EX Plan Exclusion
VOLATILE ANESTHETICS		
<i>desflurane inhal soln</i>	4	EX Plan Exclusion
SUPRANE SOLUTION	4	EX Plan Exclusion
SUPRANE SOLUTION	4	EX Plan Exclusion
FORANE SOLUTION	4	EX Plan Exclusion
<i>isoflurane inhal soln</i>	4	EX Plan Exclusion
<i>isoflurane inhal soln</i>	4	EX Plan Exclusion
<i>sevoflurane inhal soln</i>	4	EX Plan Exclusion
ULTANE SOLUTION	4	EX Plan Exclusion
GENITOURINARY AGENTS - MISCELLANEOUS		
5-ALPHA REDUCTASE INHIBITORS		
<i>dutasteride cap 0.5 mg</i>	1	
<i>finasteride tab 5 mg</i>	1	
ALPHA 1-ADRENOCEPTOR ANTAGONISTS		
<i>alfuzosin hcl tab er 24hr 10 mg</i>	1	
<i>silodosin cap 4 mg</i>	1	
<i>silodosin cap 8 mg</i>	1	
<i>tamsulosin hcl cap 0.4 mg</i>	1	
ANTI-INFECTIVE GENITOURINARY IRRIGANTS		
NEOMYCIN-POLYMYXIN B GU 40-200000 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CITRATES		
<i>potassium citrate tab er 10 meq (1080 mg)</i>	1	
<i>potassium citrate tab er 15 meq (1620 mg)</i>	1	
<i>potassium citrate tab er 5 meq (540 mg)</i>	1	
CYTRA K CRYSTALS 3300-1002 MG PACKET	1	
POTASSIUM CITRATE-CITRIC ACID 1100-334 MG/5ML SOLUTION	1	
<i>potassium citrate & citric acid soln 1100-334 mg/5ml</i>	1	
POT & SOD CIT-CIT AC 550-500-334 MG/5ML SOLUTION	1	
<i>pot & sod citrates w/ cit ac soln 550-500-334 mg/5ml</i>	1	
TRICITRATES 550-500-334 MG/5ML SOLUTION	1	
ORACIT 490-640 MG/5ML SOLUTION	3	
ORAL CITRATE 490-640 MG/5ML SOLUTION	3	
SOD CITRATE-CITRIC ACID 1.5-1 GM/15ML SOLUTION	1	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
SOD CITRATE-CITRIC ACID 3-2 GM/30ML SOLUTION	1	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
SOD CITRATE-CITRIC ACID 500-334 MG/5ML SOLUTION	1	
SOD CITRATE-CITRIC ACID 500-334 MG/5ML SOLUTION	1	
<i>sodium citrate & citric acid soln 500-334 mg/5ml</i>	1	
SODIUM CITRATE-CITRIC ACID 1500-1002 MG/15ML SOLUTION	1	
SODIUM CITRATE-CITRIC ACID 3000-2004 MG/30ML SOLUTION	1	
CYSTINOSIS AGENTS		
CYSTAGON 150 MG CAP	3	PA S
CYSTAGON 50 MG CAP	3	PA S
IGAN AGENTS - ENDOTHELIN & ANGIOTENSIN II RECEPTOR ANTAG		
FILSPARI 200 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FILSPARI 400 MG TAB	3	PA S
IGAN AGENTS - ENDOTHELIN RECEPTOR ANTAGONIST		
VANRAFIA 0.75 MG TAB	3	PA S
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON 100 MG CAP	3	
PENTOSAN POLYSULFATE SODIUM 150 MG CAP DR	3	
PENTOSAN POLYSULFATE SODIUM 200 MG CAP DR	3	
PHOSPHATES		
K-PHOS NO 2 305-700 MG TAB	3	
PROSTATIC HYPERTROPHY AGENT COMBINATIONS		
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	
SMALL INTERFERING RIBONUCLEIC ACID AGENTS (SIRNA)		
OXLUMO 94.5 MG/0.5ML SOLUTION	3	PA S
RIVFLOZA 128 MG/0.8ML SOLN PRSYR	3	PA S
RIVFLOZA 160 MG/ML SOLN PRSYR	3	PA S
RIVFLOZA 80 MG/0.5ML SOLUTION	3	PA S
URINARY ANALGESICS		
<i>phenazopyridine hcl tab 200 mg</i>	1	
PHENAZOPYRIDINE HCL 100 MG TAB	1	
<i>phenazopyridine hcl tab 100 mg</i>	1	
PHENAZOPYRIDINE HCL 200 MG TAB	1	
<i>phenazopyridine hcl tab 200 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
URINARY STONE AGENTS		
LITHOSTAT 250 MG TAB	3	
<i>tiopronin tab 100 mg</i>	1	S
<i>tiopronin tab delayed release 100 mg</i>	1	S
<i>tiopronin tab delayed release 300 mg</i>	1	S
<i>tiopronin tab delayed release 100 mg</i>	1	S
<i>tiopronin tab delayed release 300 mg</i>	1	S
VESICoureTERAL REFLUX (VUR) AGENT COMBINATIONS		
DEFLUX 50-15 MG/ML PRSYR	4	EX Plan Exclusion
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
<i>allopurinol tab 100 mg</i>	1	
<i>allopurinol tab 300 mg</i>	1	
<i>allopurinol sodium for inj 500 mg</i>	4	EX Plan Exclusion
ALOPRIM 500 MG RECON SOLN	4	EX Plan Exclusion
<i>colchicine cap 0.6 mg</i>	1	
<i>colchicine tab 0.6 mg</i>	1	
GLOPERBA 0.6 MG/5ML SOLUTION	3	PA
<i>febuxostat tab 40 mg</i>	1	
<i>febuxostat tab 80 mg</i>	1	
KRYSTEXXA 8 MG/ML SOLUTION	4	PA S EX Plan Exclusion
URICOSURICS		
<i>probenecid tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMATOLOGICAL AGENTS - MISC.		
AGENTS FOR CONGENITAL THROMBOTIC THROMBOCYTOPENIC PURPURA		
ADZYNMA 1500 UNIT KIT	4	S EX Plan Exclusion
ADZYNMA 500 UNIT KIT	4	S EX Plan Exclusion
ANTIHEMOPHILIC PRODUCTS		
JIVI 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
JIVI 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
JIVI 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
JIVI 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
JIVI 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HEMOFIL M 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HEMOFIL M 1700 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HEMOFIL M 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMOFIL M 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOATE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOATE 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOATE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOATE-DVI 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOATE-DVI 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOEIGHT 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOEIGHT 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOEIGHT 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOEIGHT 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOVOEIGHT 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOEIGHT 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 5000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELOCTATE 6000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ELOCTATE 750 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALTUVIIIIO 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
XYNTHA 1000 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA 2000 UNIT KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYNTHA 250 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA 500 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA SOLOFUSE 1000 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA SOLOFUSE 2000 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA SOLOFUSE 250 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA SOLOFUSE 3000 UNIT KIT	4	PA S EX Plan Exclusion
XYNTHA SOLOFUSE 500 UNIT KIT	4	PA S EX Plan Exclusion
ADVATE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADVATE 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADVATE 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADVATE 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADVATE 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADVATE 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADVATE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOVALTRY 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOVALTRY 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOVALTRY 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOVALTRY 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOVALTRY 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 1000 UNIT KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUWIQ 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 1500 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 2000 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 2500 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 2500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 250 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 3000 UNIT KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUWIQ 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 4000 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NUWIQ 500 UNIT KIT	4	PA S EX Plan Exclusion
NUWIQ 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
KOGENATE FS 1000 UNIT KIT	4	PA S EX Plan Exclusion
KOGENATE FS 2000 UNIT KIT	4	PA S EX Plan Exclusion
KOGENATE FS 250 UNIT KIT	4	PA S EX Plan Exclusion
KOGENATE FS 3000 UNIT KIT	4	PA S EX Plan Exclusion
KOGENATE FS 500 UNIT KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ESPEROCT 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ESPEROCT 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ESPEROCT 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ESPEROCT 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ESPEROCT 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ESPEROCT 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADYNOVATE 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ADYNOVATE 750 UNIT RECON SOLN	4	PA S EX Plan Exclusion
OBIZUR 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RECOMBINATE 1241-1800 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RECOMBINATE 1801-2400 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RECOMBINATE 220-400 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RECOMBINATE 401-800 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RECOMBINATE 801-1240 UNIT RECON SOLN	4	PA S EX Plan Exclusion
AFSTYLA 1000 UNIT KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AFSTYLA 1500 UNIT KIT	4	PA S EX Plan Exclusion
AFSTYLA 2000 UNIT KIT	4	PA S EX Plan Exclusion
AFSTYLA 2500 UNIT KIT	4	PA S EX Plan Exclusion
AFSTYLA 250 UNIT KIT	4	PA S EX Plan Exclusion
AFSTYLA 3000 UNIT KIT	4	PA S EX Plan Exclusion
AFSTYLA 500 UNIT KIT	4	PA S EX Plan Exclusion
ALPHANATE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPHANATE 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPHANATE 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPHANATE 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPHANATE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HUMATE-P 1000-2400 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HUMATE-P 250-600 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HUMATE-P 500-1200 UNIT RECON SOLN	4	PA S EX Plan Exclusion
WILATE 1000-1000 UNIT KIT	4	PA S EX Plan Exclusion
WILATE 500-500 UNIT KIT	4	PA S EX Plan Exclusion
FEIBA 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
FEIBA 2500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
FEIBA 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPHANINE SD 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPHANINE SD 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPHANINE SD 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
MONONINE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IDELVION 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IDELVION 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IDELVION 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IDELVION 3500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IDELVION 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPROLIX 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPROLIX 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPROLIX 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPROLIX 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPROLIX 4000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ALPROLIX 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
BENEFIX 1000 UNIT KIT	4	PA S EX Plan Exclusion
BENEFIX 2000 UNIT KIT	4	PA S EX Plan Exclusion
BENEFIX 250 UNIT KIT	4	PA S EX Plan Exclusion
BENEFIX 3000 UNIT KIT	4	PA S EX Plan Exclusion
BENEFIX 500 UNIT KIT	4	PA S EX Plan Exclusion
IXINITY 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IXINITY 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IXINITY 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IXINITY 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IXINITY 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
IXINITY 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RIXUBIS 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RIXUBIS 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RIXUBIS 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RIXUBIS 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
RIXUBIS 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REBINYN 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
REBINYN 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
REBINYN 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
REBINYN 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
NOVOSEVEN RT 1 MG RECON SOLN	4	PA S EX Plan Exclusion
NOVOSEVEN RT 2 MG RECON SOLN	4	PA S EX Plan Exclusion
NOVOSEVEN RT 5 MG RECON SOLN	4	PA S EX Plan Exclusion
NOVOSEVEN RT 8 MG RECON SOLN	4	PA S EX Plan Exclusion
SEVENFACT 1 MG RECON SOLN	4	PA S EX Plan Exclusion
SEVENFACT 2 MG RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SEVENFACT 5 MG RECON SOLN	4	PA S EX Plan Exclusion
COAGADEX 250 UNIT RECON SOLN	4	PA S EX Plan Exclusion
COAGADEX 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
TRETTEN 2500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
PROFILNINE 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
PROFILNINE 1500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
PROFILNINE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
CORIFACT 1000-1600 UNIT KIT	4	PA S EX Plan Exclusion
FIBRYGA RECON SOLN	4	PA S EX Plan Exclusion
RIASTAP RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KCENTRA 1000 UNIT KIT	4	PA S EX Plan Exclusion
KCENTRA 500 UNIT KIT	4	PA S EX Plan Exclusion
BALFAXAR 1000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
BALFAXAR 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
VONVENDI 1300 UNIT RECON SOLN	4	PA S EX Plan Exclusion
VONVENDI 650 UNIT RECON SOLN	4	PA S EX Plan Exclusion
ANTIHEMOPHILIC PRODUCTS - ANTITHROMBIN-DIRECTED SIRNA		
QFITLIA 20 MG/0.2ML SOLUTION	4	PA S EX Plan Exclusion
QFITLIA 50 MG/0.5ML SOLN A-INJ	4	PA S EX Plan Exclusion
ANTIHEMOPHILIC PRODUCTS - GENE THERAPY AGENTS		
HEMGENIX 10 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 11 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMGENIX 12 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 13 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 14 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 15 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 16 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 17 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 18 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 19 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 20 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 21 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMGENIX 22 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 23 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 24 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 25 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 26 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 27 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 28 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 29 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 30 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 31 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMGENIX 32 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 33 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 34 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 35 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 36 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 37 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 38 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 39 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 40 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 41 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMGENIX 42 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 43 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 44 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 45 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 46 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 47 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
HEMGENIX 48 X 10 ML SUSP THPK	4	PA S EX Plan Exclusion
BEQVEZ 4 X 1 ML SUSP THPK	4	PA S EX Plan Exclusion
BEQVEZ 5 X 1 ML SUSP THPK	4	PA S EX Plan Exclusion
BEQVEZ 6 X 1 ML SUSP THPK	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BEQVEZ 7 X 1 ML SUSP THPK	4	PA S EX Plan Exclusion
ROCTAVIAN 2000000000000000 VG/ML SUSPENSION	4	PA S EX Plan Exclusion
ANTIHEMOPHILIC PRODUCTS - MONOCLONAL ANTIBODIES		
ALHEMO 150 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
ALHEMO 300 MG/3ML SOLN PEN	4	PA S EX Plan Exclusion
ALHEMO 60 MG/1.5ML SOLN PEN	4	PA S EX Plan Exclusion
HEMLIBRA 105 MG/0.7ML SOLUTION	4	PA S EX Plan Exclusion
HEMLIBRA 12 MG/0.4ML SOLUTION	4	PA S EX Plan Exclusion
HEMLIBRA 150 MG/ML SOLUTION	4	PA S EX Plan Exclusion
HEMLIBRA 300 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
HEMLIBRA 30 MG/ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMLIBRA 60 MG/0.4ML SOLUTION	4	PA S EX Plan Exclusion
HYMPAVZI 150 MG/ML SOLN A-INJ	4	PA S EX Plan Exclusion
BRADYKININ B2 RECEPTOR ANTAGONISTS		
FIRAZYR 30 MG/3ML SOLN PRSYR	4	PA S EX Plan Exclusion
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	PA S EX Plan Exclusion
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	1	PA S
<i>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</i>	4	PA S EX Plan Exclusion
C1 ESTERASE INHIBITORS		
BERINERT 500 UNIT KIT	4	PA S EX Plan Exclusion
CINRYZE 500 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HAEGARDA 2000 UNIT RECON SOLN	4	PA S EX Plan Exclusion
HAEGARDA 3000 UNIT RECON SOLN	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RUCONEST 2100 UNIT RECON SOLN	4	PA S EX Plan Exclusion
COMPLEMENT C1 INHIBITORS		
ENJAYMO 1100 MG/22ML SOLUTION	4	S EX Plan Exclusion
COMPLEMENT C3 INHIBITORS		
EMPAVELI 1080 MG/20ML SOLUTION	2	PA S
COMPLEMENT C5 INHIBITORS		
PIASKY 340 MG/2ML SOLUTION	4	S EX Plan Exclusion
SOLIRIS 300 MG/30ML SOLUTION	4	S EX Plan Exclusion
EPYSQLI 300 MG/30ML SOLUTION	4	S EX Plan Exclusion
BKEMV 300 MG/30ML SOLUTION	4	S EX Plan Exclusion
VEOPOZ 400 MG/2ML SOLUTION	4	S EX Plan Exclusion
ULTOMIRIS 1100 MG/11ML SOLUTION	4	S EX Plan Exclusion
ULTOMIRIS 300 MG/3ML SOLUTION	4	S EX Plan Exclusion
ZILBRYSQ 16.6 MG/0.416ML SOLN PRSYR	3	PA S
ZILBRYSQ 23 MG/0.574ML SOLN PRSYR	3	PA S
ZILBRYSQ 32.4 MG/0.81ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPLEMENT C5A INHIBITORS		
GOHIBIC 200 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
COMPLEMENT C5A RECEPTOR INHIBITORS		
TAVNEOS 10 MG CAP	2	PA S
COMPLEMENT FACTOR B INHIBITORS		
FABHALTA 200 MG CAP	3	PA S
COMPLEMENT FACTOR D INHIBITORS		
VOYDEYA 100 MG TAB	3	PA S
VOYDEYA 50 & 100 MG TAB THPK	3	PA S
DIRECT-ACTING P2Y12 INHIBITORS		
KENGREAL 50 MG RECON SOLN	4	EX Plan Exclusion
BRILINTA 60 MG TAB	2	
BRILINTA 90 MG TAB	2	
<i>ticagrelor tab 60 mg</i>	1	
<i>ticagrelor tab 90 mg</i>	1	
GLYCOPROTEIN IIB/IIIA RECEPTOR INHIBITORS		
<i>eptifibatide iv soln 200 mg/100ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>eptifibatide iv soln 20 mg/10ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>eptifibatide iv soln 75 mg/100ml (0.75 mg/ml)</i>	4	EX Plan Exclusion
AGGRASTAT 3.75 MG/15ML CONC	4	EX Plan Exclusion
AGGRASTAT 12.5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
AGGRASTAT 5-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tirofiban hcl in nacl 0.9% iv soln 12.5 mg/250ml (base eq)</i>	4	EX Plan Exclusion
<i>tirofiban hcl in nacl 0.9% iv soln 5 mg/100ml (base equiv)</i>	4	EX Plan Exclusion
HEMATORHEOLOGIC AGENTS		
<i>pentoxifylline tab er 400 mg</i>	1	
HEMIN		
PANHEMATIN 350 MG RECON SOLN	4	EX Plan Exclusion
HUMAN PROTEIN C		
CEPROTIN 1000 UNIT RECON SOLN	4	S EX Plan Exclusion
CEPROTIN 500 UNIT RECON SOLN	4	S EX Plan Exclusion
PHOSPHODIESTERASE III INHIBITORS		
<i>cilostazol tab 100 mg</i>	1	
<i>cilostazol tab 50 mg</i>	1	
PLASMA EXPANDERS		
LMD IN D5W 10-5 % SOLUTION	4	EX Plan Exclusion
LMD IN NAACL 10-0.9 % SOLUTION	4	EX Plan Exclusion
HESPAN 6-0.9 % SOLUTION	4	EX Plan Exclusion
HETASTARCH-NAACL 6-0.9 % SOLUTION	4	EX Plan Exclusion
HEXTEND 6 % SOLUTION	4	EX Plan Exclusion
PLASMA KALLIKREIN INHIBITORS		
ORLADEYO 110 MG CAP	4	PA S EX Plan Exclusion
ORLADEYO 150 MG CAP	4	PA S EX Plan Exclusion
KALBITOR 10 MG/ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EKTERLY 300 MG TAB	4	PA S EX Plan Exclusion
PLASMA KALLIKREIN INHIBITORS - MONOCLONAL ANTIBODIES		
TAKHZYRO 150 MG/ML SOLN PRSYR	4	PA S EX Plan Exclusion
TAKHZYRO 300 MG/2ML SOLN PRSYR	4	PA S EX Plan Exclusion
TAKHZYRO 300 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
PLASMA PROTEINS		
ALBUKED 25 25 % SOLUTION	4	EX Plan Exclusion
ALBUKED 5 5 % SOLUTION	4	EX Plan Exclusion
ALBUMIN HUMAN 25 % SOLUTION	4	EX Plan Exclusion
ALBUMIN HUMAN 5 % SOLUTION	4	EX Plan Exclusion
ALBUMIN-ZLB 25 % SOLUTION	4	EX Plan Exclusion
ALBUMIN-ZLB 5 % SOLUTION	4	EX Plan Exclusion
ALBURX 5 % SOLUTION	4	EX Plan Exclusion
ALBUTEIN 25 % SOLUTION	4	EX Plan Exclusion
ALBUTEIN 5 % SOLUTION	4	EX Plan Exclusion
FLEXBUMIN 25 % SOLUTION	4	EX Plan Exclusion
FLEXBUMIN 5 % SOLUTION	4	EX Plan Exclusion
HUMAN ALBUMIN GRIFOLS 25 % SOLUTION	4	EX Plan Exclusion
KEDBUMIN 25 % SOLUTION	4	EX Plan Exclusion
PLASBUMIN-25 25 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLASBUMIN-5 5 % SOLUTION	4	EX Plan Exclusion
ALBUMINEX 25 % SOLUTION	4	EX Plan Exclusion
ALBUMINEX 5 % SOLUTION	4	EX Plan Exclusion
THROMBATE III 1000 UNIT RECON SOLN	4	S EX Plan Exclusion
THROMBATE III 500 UNIT RECON SOLN	4	S EX Plan Exclusion
OCTAPLAS BLOOD GROUP AB SOLUTION	4	EX Plan Exclusion
OCTAPLAS BLOOD GROUP A SOLUTION	4	EX Plan Exclusion
OCTAPLAS BLOOD GROUP B SOLUTION	4	EX Plan Exclusion
OCTAPLAS BLOOD GROUP O SOLUTION	4	EX Plan Exclusion
PLASMANATE 5 % SOLUTION	4	EX Plan Exclusion
RYPLAZIM 68.8 MG RECON SOLN	4	S EX Plan Exclusion
PLATELET AGGREGATION INHIBITORS		
<i>dipyridamole tab 25 mg</i>	1	
<i>dipyridamole tab 50 mg</i>	1	
<i>dipyridamole tab 75 mg</i>	1	
PROTAMINE		
PROTAMINE SULFATE 10 MG/ML SOLUTION	4	EX Plan Exclusion
PROTEASE-ACTIVATED RECEPTOR-1 (PAR-1) ANTAGONISTS		
ZONTIVITY 2.08 MG TAB	3	PA
PYRUVATE KINASE ACTIVATORS		
PYRUKYND 20 MG TAB	3	PA S
PYRUKYND 50 MG TAB	3	PA S
PYRUKYND 5 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PYRUKYND TAPER PACK 5 MG TAB THPK	3	PA S
PYRUKYND TAPER PACK 7 X 20 MG & 7 X 5 MG TAB THPK	3	PA S
PYRUKYND TAPER PACK 7 X 50 MG & 7 X 20 MG TAB THPK	3	PA S
QUINAZOLINE AGENTS		
<i>anagrelide hcl cap 0.5 mg</i>	1	
<i>anagrelide hcl cap 1 mg</i>	1	
SPLEEN TYROSINE KINASE (SYK) INHIBITORS		
TAVALISSE 100 MG TAB	2	PA S
TAVALISSE 150 MG TAB	2	PA S
THIENOPYRIDINE DERIVATIVES		
<i>clopidogrel bisulfate tab 300 mg (base equiv)</i>	1	
<i>clopidogrel bisulfate tab 75 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 10 mg (base equiv)</i>	1	
<i>prasugrel hcl tab 5 mg (base equiv)</i>	1	
THROMBOLYTIC AGENT - MISC		
DEFITELIO 200 MG/2.5ML SOLUTION	4	S EX Plan Exclusion
TISSUE PLASMINOGEN ACTIVATORS		
ACTIVASE 100 MG RECON SOLN	4	EX Plan Exclusion
ACTIVASE 50 MG RECON SOLN	4	EX Plan Exclusion
CATHFLO ACTIVASE 2 MG RECON SOLN	4	EX Plan Exclusion
RETAVASE 2 X 10 UNIT KIT	4	EX Plan Exclusion
RETAVASE HALF-KIT 1 X 10 UNIT KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TNKASE 50 MG KIT	4	EX Plan Exclusion
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CERDELGA 84 MG CAP	2	PA S
CEREZYME 400 UNIT RECON SOLN	4	PA S EX Plan Exclusion
<i>miglustat cap 100 mg</i>	1	PA S
<i>miglustat cap 100 mg</i>	1	PA S
<i>miglustat cap 100 mg</i>	1	PA S
ZAVESCA 100 MG CAP	3	PA S
ELELYSO 200 UNIT RECON SOLN	4	PA S EX Plan Exclusion
VPRIV 400 UNIT RECON SOLN	4	PA S EX Plan Exclusion
AGENTS FOR SICKLE CELL DISEASE - AUTOLOGOUS GENE THERAPY		
CASGEVY SUSPENSION	4	PA S EX Plan Exclusion
LYFGENIA SUSPENSION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMINO ACIDS		
ENDARI 5 GM PACKET	2	PA S
<i>glutamine (sickle cell) powd pack 5 gm</i>	1	PA S
COBALAMIN COMBINATIONS		
BIOPAR DELTA-FORTE CAP	3	
FOLTRATE 500-1 MCG-MG TAB	3	
LIPO-B SOLUTION	3	
VIT B12-METHIONINE-INOS-CHOL SOLUTION	3	
ABANEU-SL 600-600 MCG SL TAB	1	
NEURIN-SL 600-600 MCG SL TAB	3	
COBALAMINS		
<i>cyanocobalamin inj 1000 mcg/ml</i>	4	EX Plan Exclusion
<i>cyanocobalamin inj 1000 mcg/ml</i>	4	EX Plan Exclusion
CYANOCOBALAMIN 2000 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>cyanocobalamin nasal spray 500 mcg/0.1ml</i>	1	
<i>cyanocobalamin inj 1000 mcg/ml</i>	4	EX Plan Exclusion
NASCOBAL 500 MCG/0.1ML SOLUTION	3	
CXCR4 RECEPTOR ANTAGONIST		
XOLREMDI 100 MG CAP	3	PA S
APHEXDA 62 MG RECON SOLN	3	PA S
MOZOBIL 24 MG/1.2ML SOLUTION	3	PA S
<i>plerixafor subcutaneous inj 24 mg/1.2ml (20 mg/ml)</i>	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYTOTOXIC AGENTS		
SIKLOS 1000 MG TAB	2	PA S
SIKLOS 100 MG TAB	2	PA S
DROXIA 200 MG CAP	3	PA
DROXIA 300 MG CAP	3	PA
DROXIA 400 MG CAP	3	PA
ERYTHROID MATURATION AGENTS		
REBLOZYL 25 MG RECON SOLN	3	PA S
REBLOZYL 75 MG RECON SOLN	3	PA S
ERYTHROPOIESIS-STIMULATING AGENTS (ESAS)		
ARANESP (ALBUMIN FREE) 100 MCG/0.5ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 100 MCG/ML SOLUTION	3	PA S
ARANESP (ALBUMIN FREE) 10 MCG/0.4ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 150 MCG/0.3ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 200 MCG/0.4ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 200 MCG/ML SOLUTION	3	PA S
ARANESP (ALBUMIN FREE) 25 MCG/0.42ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARANESP (ALBUMIN FREE) 25 MCG/ML SOLUTION	3	PA S
ARANESP (ALBUMIN FREE) 300 MCG/0.6ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 40 MCG/0.4ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 40 MCG/ML SOLUTION	3	PA S
ARANESP (ALBUMIN FREE) 500 MCG/ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 60 MCG/0.3ML SOLN PRSYR	3	PA S
ARANESP (ALBUMIN FREE) 60 MCG/ML SOLUTION	3	PA S
EPOGEN 10000 UNIT/ML SOLUTION	3	PA S
EPOGEN 20000 UNIT/ML SOLUTION	3	PA S
EPOGEN 2000 UNIT/ML SOLUTION	3	PA S
EPOGEN 3000 UNIT/ML SOLUTION	3	PA S
EPOGEN 4000 UNIT/ML SOLUTION	3	PA S
RETACRIT 10000 UNIT/ML SOLUTION	2	PA S
RETACRIT 20000 UNIT/ML SOLUTION	2	PA S
RETACRIT 2000 UNIT/ML SOLUTION	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETACRIT 3000 UNIT/ML SOLUTION	2	PA S
RETACRIT 40000 UNIT/ML SOLUTION	2	PA S
RETACRIT 4000 UNIT/ML SOLUTION	2	PA S
MIRCERA 100 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 120 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 150 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 200 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 30 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 50 MCG/0.3ML SOLN PRSYR	2	PA S
MIRCERA 75 MCG/0.3ML SOLN PRSYR	2	PA S
FOLIC ACID/FOLATE COMBINATIONS		
CHOLECAL DF 1-3800 MG-UNIT TAB	3	
CIFEREX 1-3775 MG-UNIT CAP	3	
FOLI-D 1-2000 MG-UNIT TAB	3	
FOLVITE-D 1-3775 MG-UNIT TAB	3	
GENICIN VITA-D 1-3775 MG-UNIT TAB	3	
OSTACHOL 1-3800 MG-UNIT TAB	3	
AIRAVITE 2.5-25-1 MG TAB	1	
CENFOL 2.3-24.5-2 MG TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg</i>	1	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-0.5 mg</i>	1	
FOLPLEX 2.2 2.2-25-0.5 MG TAB	1	
NUFOL 2.5-25-1 MG TAB	1	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg</i>	1	
<i>folic acid-vitamin b6-vitamin b12 tab 2.2-25-1 mg</i>	1	
BP VIT 3 1 MG CAP	3	
TALIVA 1 MG CAP	3	
VITAMEZ 1 MG CAP	3	
FOLITE TAB	3	
OVEEZA 0.5 MG CAP	3	
FOLIC ACID/FOLATES		
<i>folic acid tab 1 mg</i>	1	
<i>folic acid inj 5 mg/ml</i>	1	
GRANULOCYTE COLONY-STIMULATING FACTORS (G-CSF)		
ROLVEDON 13.2 MG/0.6ML SOLN PRSYR	3	PA S
NIVESTYM 300 MCG/0.5ML SOLN PRSYR	2	PA S
NIVESTYM 300 MCG/ML SOLUTION	2	PA S
NIVESTYM 480 MCG/0.8ML SOLN PRSYR	2	PA S
NIVESTYM 480 MCG/1.6ML SOLUTION	2	PA S
RELEUKO 300 MCG/0.5ML SOLN PRSYR	2	PA S
RELEUKO 300 MCG/ML SOLUTION	2	PA S
RELEUKO 480 MCG/0.8ML SOLN PRSYR	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RELEUKO 480 MCG/1.6ML SOLUTION	2	PA S
NYPOZI 300 MCG/0.5ML SOLN PRSYR	2	PA S
NYPOZI 480 MCG/0.8ML SOLN PRSYR	2	PA S
NYVEPRIA 6 MG/0.6ML SOLN PRSYR	3	PA S
ZIEXTENZO 6 MG/0.6ML SOLN PRSYR	3	PA S
UDENYCA 6 MG/0.6ML SOLN A-INJ	3	PA S
UDENYCA 6 MG/0.6ML SOLN PRSYR	3	PA S
UDENYCA ONBODY 6 MG/0.6ML SOLN PRSYR	3	PA S
STIMUFEND 6 MG/0.6ML SOLN PRSYR	3	PA S
FULPHILA 6 MG/0.6ML SOLN PRSYR	2	PA S
FYLNETRA 6 MG/0.6ML SOLN PRSYR	2	PA S
GRANULOCYTE/MACROPHAGE COLONY-STIMULATING FACTOR(GM-CSF)		
LEUKINE 250 MCG RECON SOLN	3	PA S
HEMATOPOIETIC AUTOLOGOUS CELLULAR GENE THERAPY		
ZYNTEGLO SUSPENSION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPOXIA-INDUCIBLE FACTOR PROLYL HYDROXYLASE INHIBITORS		
JESDUVROQ 1 MG TAB	3	PA S
JESDUVROQ 2 MG TAB	3	PA S
JESDUVROQ 4 MG TAB	3	PA S
JESDUVROQ 6 MG TAB	3	PA S
JESDUVROQ 8 MG TAB	3	PA S
VAFSEO 150 MG TAB	3	PA S
VAFSEO 300 MG TAB	3	PA S
IRON		
INJECTAFER 100 MG/2ML SOLUTION	4	EX Plan Exclusion
INJECTAFER 750 MG/15ML SOLUTION	4	EX Plan Exclusion
MONOFERRIC 1000 MG/10ML SOLUTION	4	EX Plan Exclusion
ACCRUFER 30 MG CAP	3	PA
TRIFERIC 27.2 MG/5ML SOLUTION	4	EX Plan Exclusion
TRIFERIC 272 MG PACKET	4	EX Plan Exclusion
TRIFERIC AVNU 6.75 MG/4.5ML SOLUTION	4	EX Plan Exclusion
FERAHEME 510 MG/17ML SOLUTION	4	EX Plan Exclusion
<i>ferumoxytol inj 510 mg/17ml (30 mg/ml) (elemental fe)</i>	4	EX Plan Exclusion
VENOFER 20 MG/ML SOLUTION	4	EX Plan Exclusion
FERRLECIT 12.5 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sod ferric gluc cmplx in sucrose iv soln 12.5 mg/ml (fe eq)</i>	4	EX Plan Exclusion
IRON COMBINATIONS		
MULTIGEN PLUS TAB	3	
MULTIGEN 70 MG TAB	3	
MULTIGEN FOLIC 70-150-2-1 MG TAB	3	
IROSPAN 24/6 MISC	3	
TARON FORTE CAP	3	
ACTIVE FE 75-1.25 MG TAB	3	
HEMATOGEN FA 200-250-0.01-1 MG CAP	3	
TRIGELS-F FORTE 460-60-0.01-1 MG CAP	1	
FUSION PLUS CAP	3	
FOLIVANE-PLUS CAP	2	
INTEGRA PLUS CAP	2	
IRON FOLATE PLUS CAP	3	
K-TAN PLUS 162-115.2-1 MG CAP	1	
PUREVIT DUALFE PLUS 162-115.2-1 MG CAP	1	
SE-TAN PLUS 162-115.2-1 MG CAP	1	
TANDEM PLUS 162-115.2-1 MG CAP	1	
CENTRATEX 106-1 MG CAP	3	
<i>*ferrous fumarate-fa-b complex-c-zn-mg-mn-cu tab 106-1 mg***</i>	1	
HEMATINIC PLUS VIT/MINERALS 106-1 MG TAB	2	
HEMOCYTE PLUS 106-1 MG CAP	3	
FERRO-PLEX 115-1 MG TAB	3	
<i>fe fumarate w/ b12-vit c-fa-ifc cap 110-0.015-75-0.5-240 mg</i>	1	
FEROTRINSIC CAP	1	
FOLTRIN CAP	1	
TRICON CAP	1	
FEONYX TAB	3	
NEPHRON FA TAB	3	
CHROMAGEN CAP	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CORVITE 150 TAB	3	
CORVITE FE TAB	3	
NIFEREX TAB	3	
NUFERA TAB	3	
HEMATRON-AF (WITH DOCUSATE) 150-1 MG TAB	3	
<i>*iron-docusate-b12-folic acid-c-e-cu-biotin tab 150-1 mg***</i>	1	
CORVITA 150 150-1.25 MG TAB	1	
CORVITE 150 150-1.25 MG TAB	3	
<i>iron polysacch complex-vit b12-fa cap 150-0.025-1 mg</i>	1	
POLY-IRON 150 FORTE 150-25-1 MG-MCG-MG CAP	1	
POLYSACCHARIDE IRON FORTE 150-25-1 MG-MCG-MG CAP	1	
ICAR-C PLUS 100-250-0.025-1 MG TAB	3	
IRON W/ FOLIC ACID		
HEMATINIC/FOLIC ACID 324-1 MG TAB	3	
<i>ferrous fumarate-folic acid tab 324-1 mg</i>	1	
FOLIVANE-F 125-1 MG CAP	3	
INTEGRA F 125-1 MG CAP	3	
IRON FOLATE-F 125-1 MG CAP	3	
BENTIVITE 35-1 MG TAB	3	
TULIVITE 35-1 MG TAB	3	
SELECTIN BLOCKERS		
ADAKVEO 100 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
THROMBOPOIETIN (TPO) RECEPTOR AGONISTS		
DOPTELET 20 MG TAB	2	PA S
ALVAIZ 18 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALVAIZ 36 MG TAB	2	PA S
ALVAIZ 54 MG TAB	2	PA S
ALVAIZ 9 MG TAB	2	PA S
<i>eltrombopag olamine powder pack for susp 12.5 mg (base eq)</i>	1	PA S
<i>eltrombopag olamine tab 12.5 mg (base equiv)</i>	1	PA S
<i>eltrombopag olamine powder pack for susp 25 mg (base equiv)</i>	1	PA S
<i>eltrombopag olamine tab 25 mg (base equiv)</i>	1	PA S
<i>eltrombopag olamine tab 50 mg (base equiv)</i>	1	PA S
<i>eltrombopag olamine tab 75 mg (base equiv)</i>	1	PA S
PROMACTA 12.5 MG PACKET	2	PA S
PROMACTA 12.5 MG TAB	2	PA S
PROMACTA 25 MG PACKET	2	PA S
PROMACTA 25 MG TAB	2	PA S
PROMACTA 50 MG TAB	2	PA S
PROMACTA 75 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULPLETA 3 MG TAB	3	PA S
NPLATE 125 MCG RECON SOLN	3	PA S
NPLATE 250 MCG RECON SOLN	3	PA S
NPLATE 500 MCG RECON SOLN	3	PA S
HEMOSTATICS		
HEMOSTATIC COMBINATIONS - TOPICAL		
VISTASEAL 10 ML PREF SY KT	4	EX Plan Exclusion
VISTASEAL 2 ML PREF SY KT	4	EX Plan Exclusion
VISTASEAL 4 ML PREF SY KT	4	EX Plan Exclusion
ARTISS 10 ML KIT	4	EX Plan Exclusion
ARTISS 2 ML KIT	4	EX Plan Exclusion
ARTISS 4 ML KIT	4	EX Plan Exclusion
ARTISS SOLUTION	4	EX Plan Exclusion
TISSEEL 10 ML KIT	4	EX Plan Exclusion
TISSEEL 2 ML KIT	4	EX Plan Exclusion
TISSEEL 4 ML KIT	4	EX Plan Exclusion
TISSEEL SOLUTION	4	EX Plan Exclusion
GEL-FLOW KIT	4	EX Plan Exclusion
GELFOAM-JMI POWDER KIT	4	EX Plan Exclusion
GELFOAM-JMI SPONGE KIT	4	EX Plan Exclusion
THROMBI-PAD 3"X3" PAD	4	EX Plan Exclusion
THROMBI-GEL 100 PAD	4	EX Plan Exclusion
THROMBI-GEL 10 PAD	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THROMBI-GEL 40 PAD	4	EX Plan Exclusion
HEMOSTATICS - SYSTEMIC		
<i>aminocaproic acid oral soln 0.25 gm/ml</i>	1	
<i>aminocaproic acid tab 1000 mg</i>	1	
<i>aminocaproic acid inj 250 mg/ml</i>	4	EX Plan Exclusion
<i>aminocaproic acid tab 500 mg</i>	1	
CYKLOKAPRON 1000 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)</i>	4	EX Plan Exclusion
<i>tranexamic acid tab 650 mg</i>	1	
TRANEXAMIC ACID-NACL 1000-0.7 MG/100ML-% SOLUTION	4	EX Plan Exclusion
<i>tranexamic acid-sodium chloride iv soln 1000 mg/100ml-0.7%</i>	4	EX Plan Exclusion
HEMOSTATICS - TOPICAL		
ACTIFOAM COLLAGEN SPONGE MISC	4	EX Plan Exclusion
ENDO AVITENE MISC	4	EX Plan Exclusion
INSTAT PAD	4	EX Plan Exclusion
SYRINGE AVITENE MISC	4	EX Plan Exclusion
TACHOSIL 4.8 X 4.8 CM PATCH	4	EX Plan Exclusion
TACHOSIL 9.5 X 4.8 CM PATCH	4	EX Plan Exclusion
ASTRINGYN 259 MG/GM SOLUTION	4	EX Plan Exclusion
MONSELS FERRIC SUBSULFATE SOLUTION	4	EX Plan Exclusion
GELFILM FILM	4	EX Plan Exclusion
GEL-FLOW NT PRSYR	4	EX Plan Exclusion
GELFOAM COMPRESSED SIZE 100 MISC	4	EX Plan Exclusion
GELFOAM DENTAL PACK SIZE 4 MISC	4	EX Plan Exclusion
GELFOAM POWDER	4	EX Plan Exclusion
GELFOAM SPONGE 12-7 MM MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GELFOAM SPONGE SIZE 100 MISC	4	EX Plan Exclusion
GELFOAM SPONGE SIZE 200 MISC	4	EX Plan Exclusion
GELFOAM SPONGE SIZE 50 MISC	4	EX Plan Exclusion
SURGIFOAM POWDER	4	EX Plan Exclusion
AVITENE FLOUR POWDER	4	EX Plan Exclusion
AVITENE FLOUR POWDER	4	EX Plan Exclusion
AVITENE PAD	4	EX Plan Exclusion
ULTRAFOAM SPONGE 2X6.25X7CM MISC	4	EX Plan Exclusion
ULTRAFOAM SPONGE 8X12.5X1CM MISC	4	EX Plan Exclusion
ULTRAFOAM SPONGE 8X12.5X3CM MISC	4	EX Plan Exclusion
ULTRAFOAM SPONGE 8X25X1CM MISC	4	EX Plan Exclusion
ULTRAFOAM SPONGE 8X6.25X1CM MISC	4	EX Plan Exclusion
INTERCEED PAD	4	EX Plan Exclusion
INTERCEED (TC7) PAD	4	EX Plan Exclusion
SURGICEL FIBRILLAR PAD	4	EX Plan Exclusion
SURGICEL NU-KNIT PAD	4	EX Plan Exclusion
SURGICEL SNOW 1"X2" PAD	4	EX Plan Exclusion
SURGICEL SNOW 2"X4" PAD	4	EX Plan Exclusion
SURGICEL SNOW 4"X4" PAD	4	EX Plan Exclusion
THROMBIN-JMI 20000 UNIT KIT	4	EX Plan Exclusion
THROMBIN-JMI 20000 UNIT RECON SOLN	4	EX Plan Exclusion
THROMBIN-JMI 5000 UNIT KIT	4	EX Plan Exclusion
THROMBIN-JMI 5000 UNIT RECON SOLN	4	EX Plan Exclusion
THROMBIN-JMI EPISTAXIS 5000 UNIT KIT	4	EX Plan Exclusion
THROMBOGEN 10000 UNIT KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THROMBOGEN 10000 UNIT RECON SOLN	4	EX Plan Exclusion
THROMBOGEN 1000 UNIT RECON SOLN	4	EX Plan Exclusion
RECOTHROM 20000 UNIT RECON SOLN	4	EX Plan Exclusion
RECOTHROM 5000 UNIT RECON SOLN	4	EX Plan Exclusion
RECOTHROM SPRAY KIT 20000 UNIT RECON SOLN	4	EX Plan Exclusion
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
NEMBUTAL 50 MG/ML SOLUTION	4	EX Plan Exclusion
<i>pentobarbital sodium inj 50 mg/ml</i>	4	EX Plan Exclusion
PHENOBARBITAL 100 MG TAB	1	
<i>phenobarbital tab 100 mg</i>	1	
PHENOBARBITAL 15 MG TAB	1	
<i>phenobarbital tab 15 mg</i>	1	
PHENOBARBITAL 16.2 MG TAB	1	
<i>phenobarbital tab 16.2 mg</i>	1	
PHENOBARBITAL 20 MG/5ML ELIXIR	1	
<i>phenobarbital elixir 20 mg/5ml</i>	1	
PHENOBARBITAL 30 MG/7.5ML ELIXIR	1	
PHENOBARBITAL 30 MG TAB	1	
<i>phenobarbital tab 30 mg</i>	1	
PHENOBARBITAL 32.4 MG TAB	1	
<i>phenobarbital tab 32.4 mg</i>	1	
PHENOBARBITAL 60 MG/15ML ELIXIR	1	
PHENOBARBITAL 60 MG TAB	1	
<i>phenobarbital tab 60 mg</i>	1	
PHENOBARBITAL 64.8 MG TAB	1	
<i>phenobarbital tab 64.8 mg</i>	1	
PHENOBARBITAL 97.2 MG TAB	1	
<i>phenobarbital tab 97.2 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENOBARBITAL SODIUM 130 MG/ML SOLUTION	4	EX Plan Exclusion
PHENOBARBITAL SODIUM 65 MG/ML SOLUTION	4	EX Plan Exclusion
SEZABY 100 MG RECON SOLN	4	EX Plan Exclusion
BENZODIAZEPINE HYPNOTICS		
<i>estazolam tab 1 mg</i>	1	
<i>estazolam tab 2 mg</i>	1	
FLURAZEPAM HCL 15 MG CAP	1	
FLURAZEPAM HCL 30 MG CAP	1	
MIDAZOLAM 100 MG/100ML SOLUTION	4	EX Plan Exclusion
MIDAZOLAM 25 MG/25ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM 2 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM 30 MG/30ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM 3 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM 50 MG/50ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM 50 MG/50ML SOLUTION	4	EX Plan Exclusion
MIDAZOLAM 5 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM+SYRSPEND SF 1 MG/ML SUSPENSION	3	
<i>midazolam hcl inj 10 mg/10ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj 10 mg/2ml (base equivalent)</i>	4	EX Plan Exclusion
MIDAZOLAM HCL 150 MG/30ML SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL 150 MG/30ML SOLUTION	4	EX Plan Exclusion
<i>midazolam hcl inj 25 mg/5ml (base equivalent)</i>	4	EX Plan Exclusion
MIDAZOLAM HCL 2 MG/2ML SOLUTION	4	EX Plan Exclusion
<i>midazolam hcl inj 2 mg/2ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl syrup 2 mg/ml (base equivalent)</i>	2	
<i>midazolam hcl inj 50 mg/10ml (base equivalent)</i>	4	EX Plan Exclusion
MIDAZOLAM HCL 5 MG/5ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>midazolam hcl inj 5 mg/5ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj 5 mg/ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj pf 10 mg/2ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj pf 5 mg/5ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj pf 5 mg/ml (base equivalent)</i>	4	EX Plan Exclusion
<i>midazolam hcl inj pf 2 mg/2ml (base equivalent)</i>	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 100-0.8 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 2-0.9 MG/2ML-% SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 30-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 50-0.8 MG/50ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 50-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 5-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 55-0.9 MG/55ML-% SOLN PRSYR	4	EX Plan Exclusion
MIDAZOLAM HCL-SODIUM CHLORIDE 60-0.9 MG/30ML-% SOLN PRSYR	4	EX Plan Exclusion
<i>midazolam 100 mg/100ml-sodium chloride 0.9% iv soln</i>	4	EX Plan Exclusion
MIDAZOLAM-SODIUM CHLORIDE 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
<i>midazolam 50 mg/50ml-sodium chloride 0.9% iv soln</i>	4	EX Plan Exclusion
MIDAZOLAM-SODIUM CHLORIDE 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIDAZOLAM-SODIUM CHLORIDE (PF) 100-0.8 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM-SODIUM CHLORIDE (PF) 100-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
MIDAZOLAM-SODIUM CHLORIDE (PF) 50-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
QUAZEPAM 15 MG TAB	2	
BYFAVO 20 MG RECON SOLN	4	EX Plan Exclusion
<i>temazepam cap 15 mg</i>	1	
<i>temazepam cap 22.5 mg</i>	1	
<i>temazepam cap 30 mg</i>	1	
<i>temazepam cap 7.5 mg</i>	1	
<i>triazolam tab 0.125 mg</i>	1	
<i>triazolam tab 0.25 mg</i>	1	
HYPNOTICS - TRICYCLIC AGENTS		
<i>doxepin hcl (sleep) tab 3 mg (base equiv)</i>	1	
<i>doxepin hcl (sleep) tab 6 mg (base equiv)</i>	1	
NON-BENZODIAZEPINE - GABA-RECEPTOR MODULATORS		
<i>eszopiclone tab 1 mg</i>	1	
<i>eszopiclone tab 2 mg</i>	1	
<i>eszopiclone tab 3 mg</i>	1	
<i>zaleplon cap 10 mg</i>	1	
<i>zaleplon cap 5 mg</i>	1	
<i>zolpidem tartrate tab 10 mg</i>	1	
ZOLPIDEM TARTRATE 1.75 MG SL TAB	1	
<i>zolpidem tartrate sl tab 1.75 mg</i>	1	
ZOLPIDEM TARTRATE 3.5 MG SL TAB	1	
<i>zolpidem tartrate sl tab 3.5 mg</i>	1	
<i>zolpidem tartrate tab 5 mg</i>	1	
ZOLPIDEM TARTRATE 7.5 MG CAP	3	
<i>zolpidem tartrate tab er 12.5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zolpidem tartrate tab er 6.25 mg</i>	1	
OREXIN RECEPTOR ANTAGONISTS		
QUVIVIQ 25 MG TAB	2	
QUVIVIQ 50 MG TAB	2	
DAYVIGO 10 MG TAB	2	
DAYVIGO 5 MG TAB	2	
BELSOMRA 10 MG TAB	2	
BELSOMRA 15 MG TAB	2	
BELSOMRA 20 MG TAB	2	
BELSOMRA 5 MG TAB	2	
SELECTIVE ALPHA2-ADRENORECEPTOR AGONIST SEDATIVES		
<i>dexmedetomidine hcl iv soln 1000 mcg/10ml</i>	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL 1000 MCG/10ML SOLUTION	4	EX Plan Exclusion
<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl iv soln 200 mcg/2ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl iv soln 400 mcg/4ml</i>	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL 400 MCG/4ML SOLUTION	4	EX Plan Exclusion
PRECEDEX 200 MCG/2ML SOLUTION	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL-DEXTROSE 200MCG/50ML -5% SOLUTION	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL-DEXTROSE 400MCG/100ML -5% SOLUTION	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL IN NAACL 20-0.9 MCG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL IN NAACL 20-0.9 MCG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl in nacl 0.9% iv soln 200 mcg/50ml</i>	4	EX Plan Exclusion
DEXMEDETOMIDINE HCL IN NAACL 40-0.9 MCG/10ML-% SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl in nacl 0.9% iv soln 400 mcg/100ml</i>	4	EX Plan Exclusion
<i>dexmedetomidine hcl in nacl 0.9% iv soln 80 mcg/20ml</i>	4	EX Plan Exclusion
PRECEDEX 1000 MCG/250ML SOLUTION	4	EX Plan Exclusion
PRECEDEX 200 MCG/50ML SOLUTION	4	EX Plan Exclusion
PRECEDEX 400 MCG/100ML SOLUTION	4	EX Plan Exclusion
PRECEDEX 80 MCG/20ML SOLUTION	4	EX Plan Exclusion
SELECTIVE MELATONIN RECEPTOR AGONISTS		
<i>ramelteon tab 8 mg</i>	1	
<i>tasimelteon capsule 20 mg</i>	1	S
LAXATIVES		
BOWEL EVACUANT COMBINATIONS		
PEG-PREP 5-210 MG-GM KIT	3	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	1	
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm</i>	1	
GAVILYTE-C 240 GM RECON SOLN	1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
CLENPIQ 10-3.5-12 MG-GM -GM/160ML SOLUTION	2	
CLENPIQ 10-3.5-12 MG-GM -GM/175ML SOLUTION	2	
SUTAB 1479-225-188 MG TAB	2	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	1	
SUPREP BOWEL PREP KIT 17.5-3.13-1.6 GM/177ML SOLUTION	3	
LAXATIVES - MISCELLANEOUS		
<i>lactulose solution 10 gm/15ml</i>	1	
<i>lactulose oral crystal packet 10 gm</i>	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lactulose oral crystal packet 20 gm</i>	2	PA
<i>lactulose solution 10 gm/15ml</i>	1	
<i>lactulose oral crystal packet 10 gm</i>	1	
<i>lactulose solution 10 gm/15ml</i>	1	
<i>lactulose oral crystal packet 20 gm</i>	1	
VIBRANT CAP	4	EX Plan Exclusion
VIBRANT STARTER KIT KIT	4	EX Plan Exclusion
LUBRICANT LAXATIVES		
MINERAL OIL HEAVY OIL	1	
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETIC & SYMPATHOMIMETIC		
<i>articaine-epinephrine solution cartridge 4%-1:100000</i>	4	EX Plan Exclusion
ORABLOC 4 %-1:100000 SOLN CART	4	EX Plan Exclusion
ORABLOC 4 %-1:200000 SOLN CART	4	EX Plan Exclusion
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
BUPIVACAINE-EPINEPHRINE 0.25% -1:200000 SOLUTION	4	EX Plan Exclusion
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
BUPIVACAINE-EPINEPHRINE 0.5% -1:200000 SOLUTION	4	EX Plan Exclusion
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000 (pf)</i>	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE 0.25-1:200000 % SOLUTION	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE 0.25% -1:200000 SOLUTION	4	EX Plan Exclusion
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE 0.5% -1:200000 SOLUTION	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE PF 0.25-1:200000 % SOLUTION	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE PF 0.25% -1:200000 SOLUTION	4	EX Plan Exclusion
MARCAINE/EPINEPHRINE PF 0.5% -1:200000 SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.5% w/ epinephrine 1:200000</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	4	EX Plan Exclusion
<i>bupivacaine inj 0.25% w/ epinephrine 1:200000 (pf)</i>	4	EX Plan Exclusion
SENSORCAINE-MPF/EPINEPHRINE 0.5% -1:200000 SOLUTION	4	EX Plan Exclusion
SENSORCAINE-MPF/EPINEPHRINE 0.5% -1:200000 SOLUTION	4	EX Plan Exclusion
SENSORCAINE-MPF/EPINEPHRINE 0.75-1:200000 % SOLUTION	4	EX Plan Exclusion
SENSORCAINE-MPF/EPINEPHRINE 0.75-1:200000 % SOLUTION	4	EX Plan Exclusion
LIDOCAINE(BUFFERD)-EPINEPHRINE 0.5 %-1:100000 SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE(BUFFERD)-EPINEPHRINE 1 %-1:100000 SOLN PRSYR	4	EX Plan Exclusion
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	4	EX Plan Exclusion
<i>lidocaine inj 0.5% w/ epinephrine-1:200000</i>	4	EX Plan Exclusion
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	4	EX Plan Exclusion
LIDOCAINE-EPINEPHRINE 1 %-1:100000 SOLUTION	4	EX Plan Exclusion
<i>lidocaine inj 1% w/ epinephrine-1:100000</i>	4	EX Plan Exclusion
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	4	EX Plan Exclusion
<i>lidocaine inj 2% w/ epinephrine-1:100000</i>	4	EX Plan Exclusion
LIDOCAINE-EPINEPHRINE 2 %-1:200000 SOLUTION	4	EX Plan Exclusion
LIDOCAINE-EPINEPHRINE 2 %-1:50000 SOLUTION	4	EX Plan Exclusion
LIDOCAINE-EPINEPHRINE (3 ML) 0.5 %-1:100000 SOLN PRSYR	4	EX Plan Exclusion
<i>lidocaine inj 1.5% w/ epinephrine-1:200000 (pf)</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lidocaine inj 2% w/ epinephrine-1:200000 (pf)</i>	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 0.5 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 0.5 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 1 %-1:100000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 1 %-1:100000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 2 %-1:100000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE/EPINEPHRINE 2 %-1:100000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 1 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 1 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 1.5 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 1.5 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 2 %-1:200000 SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF/EPINEPHRINE 2 %-1:200000 SOLUTION	4	EX Plan Exclusion
ROPIV-CLONIDINE-KETOROLAC 123-0.04-15 MG/50ML SOLN PRSYR	4	EX Plan Exclusion
RECK 123-0.25-0.04- 15 MG/50ML SOLN PRSYR	4	EX Plan Exclusion
LOCAL ANESTHETIC COMBINATIONS		
MARVONA SUIK 0.5 % KIT	4	EX Plan Exclusion
ACTIVE INJECTION LM-2 1 & 0.25 % KIT	4	EX Plan Exclusion
LIDOMAR 50-18.75 MG/5ML SOLUTION	4	EX Plan Exclusion
MARLIDO 2 & 0.5 % KIT	4	EX Plan Exclusion
MARLIDO-25 1 & 0.25 % KIT	4	EX Plan Exclusion
POINT OF CARE LM-2.2 1 & 0.25 % KIT	4	EX Plan Exclusion
POINT OF CARE LM-2.5 1 & 0.25 % KIT	4	EX Plan Exclusion
READYSHARP-A 1 & 0.5 % KIT	4	EX Plan Exclusion
LIDOCAINE-SODIUM BICARBONATE 1-8.4 % SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIDOCAINE HCL-TETRACAINE HCL 0.4-0.2 % SOLUTION	4	EX Plan Exclusion
LOCAL ANESTHETICS - AMIDES		
POSIMIR 660 MG/5ML SOLUTION	4	EX Plan Exclusion
BUPIVACAINE FISIOPHARMA 2.5 MG/ML SOLUTION	4	EX Plan Exclusion
BUPIVACAINE FISIOPHARMA 5 MG/ML SOLUTION	4	EX Plan Exclusion
BUPIVACAINE HCL 0.125 % (50 ML) SOLN PRSYR	4	EX Plan Exclusion
BUPIVACAINE HCL 0.125 % SOLUTION	4	EX Plan Exclusion
BUPIVACAINE HCL 0.25 % (10 ML) SOLN PRSYR	4	EX Plan Exclusion
<i>bupivacaine hcl inj 0.25%</i>	4	EX Plan Exclusion
BUPIVACAINE HCL 0.25 % SOLUTION	4	EX Plan Exclusion
<i>bupivacaine hcl inj 0.25%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl inj 0.5%</i>	4	EX Plan Exclusion
BUPIVACAINE HCL 0.5 % SOLUTION	4	EX Plan Exclusion
<i>bupivacaine hcl inj 0.5%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	4	EX Plan Exclusion
MARCAINE 0.25 % SOLUTION	4	EX Plan Exclusion
MARCAINE 0.5 % SOLUTION	4	EX Plan Exclusion
MARCAINE 0.75 % SOLUTION	4	EX Plan Exclusion
MARCAINE PRESERVATIVE FREE 0.25 % SOLUTION	4	EX Plan Exclusion
MARCAINE PRESERVATIVE FREE 0.5 % SOLUTION	4	EX Plan Exclusion
MARCAINE PRESERVATIVE FREE 0.75 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>bupivacaine hcl inj 0.25%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl inj 0.5%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.25%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.5%</i>	4	EX Plan Exclusion
<i>bupivacaine hcl preservative free (pf) inj 0.75%</i>	4	EX Plan Exclusion
XARACOLL 3 X 100 MG IMPLANT	4	EX Plan Exclusion
BUPIVACAINE HCL-NACL 0.125-0.9 % SOLUTION	4	EX Plan Exclusion
BUPIVACAINE HCL-NACL 0.25-0.9 % SOLN PRSYR	4	EX Plan Exclusion
<i>bupivacaine 0.75% in dextrose inj 8.25%</i>	4	EX Plan Exclusion
<i>bupivacaine 0.75% in dextrose inj 8.25%</i>	4	EX Plan Exclusion
MARCAINE SPINAL 0.75-8.25 % SOLUTION	4	EX Plan Exclusion
EXPAREL 1.3 % SUSPENSION	4	EX Plan Exclusion
LIDOCAINE HCL (BUFFERED) 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 0.5 MG J-INJ	4	EX Plan Exclusion
<i>lidocaine hcl local inj 0.5%</i>	4	EX Plan Exclusion
LIDOCAINE HCL 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 100 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 10 MG/ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 1 % SOLUTION	4	EX Plan Exclusion
<i>lidocaine hcl local inj 1%</i>	4	EX Plan Exclusion
LIDOCAINE HCL 200 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 2 % SOLUTION	4	EX Plan Exclusion
<i>lidocaine hcl local inj 2%</i>	4	EX Plan Exclusion
LIDOCAINE HCL 60 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL 9 MG/ML SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lidocaine hcl local preservative free (pf) inj 0.5%</i>	4	EX Plan Exclusion
<i>lidocaine hcl local preservative free (pf) inj 1.5%</i>	4	EX Plan Exclusion
<i>lidocaine hcl local preservative free (pf) inj 1%</i>	4	EX Plan Exclusion
<i>lidocaine hcl local preservative free (pf) inj 2%</i>	4	EX Plan Exclusion
<i>lidocaine hcl local preservative free (pf) inj 4%</i>	4	EX Plan Exclusion
LIDOMARK 1/5 1 % KIT	4	EX Plan Exclusion
LIDOMARK 2/5 2 % KIT	4	EX Plan Exclusion
MONOJECT BONE MARROW BIOPSY 1 % KIT	4	EX Plan Exclusion
READYSHARP LIDOCAINE 1 % KIT	4	EX Plan Exclusion
XYLOCAINE 0.5 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE 1 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE 2 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF 0.5 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF 1.5 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF 1 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF 2 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE MPF +RFID 1 % SOLUTION	4	EX Plan Exclusion
XYLOCAINE-MPF +RFID 2 % SOLUTION	4	EX Plan Exclusion
ZINGO 0.5 MG J-INJ	4	EX Plan Exclusion
CARBOCAINE 1 % SOLUTION	4	EX Plan Exclusion
POLOCAINE 1 % SOLUTION	4	EX Plan Exclusion
POLOCAINE 2 % SOLUTION	4	EX Plan Exclusion
POLOCAINE-MPF 1.5 % SOLUTION	4	EX Plan Exclusion
POLOCAINE-MPF 1 % SOLUTION	4	EX Plan Exclusion
POLOCAINE-MPF 2 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NAROPIN 10 MG/ML SOLUTION	4	EX Plan Exclusion
NAROPIN 2 MG/ML SOLUTION	4	EX Plan Exclusion
NAROPIN 5 MG/ML SOLUTION	4	EX Plan Exclusion
NAROPIN 7.5 MG/ML SOLUTION	4	EX Plan Exclusion
ROPIVACAINE HCL 0.2 % SOLUTION	4	EX Plan Exclusion
<i>ropivacaine hcl inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 10 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 2 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 2 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 5 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 5 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 7.5 mg/ml</i>	4	EX Plan Exclusion
<i>ropivacaine hcl inj 7.5 mg/ml</i>	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.1-0.9 % SOLUTION	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.15-0.9 % SOLUTION	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.2-0.9 % SOLN PRSYR	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.2-0.9 % SOLUTION	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.2-0.9 % SOLUTION	4	EX Plan Exclusion
ROPIVACAINE HCL-NAACL 0.5-0.9 % SOLN PRSYR	4	EX Plan Exclusion
LOCAL ANESTHETICS - ESTERS		
<i>chloroprocaine hcl preservative free (pf) inj 2%</i>	4	EX Plan Exclusion
<i>chloroprocaine hcl preservative free (pf) inj 3%</i>	4	EX Plan Exclusion
CLOTOTEKAL 50 MG/5ML SOLUTION	4	EX Plan Exclusion
NESACAINE 1 % SOLUTION	4	EX Plan Exclusion
NESACAINE 2 % SOLUTION	4	EX Plan Exclusion
NESACAINE-MPF 2 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NESACAINE-MPF 3 % SOLUTION	4	EX Plan Exclusion
TETRACAINE HCL 1 % SOLUTION	4	EX Plan Exclusion
<i>tetracaine hcl inj 1%</i>	4	EX Plan Exclusion
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin for susp 100 mg/5ml</i>	1	
<i>azithromycin for susp 200 mg/5ml</i>	1	
<i>azithromycin tab 250 mg</i>	1	
<i>azithromycin iv for soln 500 mg</i>	4	EX Plan Exclusion
<i>azithromycin iv for soln 500 mg</i>	4	EX Plan Exclusion
<i>azithromycin tab 500 mg</i>	1	
<i>azithromycin tab 600 mg</i>	1	
ZITHROMAX 500 MG RECON SOLN	4	EX Plan Exclusion
CLARITHROMYCIN		
CLARITHROMYCIN 125 MG/5ML RECON SUSP	1	
CLARITHROMYCIN 250 MG/5ML RECON SUSP	1	
<i>clarithromycin tab 250 mg</i>	1	
<i>clarithromycin tab 500 mg</i>	1	
<i>clarithromycin tab er 24hr 500 mg</i>	2	
ERYTHROMYCINS		
<i>erythromycin tab delayed release 250 mg</i>	1	
<i>erythromycin tab delayed release 333 mg</i>	1	
<i>erythromycin tab delayed release 500 mg</i>	1	
<i>erythromycin tab delayed release 250 mg</i>	1	
<i>erythromycin tab delayed release 333 mg</i>	1	
<i>erythromycin tab delayed release 500 mg</i>	1	
ERYTHROMYCIN BASE 250 MG CP DR PART	1	
<i>erythromycin tab 250 mg</i>	1	
<i>erythromycin tab delayed release 250 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>erythromycin tab delayed release 333 mg</i>	1	
<i>erythromycin tab 500 mg</i>	1	
<i>erythromycin tab delayed release 500 mg</i>	1	
E.E.S. 400 400 MG TAB	1	
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	
E.E.S. GRANULES 200 MG/5ML RECON SUSP	3	
ERYPED 200 200 MG/5ML RECON SUSP	3	
ERYPED 400 400 MG/5ML RECON SUSP	3	
<i>erythromycin ethylsuccinate for susp 200 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate for susp 400 mg/5ml</i>	1	
<i>erythromycin ethylsuccinate tab 400 mg</i>	1	
ERYTHROCIN LACTOBIONATE 500 MG RECON SOLN	4	EX Plan Exclusion
<i>erythromycin lactobionate for inj 500 mg</i>	4	EX Plan Exclusion
<i>erythromycin lactobionate for inj 500 mg</i>	4	EX Plan Exclusion
ERYTHROCIN STEARATE 250 MG TAB	1	
FIDAXOMICIN		
DIFICID 200 MG TAB	3	PA
DIFICID 40 MG/ML RECON SUSP	3	PA
<i>fidaxomicin tab 200 mg</i>	1	PA
MEDICAL DEVICES AND SUPPLIES		
ADHESIVE BANDAGES		
CURITY WOUND CLOSURE 1/2"X4" MISC	4	EX Plan Exclusion
CURITY WOUND CLOSURE 1/4"X1.5" MISC	4	EX Plan Exclusion
CURITY WOUND CLOSURE 1/4"X3" MISC	4	EX Plan Exclusion
CURITY WOUND CLOSURE 1/4"X4" MISC	4	EX Plan Exclusion
CURITY WOUND CLOSURE 1/8"X3" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
APPLICATORS,COTTON BALLS,ETC		
ALCOH-WIPE SHEET	4	EX Plan Exclusion
ESSENTRA WIPES 9X9" 70 % SHEET	4	EX Plan Exclusion
ALCOH-GLOVE CONTOURED WIPE PAD	4	EX Plan Exclusion
BLOOD COAGULATION TEST SUPPLIES		
COAGUCHEK XS SYSTEM KIT	4	EX Plan Exclusion
BLOOD PRESSURE DEVICES		
KENDALL SCD EXPRESS FOOT CUFF MISC	4	EX Plan Exclusion
CATHETERS		
APOGEE HC CATHETER 10FR/10" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 10FR/6" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 12FR/16" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 12FR/6" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 14FR/16" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 14FR/6" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 16FR/16" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 18FR/16" MISC	4	EX Plan Exclusion
APOGEE HC CATHETER 8FR/10" MISC	4	EX Plan Exclusion
APOGEE IC CATHETER 14FR/16" MISC	4	EX Plan Exclusion
APOGEE IC CATHETER 14FR/6" MISC	4	EX Plan Exclusion
APOGEE PLUS INTERMITTENT CATH KIT	4	EX Plan Exclusion
BARD CLEAN-CATH MISC	4	EX Plan Exclusion
BARDEX I.C. FOLEY CATH 14FR MISC	4	EX Plan Exclusion
BARD URETHRAL CATHETER 16" MISC	4	EX Plan Exclusion
BD HYDROPHILIC CATHETER 14FR MISC	4	EX Plan Exclusion
DOVER CLOSED URETHRAL TRAY KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOVER ELASTOMER FOLEY CATHETER MISC	4	EX Plan Exclusion
DOVER FOLEY INSERTION TRAY MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 12FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 14FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 16FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 18FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 20FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 22FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 24FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 26FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 28FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH 30FR MISC	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY CATH KIT KIT	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY TRAY 14FR KIT	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY TRAY 16FR KIT	4	EX Plan Exclusion
DOVER HYDROGEL FOLEY TRAY 18FR KIT	4	EX Plan Exclusion
DOVER HYDROGEL INSERTION TRAY MISC	4	EX Plan Exclusion
DOVER OPEN URETHRAL TRAY 14FR KIT	4	EX Plan Exclusion
DOVER PVC URETHRAL CATH 10FR MISC	4	EX Plan Exclusion
DOVER PVC URETHRAL CATH 12FR MISC	4	EX Plan Exclusion
DOVER PVC URETHRAL CATH 14FR MISC	4	EX Plan Exclusion
DOVER PVC URETHRAL CATH 16FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 14FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 16FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 18FR MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOVER SILICONE FOLEY CATH 20FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 22FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 24FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 26FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATH 28FR MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATHETER KIT	4	EX Plan Exclusion
DOVER SILICONE FOLEY CATHETER MISC	4	EX Plan Exclusion
DOVER SILICONE FOLEY TRAY 18FR KIT	4	EX Plan Exclusion
DOVER SILICONE/LATEX CATHETER MISC	4	EX Plan Exclusion
DOVER SILICONE URINE METER KIT	4	EX Plan Exclusion
DOVER UNI CATHETERIZATION TRAY KIT	4	EX Plan Exclusion
DOVER UNIVERSAL TRAY KIT	4	EX Plan Exclusion
DOVER URETHRAL CATHETER MISC	4	EX Plan Exclusion
DOVER URETHRAL PVC CATH 18FR MISC	4	EX Plan Exclusion
DOVER URETHRAL UNIVERSAL TRAY KIT	4	EX Plan Exclusion
DOVER VINYL CATHETER 14FR KIT	4	EX Plan Exclusion
DOVER VINYL URETHRAL CATH 14FR MISC	4	EX Plan Exclusion
DOVER VINYL URETHRAL CATH 16FR MISC	4	EX Plan Exclusion
DOVER VINYL URETHRAL CATH 8FR MISC	4	EX Plan Exclusion
FOLEY CATHETER 2-WAY MISC	4	EX Plan Exclusion
INTERMITTENT 14FR/40CM MISC	4	EX Plan Exclusion
LOFRIC COUDE URINARY CATHETER MISC	4	EX Plan Exclusion
LOFRIC NELATON PAEDIATRIC CATH MISC	4	EX Plan Exclusion
LOFRIC NELATON URINARY CATH MISC	4	EX Plan Exclusion
LOFRIC ORIGO NELATON CATHETER MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOFRIC ORIGO PAED CATHETER MISC	4	EX Plan Exclusion
LOFRIC ORIGO URINARY CATHETER MISC	4	EX Plan Exclusion
LOFRIC PRIMO NELATON CATHETER MISC	4	EX Plan Exclusion
POP-ON INTERMEDIATE MALE CATH MISC	4	EX Plan Exclusion
PRECISION 400 CATH TRAY KIT	4	EX Plan Exclusion
RUSCH FLOCATH QUICK 16FR MISC	4	EX Plan Exclusion
RUSCH MMG CATHETER SYSTEM MISC	4	EX Plan Exclusion
RUSCH TIEMANN PVC CATHETER MISC	4	EX Plan Exclusion
VAPRO PLUS CATHETER 12FR/16" MISC	4	EX Plan Exclusion
VAPRO PLUS CATHETER 12FR/8" MISC	4	EX Plan Exclusion
VAPRO PLUS CATHETER 14FR/16" MISC	4	EX Plan Exclusion
VAPRO PLUS CATHETER 14FR/8" MISC	4	EX Plan Exclusion
CERVICAL CAPS		
FEMCAP 22 MM DEVICE	3	
FEMCAP 26 MM DEVICE	3	
FEMCAP 30 MM DEVICE	3	
CONCEPTION ASSISTANCE SUPPLIES		
CONCEPTION KIT KIT	4	EX Plan Exclusion
DENTAL DESENSITIZING PRODUCTS		
REMESENSE 3 % MISC	4	EX Plan Exclusion
DENTAL SUPPLIES		
DENTAL NEEDLE 25G X 21MM MISC	4	EX Plan Exclusion
DENTAL NEEDLE 25G X 32MM MISC	4	EX Plan Exclusion
DENTAL NEEDLE 27G X 21MM MISC	4	EX Plan Exclusion
DENTAL NEEDLE 27G X 32MM MISC	4	EX Plan Exclusion
DENTAL NEEDLE 30G X 12MM MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DENTAL NEEDLE 30G X 21MM MISC	4	EX Plan Exclusion
DENTAL NEEDLE 30G X 32MM MISC	4	EX Plan Exclusion
DENTIFRICES		
MI PASTE PASTE	4	EX Plan Exclusion
MI PASTE PLUS PASTE	4	EX Plan Exclusion
DIAPHRAGMS		
CAYA DIAPHRAGM	2	
OMNIFLEX DIAPHRAGM DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 60 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 65 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 70 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 75 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 80 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 85 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 90 2 % DIAPHRAGM	3	
WIDE-SEAL DIAPHRAGM 95 2 % DIAPHRAGM	3	
DIGESTIVE ENZYME CARTRIDGE		
RELIZORB DEVICE	4	EX Plan Exclusion
DISPOSABLE GLOVES		
CHEMOPLUS LATEX GLOVES MISC	4	EX Plan Exclusion
CHEMOPLUS NEOPRENE GLOVE MISC	4	EX Plan Exclusion
CHEMOPLUS NITRILE GLOVES MISC	4	EX Plan Exclusion
LATEX GLOVES MEDIUM MISC	4	EX Plan Exclusion
NITRILE GLOVES LARGE MISC	4	EX Plan Exclusion
NITRILE GLOVES MEDIUM MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 10 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 6.5 MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NITRILE GLOVES/SIZE 6 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 7.5 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 7 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 8.5 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 8 MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 9.5 MEDIUM MISC	4	EX Plan Exclusion
NITRILE GLOVES/SIZE 9 MISC	4	EX Plan Exclusion
NITRILE GLOVES SMALL MISC	4	EX Plan Exclusion
NITRILE GLOVES X-LARGE MISC	4	EX Plan Exclusion
POWDER FREE NITRILE GLOVES SM MISC	4	EX Plan Exclusion
SAFE-SENSE GLOVE-BLUE-NITRL-L MISC	4	EX Plan Exclusion
SAFE-SENSE GLOVE-BLUE-NITRL-M MISC	4	EX Plan Exclusion
SAFE-SENSE GLOVE-BLUE-NITRL-S MISC	4	EX Plan Exclusion
SAFE-SENSE GLOVE-BLUE-NITRL-XL MISC	4	EX Plan Exclusion
ELASTIC BANDAGES & SUPPORTS		
COTTON SOCKS/CUSHIONED MISC	4	EX Plan Exclusion
COTTON THIGH-HIGH MISC	4	EX Plan Exclusion
EVERSHEER PANTYHOSE MISC	4	EX Plan Exclusion
EVERSHEER STOCKINGS MISC	4	EX Plan Exclusion
EVERSHEER THIGH HIGH MISC	4	EX Plan Exclusion
MEDICAL COMPRESSION PANTYHOSE MISC	4	EX Plan Exclusion
MEDICAL COMPRESSION SOCKS MISC	4	EX Plan Exclusion
MEDICAL COMPRESSION STOCKINGS MISC	4	EX Plan Exclusion
MEDICAL COMPRESSION THIGH HIGH MISC	4	EX Plan Exclusion
MEDICAL LEGWEAR/WAIST HIGH MISC	4	EX Plan Exclusion
MEDICAL THERAPY SOCKS MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NATURAL RUBBER PANTYHOSE MISC	4	EX Plan Exclusion
NATURAL RUBBER STOCKINGS MISC	4	EX Plan Exclusion
PERFORMANCE SOCKS MISC	4	EX Plan Exclusion
PRO COMFORT LUMB SPIN ORTHOSIS MISC	4	EX Plan Exclusion
SELECT COMFORT PANTYHOSE MISC	4	EX Plan Exclusion
SELECT COMFORT SOCKS MISC	4	EX Plan Exclusion
SELECT COMFORT THIGH HIGH MISC	4	EX Plan Exclusion
SKINEEZ TED STOCKINGS MISC	4	EX Plan Exclusion
T.E.D. ANTI-EMBOLISM STOCKINGS MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/L-LONG MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/M-REGULAR MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/S-LONG MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/XL-LONG MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/XL-REGULAR MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/XS-LONG MISC	4	EX Plan Exclusion
T.E.D. BELTED THIGH/XS-REGULAR MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/LARGE MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/L-LONG MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/L-REGULAR MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/M-LONG MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/M-REGULAR MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/S-LONG MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/S-REGULAR MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/XL-LONG MISC	4	EX Plan Exclusion
T.E.D. KNEE LENGTH/XL-REGULAR MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
T.E.D. THIGH LENGTH/L-LONG MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/L-REGULAR MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/L-SHORT MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/M-LONG MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/M-REGULAR MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/M-SHORT MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/S-LONG MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/S-REGULAR MISC	4	EX Plan Exclusion
T.E.D. THIGH LENGTH/S-SHORT MISC	4	EX Plan Exclusion
TRULY TRANSPARENT PANTYHOSE MISC	4	EX Plan Exclusion
TRULY TRANSPARENT STOCKINGS MISC	4	EX Plan Exclusion
TRULY TRANSPARENT THIGH HIGH MISC	4	EX Plan Exclusion
EMBOLIZATION SUPPLIES		
ONCOZENE 100 MICROMETER (2 ML) PRSYR	4	EX Plan Exclusion
ONCOZENE 100 MICROMETER (3 ML) PRSYR	4	EX Plan Exclusion
ONCOZENE 40 MICROMETER (2 ML) PRSYR	4	EX Plan Exclusion
ONCOZENE 40 MICROMETER (3 ML) PRSYR	4	EX Plan Exclusion
ONCOZENE 75 MICROMETER (2 ML) PRSYR	4	EX Plan Exclusion
ONCOZENE 75 MICROMETER (3 ML) PRSYR	4	EX Plan Exclusion
ENTERAL NUTRITION SUPPLIES		
BARD PISTON ENT IRRIGATION SYR MISC	4	EX Plan Exclusion
ENFIT AMBER LOW DOSE SYR/0.5ML MISC	4	EX Plan Exclusion
ENFIT AMBER LOW DOSE SYR/1ML MISC	4	EX Plan Exclusion
ENFIT AMBER LOW DOSE SYR/3ML MISC	4	EX Plan Exclusion
ENFIT AMBER SYRINGE/10ML MISC	4	EX Plan Exclusion
ENFIT AMBER SYRINGE/20ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENFIT AMBER SYRINGE/35ML MISC	4	EX Plan Exclusion
ENFIT AMBER SYRINGE/60ML MISC	4	EX Plan Exclusion
ENFIT AMBER TIP SYRINGE/5ML MISC	4	EX Plan Exclusion
ENFIT CAP MISC	4	EX Plan Exclusion
ENFIT IRRIGATION KIT MISC	4	EX Plan Exclusion
ENFIT IRRIGATION SYR/THUMB CNT MISC	4	EX Plan Exclusion
ENFIT LOW DOSE TIP SYRINGE/1ML MISC	4	EX Plan Exclusion
ENFIT LOW DOSE TIP SYRINGE/3ML MISC	4	EX Plan Exclusion
ENFIT LOW DOSE TIP SYRINGE MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 1 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 2 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 3 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 4 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 5 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 6 MISC	4	EX Plan Exclusion
ENFIT MED BOTTLE ADAPTER/SZ 7 MISC	4	EX Plan Exclusion
ENFIT MEDICINE STRAW/2"/5CM MISC	4	EX Plan Exclusion
ENFIT MEDICINE STRAW/4"/10CM MISC	4	EX Plan Exclusion
ENFIT MEDICINE STRAW/6"/15CM MISC	4	EX Plan Exclusion
ENFIT POP ON CAP MISC	4	EX Plan Exclusion
ENFIT SCREW ON CAP MISC	4	EX Plan Exclusion
ENFIT SYRINGE/10ML MISC	4	EX Plan Exclusion
ENFIT SYRINGE/20ML MISC	4	EX Plan Exclusion
ENFIT SYRINGE/35ML MISC	4	EX Plan Exclusion
ENFIT SYRINGE/60ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENFIT TIP SYRINGE/10ML MISC	4	EX Plan Exclusion
ENFIT TIP SYRINGE/20ML MISC	4	EX Plan Exclusion
ENFIT TIP SYRINGE/35ML MISC	4	EX Plan Exclusion
ENFIT TIP SYRINGE/5ML MISC	4	EX Plan Exclusion
ENFIT TIP SYRINGE/60ML MISC	4	EX Plan Exclusion
ENFIT TRANSITION CONNECTOR MISC	4	EX Plan Exclusion
ENTERAL DELIVERY GRAVITY BAG MISC	4	EX Plan Exclusion
KANGAROO STOMA MEASURING DEV MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE/12ML MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE/1ML MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE/35ML MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE/60ML MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE/6ML MISC	4	EX Plan Exclusion
MONOJECT ENTERAL SYRINGE CAP MISC	4	EX Plan Exclusion
PISTON IRRIGATION SYRINGE MISC	4	EX Plan Exclusion
FEEDING TUBES		
ENTRISTAR PEG ENTERAL CONNECT MISC	4	EX Plan Exclusion
KANGAROO MULTI-FUNCTIONAL PORT MISC	4	EX Plan Exclusion
KANGAROO GRAVITY FEEDING BAG MISC	4	EX Plan Exclusion
KANGAROO JOEY ENTERAL PUMP MISC	4	EX Plan Exclusion
KANGAROO JOEY PUMP SET MISC	4	EX Plan Exclusion
ENTRISTAR/NUTRIPORT BOLUS FEED MISC	4	EX Plan Exclusion
ENTRISTAR/NUTRIPORT CONTINUOUS MISC	4	EX Plan Exclusion
ENTRISTAR SAFETY PEG KIT 16FR MISC	4	EX Plan Exclusion
ENTRISTAR SAFETY PEG KIT 20FR MISC	4	EX Plan Exclusion
KANGAROO 924 SAFETY SCREW SET MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO BALLOON 20FR/3.5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/3CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/4.5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/4CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/0.8CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/1.2CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/1.5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/1.7CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/1CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/2.3CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/2.5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/2.7CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/2CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/3.5CM MISC	4	EX Plan Exclusion
KANGAROO BALLOON 24FR/3CM MISC	4	EX Plan Exclusion
KANGAROO ENTRIFLUSH PUMP SET MISC	4	EX Plan Exclusion
KANGAROO EPUMP JOEY BURETTE MISC	4	EX Plan Exclusion
KANGAROO EPUMP PROXIMAL SET MISC	4	EX Plan Exclusion
KANGAROO EPUMP PUMP SET/1000ML MISC	4	EX Plan Exclusion
KANGAROO EPUMP PUMP SET/100ML MISC	4	EX Plan Exclusion
KANGAROO EPUMP SET 1000ML MISC	4	EX Plan Exclusion
KANGAROO EPUMP SET 500ML MISC	4	EX Plan Exclusion
KANGAROO FEEDING SET/ENFIT MISC	4	EX Plan Exclusion
KANGAROO FEED/IRRIGATION KIT MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO GRAVITY FEEDING SET MISC	4	EX Plan Exclusion
KANGAROO JOEY PUMP SET/500ML MISC	4	EX Plan Exclusion
KANGAROO PROXIMAL SPIKE SET MISC	4	EX Plan Exclusion
KANGAROO PUMP SET 1600ML MISC	4	EX Plan Exclusion
KANGAROO PUMP SET EXT TUBING MISC	4	EX Plan Exclusion
KANGAROO RIGID CONTAINER PUMP MISC	4	EX Plan Exclusion
KANGAROO SAFETY PEG KIT 16FR MISC	4	EX Plan Exclusion
KANGAROO SAFETY PEG KIT 20FR MISC	4	EX Plan Exclusion
PATROL PUMP SET/40MM SCREW CAP MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 14FR/5ML MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 16FR/10ML MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 18FR/15ML MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 20FR/15ML MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 22FR/15ML MISC	4	EX Plan Exclusion
COMPAT GASTROTUBE 24FR/15ML MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TB 10FR/43" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TB 10FR/55" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TB 12FR/36" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TB 12FR/43" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TB 12FR/55" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TUBE 8FR/36" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TUBE 8FR/43" MISC	4	EX Plan Exclusion
ENTRIFLEX FEEDING TUBE 8FR/55" MISC	4	EX Plan Exclusion
KANGAROO EXTENSION SET MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 10FR/36" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO FEEDING TUBE 10FR/43" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 12FR/36" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 12FR/43" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 14FR/36" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 6FR/20" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 6FR/36" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 8FR/36" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 8FR/42" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 8FR/43" MISC	4	EX Plan Exclusion
KANGAROO FEEDING TUBE 8FR/55" MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/12FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/14FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/16FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/18FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/20FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/22FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/24FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/26FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE/28FR MISC	4	EX Plan Exclusion
KANGAROO GASTROSTOMY TUBE MISC	4	EX Plan Exclusion
KANGAROO JEJUNAL FEED TUBE 9FR MISC	4	EX Plan Exclusion
KANGAROO NASO-JEJUNAL TB 12FR MISC	4	EX Plan Exclusion
KANGAROO NASO-JEJUNAL TB 16FR MISC	4	EX Plan Exclusion
KANGAROO PED NG STYLET 20" MISC	4	EX Plan Exclusion
KANGAROO PED NG STYLET 36" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO Y-SITE EXTENSION MISC	4	EX Plan Exclusion
SALEM SUMP SILICONE TUBE 10FR MISC	4	EX Plan Exclusion
SALEM SUMP SILICONE TUBE 12FR MISC	4	EX Plan Exclusion
SALEM SUMP SILICONE TUBE 14FR MISC	4	EX Plan Exclusion
SALEM SUMP SILICONE TUBE 16FR MISC	4	EX Plan Exclusion
SALEM SUMP SILICONE TUBE 18FR MISC	4	EX Plan Exclusion
SALEM SUMP TUBE 10FR MISC	4	EX Plan Exclusion
SALEM SUMP TUBE 12FR MISC	4	EX Plan Exclusion
SALEM SUMP TUBE 14FR MISC	4	EX Plan Exclusion
SALEM SUMP TUBE 16FR MISC	4	EX Plan Exclusion
SALEM SUMP TUBE 18FR MISC	4	EX Plan Exclusion
FOOT CARE PRODUCTS		
BIOFREQUENCY INSOLES MISC	4	EX Plan Exclusion
GAUZE PADS & DRESSINGS		
AMD FOAM DRESSING 3-1/2"X3" PAD	4	EX Plan Exclusion
AMD FOAM DRESSING 4"X4" PAD	4	EX Plan Exclusion
AMD FOAM DRESSING 6"X6" PAD	4	EX Plan Exclusion
AMD FOAM DRESSING TOPSHEET 4"X4" PAD	4	EX Plan Exclusion
BIOGUARD GAUZE SPONGES 2"X2" PAD	4	EX Plan Exclusion
BIOGUARD GAUZE SPONGES 4"X4" PAD	4	EX Plan Exclusion
BIOGUARD ISLAND DRESSINGS 4"X10" PAD	4	EX Plan Exclusion
BIOGUARD ISLAND DRESSINGS 4"X14" PAD	4	EX Plan Exclusion
BIOGUARD ISLAND DRESSINGS 4"X5" PAD	4	EX Plan Exclusion
BIOGUARD NON-ADHERENT DRESSING 3"X4" PAD	4	EX Plan Exclusion
BIOGUARD NON-ADHERENT DRESSING 3"X8" PAD	4	EX Plan Exclusion
CURITY AMD ANTIMICROBIAL SPNGE 4"X4" PAD	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CURITY AMD ANTIMICROBIAL STRIP MISC	4	EX Plan Exclusion
CURITY IODOFORM PACKING STRIP MISC	4	EX Plan Exclusion
EXCILON AMD DRAIN SPONGES 4"X4" PAD	4	EX Plan Exclusion
KERLIX AMD ANTIMICROBIAL MISC	4	EX Plan Exclusion
KERLIX AMD SUPER SPONGES 6"X6-3/4" PAD	4	EX Plan Exclusion
TELFAX AMD ISLAND DRESSING 4"X5" PAD	4	EX Plan Exclusion
TELFAX AMD ISLAND DRESSING 4"X8" PAD	4	EX Plan Exclusion
TELFAX AMD NON-ADHERENT 3"X8" PAD	4	EX Plan Exclusion
GLUCOSE MONITORING TEST SUPPLIES		
BLUESTAR DEVICE	4	EX Plan Exclusion
BIGFOOT UNITY PROGRAM KIT	4	QL EX Plan Exclusion
D-CARE GLUCOMETER W/DEVICE KIT	4	QL EX Plan Exclusion
TEMPO SMART BUTTON MISC	4	QL EX Plan Exclusion
TEMPO WELCOME W/DEVICE KIT	4	QL EX Plan Exclusion
GUARDIAN REAL-TIME CHARGER MISC	4	PA EX Plan Exclusion
GUARDIAN REAL-TIME TEST PLUG MISC	4	PA EX Plan Exclusion
DEXCOM G5 RECEIVER KIT DEVICE	2	QL PA
DEXCOM G6 RECEIVER DEVICE	2	QL PA
DEXCOM G7 RECEIVER DEVICE	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FREESTYLE LIBRE 14 DAY READER DEVICE	2	QL PA
FREESTYLE LIBRE 2 READER DEVICE	2	QL PA
FREESTYLE LIBRE 3 READER DEVICE	2	QL PA
FREESTYLE LIBRE READER DEVICE	2	QL PA
GUARDIAN REAL-TIME REPLACE PED DEVICE	3	QL PA
ENLITE GLUCOSE SENSOR MISC	3	PA
FREESTYLE LIBRE 2 SENSOR MISC	2	QL PA
GUARDIAN 4 GLUCOSE SENSOR MISC	3	QL PA
GUARDIAN SENSOR (3) MISC	3	QL PA
GUARDIAN SENSOR 3 MISC	3	QL PA
DEXCOM G6 TRANSMITTER MISC	2	QL PA
GUARDIAN 4 TRANSMITTER MISC	3	QL PA
GUARDIAN CONNECT TRANSMITTER MISC	3	QL PA
GUARDIAN LINK 3 TRANSMITTER MISC	3	QL PA
DEXCOM G6 SENSOR MISC	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEXCOM G7 15 DAY SENSOR MISC	2	QL
DEXCOM G7 SENSOR MISC	2	QL PA
FREESTYLE LIBRE 14 DAY SENSOR MISC	2	QL PA
FREESTYLE LIBRE 2 PLUS SENSOR MISC	2	QL PA
FREESTYLE LIBRE 3 PLUS SENSOR MISC	2	QL PA
FREESTYLE LIBRE 3 SENSOR MISC	2	QL PA
SIMPLERA SENSOR MISC	3	QL PA
SIMPLERA SYNC SENSOR MISC	3	QL PA
SIMPLERA SYSTEM MISC	3	QL PA
GUARDIAN CONNECT TRANSMITTER MISC	3	QL PA
BD MICROTAINER LANCETS MISC	3	QL
IMPOTENCE AIDS - MALE		
RAPPORT RLS KIT	4	EX Plan Exclusion
RAPPORT VTD KIT	4	EX Plan Exclusion
INCONTINENCE SUPPLIES		
BARDIA LEG BAG MISC	4	EX Plan Exclusion
BARD URINARY DRAINAGE BAG MISC	4	EX Plan Exclusion
DOVER ADVANTAGE URINE METER MISC	4	EX Plan Exclusion
DOVER UNIVERSAL CATH PREP TRAY MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOVER URINE DRAINAGE BAG MISC	4	EX Plan Exclusion
DOVER URINE LEG BAG/EXT TUBE MISC	4	EX Plan Exclusion
DOVER URINE LEG BAG MISC	4	EX Plan Exclusion
URESTA STARTER KIT MISC	4	EX Plan Exclusion
YONI FIT BLADDER SUPPORT KIT 1 DEVICE	4	EX Plan Exclusion
YONI FIT BLADDER SUPPORT KIT 2 DEVICE	4	EX Plan Exclusion
YONI FIT BLADDER SUPPORT KIT 3 DEVICE	4	EX Plan Exclusion
YONI FIT BLADDER SUPPORT KIT 4 DEVICE	4	EX Plan Exclusion
YONI FIT BLADDER SUPPORT KIT 5 DEVICE	4	EX Plan Exclusion
INSULIN ADMINISTRATION SUPPLIES		
BIGFOOT UNITY PEN CAP/ADMELOG MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/APIDRA MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/ASPART MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/BASAGLAR MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/FIASP MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/HUMALOG MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/LANTUS MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/LISPRO MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/LYUMJEV MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/NOVOLOG MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/TOUJEO MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/TOUJEO M MISC	4	EX Plan Exclusion
BIGFOOT UNITY PEN CAP/TRESIBA MISC	4	EX Plan Exclusion
MODD1 PATIENT WELCOME KIT KIT	2	PA
MODD1 SUPPLY KIT KIT	2	PA
OMNIPOD 5 DEXG7G6 PODS GEN 5 MISC	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNIPOD 5 G6 INTRO (GEN 5) KIT	2	PA
OMNIPOD 5 G6 PODS (GEN 5) MISC	2	PA
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA
OMNIPOD 5 G7 PODS (GEN 5) MISC	2	PA
OMNIPOD 5 LIBRE2 G6 INTRO G5 KIT	2	PA
OMNIPOD 5 LIBRE2 PLUS G6 PODS MISC	2	PA
OMNIPOD CLASSIC PDM (GEN 3) KIT	2	PA
OMNIPOD CLASSIC PODS (GEN 3) MISC	2	PA
OMNIPOD DASH INTRO (GEN 4) KIT	2	PA
OMNIPOD DASH PDM (GEN 4) KIT	2	PA
OMNIPOD DASH PODS (GEN 4) MISC	2	PA
OMNIPOD GO 10 UNIT/24HR KIT	2	PA
OMNIPOD GO 15 UNIT/24HR KIT	2	PA
OMNIPOD GO 20 UNIT/24HR KIT	2	PA
OMNIPOD GO 25 UNIT/24HR KIT	2	PA
OMNIPOD GO 30 UNIT/24HR KIT	2	PA
OMNIPOD GO 35 UNIT/24HR KIT	2	PA
OMNIPOD GO 40 UNIT/24HR KIT	2	PA
TWIIST REFILL KIT/INFUSION SET KIT	2	PA
TWIIST REFILL KIT KIT	2	PA
TWIIST STARTER KIT KIT	2	PA
V-GO 20 20 UNIT/24HR KIT	2	PA
V-GO 30 30 UNIT/24HR KIT	2	PA
V-GO 40 40 UNIT/24HR KIT	2	PA
AMIGO INSULIN PUMP DEVICE	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ILET INSULIN PUMP DEVICE	4	PA EX Plan Exclusion
MINIMED 630G INSULIN PUMP KIT	4	EX Plan Exclusion
MINIMED 670G INSULIN PUMP DEVICE	4	PA EX Plan Exclusion
MINIMED 770G INSULIN PUMP SYS KIT	4	EX Plan Exclusion
MINIMED 780G INSULIN PUMP KIT	4	EX Plan Exclusion
TANDEM MOBI SYSTEM STARTER KIT	4	EX Plan Exclusion
T:SLIM X2 BASAL-IQ PUMP DEVICE	4	PA EX Plan Exclusion
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVICE	4	PA EX Plan Exclusion
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVICE	4	PA EX Plan Exclusion
T:SLIM X2 CONTROL-IQ PUMP DEVICE	4	PA EX Plan Exclusion
T: SLIM X2 INS PMP/CONTROL 7.4 DEVICE	4	PA EX Plan Exclusion
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	4	PA EX Plan Exclusion
T:SLIM X2 INSULIN PUMP DEVICE	4	PA EX Plan Exclusion
ACCU-CHEK LINKASSIST MISC	4	EX Plan Exclusion
ACCU-CHEK PLASTIC CARTRIDGE MISC	4	EX Plan Exclusion
ACCU-CHEK SPIRIT CARTRIDGE MISC	4	EX Plan Exclusion
ACCU-CHEK TENDER I SET 24" MISC	4	EX Plan Exclusion
ACCU-CHEK TENDER I SET 31" MISC	4	EX Plan Exclusion
ACCU-CHEK ULTRAFLEX-1 INF SET MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ACCU-CHEK ULTRAFLEX INF SET MISC	4	EX Plan Exclusion
AUTOSOFT 30 INFUSION SET MISC	4	EX Plan Exclusion
AUTOSOFT 90 INFUSION SET MISC	4	EX Plan Exclusion
AUTOSOFT XC INFUSION SET MISC	4	EX Plan Exclusion
ENLITE SERTER MISC	4	PA EX Plan Exclusion
EXTENDED INFUSION SET 23"/6MM MISC	4	EX Plan Exclusion
EXTENDED INFUSION SET 23"/9MM MISC	4	EX Plan Exclusion
EXTENDED INFUSION SET 32"/6MM MISC	4	EX Plan Exclusion
EXTENDED INFUSION SET 32"/9MM MISC	4	EX Plan Exclusion
EXTENDED RESERVOIR 3ML MISC	4	EX Plan Exclusion
GLUCOPRO SYR RES 3ML 22GX3/8" MISC	4	EX Plan Exclusion
ILET CONTACT DETACH 23" 6MM MISC	4	PA EX Plan Exclusion
ILET INFUSION-INSET 23" 6MM MISC	4	PA EX Plan Exclusion
ILET INFUSION-INSET 32" 6MM MISC	4	PA EX Plan Exclusion
ILET STARTER - CONTACT DETACH MISC	4	PA EX Plan Exclusion
ILET STARTER KIT - INSET 23" MISC	4	PA EX Plan Exclusion
ILET STARTER KIT - INSET 32" MISC	4	PA EX Plan Exclusion
MINIMED MIO ADVANCE INFUSE SET MISC	4	EX Plan Exclusion
MINIMED PUMP RESERVOIR 3ML MISC	4	EX Plan Exclusion
MINIMED QUICK SET INF SET 18" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MINIMED QUICK SET INF SET 23" MISC	4	EX Plan Exclusion
MINIMED QUICK SET INF SET 32" MISC	4	EX Plan Exclusion
MINIMED QUICK SET INF SET 43" MISC	4	EX Plan Exclusion
MINIMED RESERVOIR 1.8ML MISC	4	EX Plan Exclusion
MINIMED RESERVOIR 3ML MISC	4	EX Plan Exclusion
MINIMED SILHOUETTE INF SET 32" MISC	4	EX Plan Exclusion
MINIMED SILHOUETTE INF SET 43" MISC	4	EX Plan Exclusion
MIO INFUSION SET 18" 6MM MISC	4	EX Plan Exclusion
MIO INFUSION SET 23" 6MM MISC	4	EX Plan Exclusion
MIO INFUSION SET 32" 6MM MISC	4	EX Plan Exclusion
MIO INFUSION SET 32" 9MM MISC	4	EX Plan Exclusion
MOBI 2ML CARTRIDGE MISC	4	EX Plan Exclusion
PARADIGM SILHOUETTE COMBO 23" MISC	4	EX Plan Exclusion
PARADIGM SILHOUETTE COMBO 43" MISC	4	EX Plan Exclusion
SILHOUETTE 23" INFUSION SET MISC	4	EX Plan Exclusion
SILHOUETTE 43" INFUSION SET MISC	4	EX Plan Exclusion
SILHOUETTE INFUSION SET 18" MISC	4	EX Plan Exclusion
SURE T INFUSION SET 18"/6MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 23"/10MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 23"/6MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 23"/8MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 32"/10MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 32"/6MM MISC	4	EX Plan Exclusion
SURE T INFUSION SET 32"/8MM MISC	4	EX Plan Exclusion
TANDEM MOBI AUTOSOFT30 14PK23" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TANDEM MOBI AUTOSOFT 30 KIT MISC	4	EX Plan Exclusion
TANDEM MOBI AUTOSOFTXC 14PK23" MISC	4	EX Plan Exclusion
TANDEM MOBI AUTOSOFTXC 14PK5" MISC	4	EX Plan Exclusion
TANDEM MOBI AUTOSOFT XC KIT MISC	4	EX Plan Exclusion
TANDEM MOBI CARTRIDGE 2ML MISC	4	PA EX Plan Exclusion
TANDEM MOBI TRUSTEEL SUPP KIT MISC	4	EX Plan Exclusion
TANDEM T:SLIM ASFT 30 PK10 23" MISC	4	EX Plan Exclusion
TANDEM T:SLIM ASFT 30 PK14 23" MISC	4	EX Plan Exclusion
TANDEM T:SLIM ASFT XC PK10 23" MISC	4	EX Plan Exclusion
TANDEM T:SLIM ASFT XC PK14 23" MISC	4	EX Plan Exclusion
TANDEM T:SLIM TRUSTL PK10 23" MISC	4	EX Plan Exclusion
T:FLEX T:LOCK CARTRIDGE 4.8ML MISC	4	EX Plan Exclusion
TRUSTEEL INFUSION SET MISC	4	EX Plan Exclusion
T:SLIM X2 3ML CARTRIDGE MISC	4	EX Plan Exclusion
T:SLIM X2/BASAL-IQ/ACC/INSTR MISC	4	PA EX Plan Exclusion
T:SLIM X2/CONTROL-IQ/ACC/INSTR MISC	4	PA EX Plan Exclusion
VARISOFT INFUSION SET MISC	4	EX Plan Exclusion
IV SETS/TUBING		
ACCU-CHEK TENDER 1 INFUSION KIT	4	EX Plan Exclusion
ARGYLE EXTENSION TUBE 20" MISC	4	EX Plan Exclusion
IV ADMINISTRATION SET MISC	4	EX Plan Exclusion
IV EXTENSION SET MISC	4	EX Plan Exclusion
KANGAROO BURETTE SET MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MASKS		
FACE MASK EARLOOP-STYLE MISC	4	EX Plan Exclusion
FACE MASK RESPIRATOR R-95 PART MISC	4	EX Plan Exclusion
FACE MASK RESP N-100 PART MISC	4	EX Plan Exclusion
SAFE-SENSE EARLOOP FACE MASK MISC	4	EX Plan Exclusion
SURGICAL FACE MASK/NIOSH N95 MISC	4	EX Plan Exclusion
MEDICAL WASTE DISPOSAL SYSTEMS		
MONOJECT SHARPS CONTAINER MISC	4	EX Plan Exclusion
SHARPS CONTAINER MISC	4	EX Plan Exclusion
MISC. DEVICES		
2-WAY FOLEY STABILIZATION DEV MISC	4	EX Plan Exclusion
ADAPTER CAP MISC	4	EX Plan Exclusion
ADD-VANTAGE ADDAPTOR CONNECTOR MISC	4	EX Plan Exclusion
ALPHAMOP FOAM REPLACEMENT PADS MISC	4	EX Plan Exclusion
ALUMINUM FLIP OFF SEALS 13MM MISC	4	EX Plan Exclusion
ALUMINUM FLIP OFF SEALS 20MM MISC	4	EX Plan Exclusion
AMBER GLASS BOTTLE MISC	4	EX Plan Exclusion
AMBER GLASS VIALS 2ML/13MM MISC	4	EX Plan Exclusion
AMBER GLASS VIALS 2ML MISC	4	EX Plan Exclusion
AMBER GLASS VIALS 30ML/20MM MISC	4	EX Plan Exclusion
AMIELLE VAGINAL TRAINER MISC	4	EX Plan Exclusion
ANGEL WING BLOOD COLLECT SET MISC	4	EX Plan Exclusion
ANGEL WING LUER ADAPTER/HOLDER MISC	4	EX Plan Exclusion
ANGEL WING TRANSFER DEVICE MISC	4	EX Plan Exclusion
ANGEL WING TUBE HOLDER MISC	4	EX Plan Exclusion
APNEASTRIP MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ARGYLE SARATOGA SUMP DRAIN MISC	4	EX Plan Exclusion
AUTOCLAVE AIR FILTER MISC	4	EX Plan Exclusion
AUTOCLAVE PAPER 36" X 36" MISC	4	EX Plan Exclusion
AUTOCLAVE PRINTER PAPER MISC	4	EX Plan Exclusion
AVOSTARTGRIP MISC	4	EX Plan Exclusion
BOTTLE 120ML/SPRAY/CLR PLASTIC MISC	4	EX Plan Exclusion
BOTTLE 2OZ/BLUE GLASS/DROPPER MISC	4	EX Plan Exclusion
BOTTLE 500ML/BOSTON ROUND/CAP MISC	4	EX Plan Exclusion
BOTTLE 8OZ/BOSTON ROUND/CAP MISC	4	EX Plan Exclusion
BOTTLE AMBER GLASS 33OZ MISC	4	EX Plan Exclusion
BOTTLE AMBER GRADUATED 16OZ MISC	4	EX Plan Exclusion
BOTTLE AMBER GRADUATED 8OZ MISC	4	EX Plan Exclusion
BOTTLETOP DISPENSER ADAPTER MISC	4	EX Plan Exclusion
BOTTLETOP DISPENSER MISC	4	EX Plan Exclusion
BOTTLE/WHITE 6OZ W/TWIST TOP MISC	4	EX Plan Exclusion
BUBBLE POINT TESTER KIT/WIZARD MISC	4	EX Plan Exclusion
CLEANROOM TACKY MAT 18"X36" MISC	4	EX Plan Exclusion
CLEAR GLASS VIAL 10ML MISC	4	EX Plan Exclusion
CLEAR GLASS VIALS 2ML MISC	4	EX Plan Exclusion
CLEVER CHOICE PULSE OXIMETER MISC	4	EX Plan Exclusion
COMAR PRESS-IN BOTTLE ADAPTERS MISC	4	EX Plan Exclusion
COVERALL BOOTS/DISPOSABLE/UNIV MISC	4	EX Plan Exclusion
COVERALLS ELAST BACK/WRST/ANKL MISC	4	EX Plan Exclusion
COVERALL W/HOOD/3XL MISC	4	EX Plan Exclusion
COVERALL W/HOOD/SMALL MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COVERALL W/HOOD/XL MISC	4	EX Plan Exclusion
COVERALL W/HOOD/XXL MISC	4	EX Plan Exclusion
DEODORANT TUBES 2.65OZ-CAPS MISC	4	EX Plan Exclusion
DIAL-A-DOSE SYRINGE 15ML MISC	4	EX Plan Exclusion
DIAL-A-DOSE SYRINGE 30ML MISC	4	EX Plan Exclusion
DIAL-A-DOSE SYRINGE 60ML MISC	4	EX Plan Exclusion
DISPENSER 50ML/FOAMER PUMP MISC	4	EX Plan Exclusion
DISPENSER/MD FOAMER MISC	4	EX Plan Exclusion
DISPENSER MD JAR 50ML MISC	4	EX Plan Exclusion
DISPENSER MD PEN 6.5ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP 0.25ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP 0.5ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP 1.0ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP 1.5ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 100ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 150ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 15ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 200ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 240ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 30ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 50ML MISC	4	EX Plan Exclusion
DISPENSER MD PUMP BOTTLE 80ML MISC	4	EX Plan Exclusion
DISPENSER MD SYRINGE 10ML MISC	4	EX Plan Exclusion
DISPENSER MD SYRINGE 5ML MISC	4	EX Plan Exclusion
DISPENSER MEGAPUMP AIRLESS MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DISPENSER MEGAPUMP MEZZO RND MISC	4	EX Plan Exclusion
DISPENSER TIP CAP/PRECISED DOSE MISC	4	EX Plan Exclusion
DOPRTAINERS 10ML MISC	4	EX Plan Exclusion
DROPPER & SCREW CAP 4OZ MISC	4	EX Plan Exclusion
DROPPING BOTTLE 30ML MISC	4	EX Plan Exclusion
DROPTAINERS OPHTHALMIC 15ML MISC	4	EX Plan Exclusion
DROPTAINERS OPHTHALMIC 3ML MISC	4	EX Plan Exclusion
DROPTAINERS OPHTHALMIC 7ML MISC	4	EX Plan Exclusion
EARPOPPER MIDDLE EAR INFLATION DEVICE	4	EX Plan Exclusion
ECO-SMARTFUNNEL 186ML MISC	4	EX Plan Exclusion
EMPTY VIAL 3ML MISC	4	EX Plan Exclusion
FACE SHIELD FULL LENGTH/CLEAR MISC	4	EX Plan Exclusion
FACE SHIELD FULL LENGTH MISC	4	EX Plan Exclusion
FILTER 0.22 MICRON/73MM/1000ML MISC	4	EX Plan Exclusion
FILTER 0.2 MICRON/25MM MISC	4	EX Plan Exclusion
FILTER 0.2 MICRON/32MM MISC	4	EX Plan Exclusion
FILTER 0.2 MICRON/47MM MISC	4	EX Plan Exclusion
FILTER ATTACHMENT MISC	4	EX Plan Exclusion
FILTER FLUORODYNE/0.22 MICRON MISC	4	EX Plan Exclusion
FILTER/MILLEX-GP/50MM/CLEAR MISC	4	EX Plan Exclusion
FOAM RING 2" MISC	4	EX Plan Exclusion
FOIL WRAPPER 3" X 3" MISC	4	EX Plan Exclusion
GLASS BOTTLE 15ML MISC	4	EX Plan Exclusion
GLASS BOTTLE 30ML/BRUSH CAP MISC	4	EX Plan Exclusion
GLASS BOTTLE 30ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLASS BOTTLE 30ML/PHENOLIC CAP MISC	4	EX Plan Exclusion
GLASS BOTTLE 60ML MISC	4	EX Plan Exclusion
GLASS SERUM BOTTLES 20ML MISC	4	EX Plan Exclusion
GLASS SERUM BOTTLES 2ML MISC	4	EX Plan Exclusion
GLASS SERUM BOTTLES 30ML MISC	4	EX Plan Exclusion
GLASS SERUM BOTTLES 5ML MISC	4	EX Plan Exclusion
GLASS VIAL 2ML MISC	4	EX Plan Exclusion
GLASS VIAL AMBER 3ML MISC	4	EX Plan Exclusion
GRADUATED BOTTLE 2OZ MISC	4	EX Plan Exclusion
GRADUATED BOTTLE 4OZ MISC	4	EX Plan Exclusion
HEAD COVERS 24" MISC	4	EX Plan Exclusion
ILLUSIONS AA BREAST PROSTHESIS MISC	4	EX Plan Exclusion
ILLUSIONS C BREAST PROSTHESIS MISC	4	EX Plan Exclusion
INDICATOR/BIOLOGICAL TEST KIT	4	EX Plan Exclusion
INHALATION VIAL CAP/BLUE MISC	4	EX Plan Exclusion
INHALATION VIAL CAP/GREEN MISC	4	EX Plan Exclusion
INHALATION VIAL CAP/ORANGE MISC	4	EX Plan Exclusion
INHALATION VIAL CAP/RED MISC	4	EX Plan Exclusion
INHALATION VIAL CAP/WHITE MISC	4	EX Plan Exclusion
INHALATION VIAL CAP/YELLOW MISC	4	EX Plan Exclusion
INHALATION VIAL W/CAP/BLUE MISC	4	EX Plan Exclusion
INHALATION VIAL W/CAP/GREEN MISC	4	EX Plan Exclusion
INHALATION VIAL W/ CAP/ORANGE MISC	4	EX Plan Exclusion
INHALATION VIAL W/CAP/RED MISC	4	EX Plan Exclusion
INHALATION VIAL W/CAP/WHITE MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INHALATION VIAL W/CAP/YELLOW MISC	4	EX Plan Exclusion
INHALATION VIAL W/O CAP/AMBER MISC	4	EX Plan Exclusion
INHALATION WORK STAT/50 HOLES MISC	4	EX Plan Exclusion
JAR/8OZ/WHITE LID MISC	4	EX Plan Exclusion
JUG AMBER GLASS 4L MISC	4	EX Plan Exclusion
LAB COAT-DISPOSABLE LARGE MISC	4	EX Plan Exclusion
LAB COAT-DISPOSABLE MEDIUM MISC	4	EX Plan Exclusion
LAB COAT-DISPOSABLE SMALL MISC	4	EX Plan Exclusion
LAB COAT-DISPOSABLE XL MISC	4	EX Plan Exclusion
LAB COAT-DISPOSABLE XXL MISC	4	EX Plan Exclusion
LMA MAD NASAL MISC	4	EX Plan Exclusion
LOOP KIT	4	EX Plan Exclusion
LUER TIP CAP TRAY MISC	4	EX Plan Exclusion
MAD NASAL ATOMIZATION DEVICE MISC	4	EX Plan Exclusion
MAD NASAL MISC	4	EX Plan Exclusion
MAZERUSTAR MIXER/MIX CONTAINER MISC	4	EX Plan Exclusion
MEDI-RDT BLISTER PACKS MISC	4	EX Plan Exclusion
METERED NASAL SPRAY PUMP 15ML MISC	4	EX Plan Exclusion
MINI MALLET 3/4" PLASTIC MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR EMP JAR ADP MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR/JAR ADP SET MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR/JAR MXING ADP MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR KK-250S,300SS MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR KK-300SS MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR KK-400W MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIXER/MAZERUSTAR MD PUMP ADP MISC	4	EX Plan Exclusion
MIXER/MAZERUSTAR/UNODOSE ADAPT MISC	4	EX Plan Exclusion
MONOJECT BLOOD COLLECTION SET MISC	4	EX Plan Exclusion
MONOJECT BLOOD TUBE HOLDER MISC	4	EX Plan Exclusion
MONOJECT LUER ADAPTER MISC	4	EX Plan Exclusion
MONOJECT MULT-SAMP COLLECT SET MISC	4	EX Plan Exclusion
NAIL POLISH BOTTLE/BRUSH 15ML MISC	4	EX Plan Exclusion
NASAL SPRAY METERED PUMP MISC	4	EX Plan Exclusion
OINTMENT TUBE/METAL 1OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/METAL 2OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/METAL 4OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/OPHTH TIP 1/8OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/PLASTIC 1OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/PLASTIC 2OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/PLASTIC 4OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/PLASTIC 6OZ MISC	4	EX Plan Exclusion
OINTMENT TUBE/PLASTIC 8OZ MISC	4	EX Plan Exclusion
PELVIC MUSCLE TRAINER MISC	4	EX Plan Exclusion
PH ACCESSORIES STORAGE SOL MISC	4	EX Plan Exclusion
PILLGUARD DISPENSER MISC	4	EX Plan Exclusion
PILLGUARD REFILL CARTRIDGE MISC	4	EX Plan Exclusion
PLASTIC BOTTLES 30ML MISC	4	EX Plan Exclusion
PLASTIC BOTTLES 90ML MISC	4	EX Plan Exclusion
PLASTIC ENEMA BOTTLE MISC	4	EX Plan Exclusion
PLASTIC JAR 6OZ MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLASTIC SCOOP 1ML MISC	4	EX Plan Exclusion
POCKET PRO+ REPLACEMENT SENSOR MISC	4	EX Plan Exclusion
POLYPROPYLENE CAP-LINER MISC	4	EX Plan Exclusion
POSIDYNE ELD FILTER/0.2UM MISC	4	EX Plan Exclusion
POWDER INSUFFLATOR-#4 CAPSULES MISC	4	EX Plan Exclusion
PRESS-IN BOTTLE ADAPTERS MISC	4	EX Plan Exclusion
PROVATE 61MM MISC	4	EX Plan Exclusion
PROVATE 67MM MISC	4	EX Plan Exclusion
PROVATE 73MM MISC	4	EX Plan Exclusion
PROVATE 79MM MISC	4	EX Plan Exclusion
PROVATE 85MM MISC	4	EX Plan Exclusion
PROVATE 91MM MISC	4	EX Plan Exclusion
REFLECTIONS AA BREAST PROSTHES MISC	4	EX Plan Exclusion
REFLECTIONS C BREAST PROSTHES MISC	4	EX Plan Exclusion
SAFE-SENSE COVERALL BOOTS MISC	4	EX Plan Exclusion
SAFE-SENSE COVERALL/HOOD/L MISC	4	EX Plan Exclusion
SAFE-SENSE COVERALL/HOOD/M MISC	4	EX Plan Exclusion
SAFE-SENSE COVERALL/HOOD/S MISC	4	EX Plan Exclusion
SAFE-SENSE COVERALL/HOOD/XL MISC	4	EX Plan Exclusion
SAFE-SENSE HEAD COVER CIRC 21" MISC	4	EX Plan Exclusion
SAFE-SENSE LAB COAT-LARGE MISC	4	EX Plan Exclusion
SAFE-SENSE LAB COAT-MEDIUM MISC	4	EX Plan Exclusion
SAFE-SENSE LAB COAT-SMALL MISC	4	EX Plan Exclusion
SAFE-SENSE LAB COAT-XLARGE MISC	4	EX Plan Exclusion
SERUM BOTTLE MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SERUM BOTTLES 30ML/AMBER GLASS MISC	4	EX Plan Exclusion
SERUM BOTTLES 50ML/CLEAR GLASS MISC	4	EX Plan Exclusion
SERUM BOTTLES/AMBER GLASS 20ML MISC	4	EX Plan Exclusion
SERUM BOTTLE STOPPER 20MM MISC	4	EX Plan Exclusion
SETTLING PLATE SDA/29ML/100X15 MISC	4	EX Plan Exclusion
SETTLING PLATE TSA/25ML/100X15 MISC	4	EX Plan Exclusion
SHAPERS LAYERED BREAST SHAPER MISC	4	EX Plan Exclusion
SNAP-ON CHLOROBUTYL STOPPER MISC	4	EX Plan Exclusion
SPILL KIT/CHEMOTHERAPY KIT	4	EX Plan Exclusion
SPRAY APPLICATOR KIT MISC	4	EX Plan Exclusion
SPRAY BOTTLE/PLASTIC 120ML MISC	4	EX Plan Exclusion
STIRRING ROD/GLASS 12X1/4" MISC	4	EX Plan Exclusion
STRAINER/STAINLESS STEEL/2.5" MISC	4	EX Plan Exclusion
SUPPOSITORY MOLD/ALUMINUM 2 GM MISC	4	EX Plan Exclusion
SUPPOSITORY SHELL RACK MISC	4	EX Plan Exclusion
SUPPOSITORY SHELLS 2.0 ML MISC	4	EX Plan Exclusion
SUPPOSITORY SHELLS 2.4ML MISC	4	EX Plan Exclusion
SUPPOSITORY SHELLS SMALL 1.3ML MISC	4	EX Plan Exclusion
SYRINGE DIAL-A-DOSE MISC	4	EX Plan Exclusion
TAP-N-CLICK SILICONE PAD MISC	4	EX Plan Exclusion
TIP RECTAL/VAG W/PERFORATIONS MISC	4	EX Plan Exclusion
TOPI-CLICK APPLICATOR MICRO MISC	4	EX Plan Exclusion
TOPI-CLICK APPLICATOR MISC	4	EX Plan Exclusion
TOPI-CLICK NOZZLE MISC	4	EX Plan Exclusion
TOPI-CLICK PERL APPLICATOR 4ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TOPI-CLICK PERL DOSE LOAD 35ML MISC	4	EX Plan Exclusion
TOPI-CLICK PERL VAGINAL DOSING MISC	4	EX Plan Exclusion
TROCHE MOLD 30 CAVITY MISC	4	EX Plan Exclusion
TYVEK PROTECTIVE SLEEVES MISC	4	EX Plan Exclusion
UNGUATOR 100/200/57MM MISC	4	EX Plan Exclusion
UNGUATOR 15/20/30/36MM MISC	4	EX Plan Exclusion
UNGUATOR 50/43MM/DISP BLADES MISC	4	EX Plan Exclusion
UNGUATOR APPLICATOR 1"-SHORT MISC	4	EX Plan Exclusion
UNGUATOR APPLICATOR 2.5"-LONG MISC	4	EX Plan Exclusion
UNGUATOR EXACTDOSE 0.5ML MISC	4	EX Plan Exclusion
UNGUATOR JAR 100/140 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 100/140 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 15/20 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 15/20 GREEN LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 15/20 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 15/28 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 200/280 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 200/280 GREEN LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 200/280 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 200/280 WHITE MISC	4	EX Plan Exclusion
UNGUATOR JAR 20/33 BLUE MISC	4	EX Plan Exclusion
UNGUATOR JAR 20/33 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 20/33 WHITE MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 BLUE MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UNGUATOR JAR 30/42 GREEN LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 TURQUOISE MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 WHITE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 30/42 YELLOW MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 BLUE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 BLUE MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 GREEN LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 PINK MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 RED LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 TURQUOISE MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 WHITE LID MISC	4	EX Plan Exclusion
UNGUATOR JAR 50/70 YELLOW MISC	4	EX Plan Exclusion
UNGUATOR JAR AIRDYNAMIK MISC	4	EX Plan Exclusion
UNGUATOR JAR W/SPINDLE 300/390 MISC	4	EX Plan Exclusion
UNGUATOR JAR W/SPINDLE 500/600 MISC	4	EX Plan Exclusion
UNGUATOR LID 1000ML MISC	4	EX Plan Exclusion
UNGUATOR LID 500ML MISC	4	EX Plan Exclusion
UNGUATOR VARIONOZZLE 1MM MISC	4	EX Plan Exclusion
UNGUATOR VARIONOZZLE 4MM MISC	4	EX Plan Exclusion
VAGINAL SUPPOSITORY APPLICATOR MISC	4	EX Plan Exclusion
VANISHPOINT BLOOD COLLECT SET MISC	4	EX Plan Exclusion
VARITHENA ADMINISTRATION PACK MISC	4	EX Plan Exclusion
VERSAJET II EXACT 14MM MISC	4	EX Plan Exclusion
VERSAJET II EXACT 8MM MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERSAJET II PLUS 14MM MISC	4	EX Plan Exclusion
VERSAJET II PLUS 8MM MISC	4	EX Plan Exclusion
VIRAGE CUSTOM BREAST PROSTHES MISC	4	EX Plan Exclusion
WEIGH BOAT MISC	4	EX Plan Exclusion
NASAL NEBULIZERS		
PARI SINUSTAR DELIVERY SYSTEM MISC	4	EX Plan Exclusion
PARI SINUSTAR NASAL NEBULIZER MISC	4	EX Plan Exclusion
NEBULIZERS		
AEROECLIPSE II NEBULIZER MISC	4	EX Plan Exclusion
AEROECLIPSE II W/ELBOW ADAPTER MISC	4	EX Plan Exclusion
AEROECLIPSE II W/UNIV TUBING MISC	4	EX Plan Exclusion
AEROECLIPSE XL NEBULIZER MISC	4	EX Plan Exclusion
AURA PORTANEB MISC	4	EX Plan Exclusion
BENTLEY THE BEAR PED NEBULIZER MISC	4	EX Plan Exclusion
CAPTAIN EAGLE PED NEBULIZER MISC	4	EX Plan Exclusion
CLEVER CHOICE NEBULIZER MISC	4	EX Plan Exclusion
CLEVER CHOICE WHIS AIR PED NEB MISC	4	EX Plan Exclusion
CLEVER CHOICE WHISPER AIRE NEB MISC	4	EX Plan Exclusion
CLEVER CHOICE WHISPER AIRE PED MISC	4	EX Plan Exclusion
COMP AIR COMPRESSOR NEBULIZER MISC	4	EX Plan Exclusion
COMP A-I-R NEBULIZER MISC	4	EX Plan Exclusion
COMPRESSOR NEBULIZER MISC	4	EX Plan Exclusion
FLYP NEBULIZER MISC	4	EX Plan Exclusion
INNOSPIRE ELEGANCE NEBULIZER MISC	4	EX Plan Exclusion
INNOSPIRE ESSENCE NEBULIZER MISC	4	EX Plan Exclusion
LUMINEB II PISTON NEBULIZER MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MABIS COSMOCOMP NEBULIZER MISC	4	EX Plan Exclusion
MC 300-MOUTHPIECE MISC	4	EX Plan Exclusion
MC 300 W/UNIVERSAL TUBING MISC	4	EX Plan Exclusion
MEDNEB NEB-WITH DISPO NEB KIT MISC	4	EX Plan Exclusion
MICROAIR VIBRATING MESH NEBUL MISC	4	EX Plan Exclusion
MICRONEB MISC	4	EX Plan Exclusion
MINI COMPRESSOR MISC	4	EX Plan Exclusion
NEB 200 COMPRESSOR NEBULIZER MISC	4	EX Plan Exclusion
NEB-RITE4 MISC	4	EX Plan Exclusion
NEBULIZER MISC	4	EX Plan Exclusion
NEBULIZER PED FROG KIT MISC	4	EX Plan Exclusion
NEBULIZER PED FROG MISC	4	EX Plan Exclusion
NEBULIZER SYSTEM ALL-IN-ONE MISC	4	EX Plan Exclusion
PARI ALTERA NEBULIZER SYSTEM MISC	4	EX Plan Exclusion
PARI BABY DEVICE	4	EX Plan Exclusion
PARI BABY NEBULIZER SET MISC	4	EX Plan Exclusion
PARI ERAPID NEBULIZER SYSTEM MISC	4	EX Plan Exclusion
PARI LC PLUS MISC	4	EX Plan Exclusion
PARI LC PLUS NEB SET PED MASK MISC	4	EX Plan Exclusion
PARI LC PLUS NEBULIZER MISC	4	EX Plan Exclusion
PARI LC PLUS VIOS PRO NEB MISC	4	EX Plan Exclusion
PARI LC SPRINT NEBULIZER SET MISC	4	EX Plan Exclusion
PARI LC STAR MISC	4	EX Plan Exclusion
PARI PRONEB MAX LC PLUS MISC	4	EX Plan Exclusion
PARI PRONEB MAX LC SPRINT MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARI SINUS AEROSOL SYSTEM MISC	4	EX Plan Exclusion
PARI TREK S W/12V DC ADAPTOR DEVICE	4	EX Plan Exclusion
PARI VIOS PRO LC PLUS SYSTEM MISC	4	EX Plan Exclusion
PARI VIOS PRO LC SPRINT SYSTEM MISC	4	EX Plan Exclusion
PEDIATRIC COMPRESSOR NEBULIZER MISC	4	EX Plan Exclusion
PULMONEB LT MISC	4	EX Plan Exclusion
SIDESTREAM NEBULIZER-DISP MISC	4	EX Plan Exclusion
SIDESTREAM NEBULIZER-REUSABLE MISC	4	EX Plan Exclusion
SIDESTREAM PLUS NEBULIZER MISC	4	EX Plan Exclusion
SOOTHENEB COMPRESSOR NEBULIZER MISC	4	EX Plan Exclusion
SOOTHE NEB MESH NEBULIZER MISC	4	EX Plan Exclusion
SPARKY THE DOG PED NEBULIZER MISC	4	EX Plan Exclusion
VIOS AEROSOL DELIVERY SYSTEM MISC	4	EX Plan Exclusion
VIOS LC PLUS DELUXE MISC	4	EX Plan Exclusion
VIOS LC PLUS MISC	4	EX Plan Exclusion
VIOS LC PLUS PEDIATRIC MISC	4	EX Plan Exclusion
VIOS LC SPRINT MISC	4	EX Plan Exclusion
VIOS LC SPRINT PEDIATRIC MISC	4	EX Plan Exclusion
NEEDLES & SYRINGES		
MULTI-DRAW NEEDLE 20G X 1" MISC	4	EX Plan Exclusion
MULTI-DRAW NEEDLE 21G X 1" MISC	4	EX Plan Exclusion
MULTI-DRAW NEEDLE 22G X 1" MISC	4	EX Plan Exclusion
MONOJECT FILTER NEEDLE 18G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT FILTER NEEDLE 20G X 1-1/2" MISC	4	EX Plan Exclusion
J-TIP KIT W/VIAL ADAPTERS KIT	4	EX Plan Exclusion
NORDIPEN 5 INJECTION DEVICE MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNITROPE PEN 10 INJ DEVICE MISC	4	EX Plan Exclusion
OMNITROPE PEN 5 INJ DEVICE MISC	4	EX Plan Exclusion
CEQUR SIMPLICITY 2U DEVICE	4	EX Plan Exclusion
CEQUR SIMPLICITY INSERTER MISC	4	EX Plan Exclusion
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	4	EX Plan Exclusion
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	4	EX Plan Exclusion
INPEN 100-GREY-LILLY-HUMALOG DEVICE	4	EX Plan Exclusion
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	4	EX Plan Exclusion
INPEN 100-PINK-LILLY-HUMALOG DEVICE	4	EX Plan Exclusion
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	4	EX Plan Exclusion
NOVOPEN ECHO DEVICE	4	EX Plan Exclusion
PEN NEEDLES 30G X 5 MM MISC	1	
PEN NEEDLES 31G X 5 MM MISC	1	
PEN NEEDLES 31G X 8 MM MISC	1	
PEN NEEDLES 32G X 4 MM MISC	1	
PRO COMFORT PEN NEEDLES 31G X 8 MM MISC	3	
PRO COMFORT PEN NEEDLES 32G X 4 MM MISC	3	
PRO COMFORT PEN NEEDLES 32G X 5 MM MISC	3	
AQ INSULIN SYRINGE 29G X 1/2" 1 ML MISC	2	
AQ INSULIN SYRINGE 30G X 5/16" 0.5 ML MISC	2	
AQ INSULIN SYRINGE 31G X 5/16" 1 ML MISC	3	
BD SAFETYGLIDE INSULIN SYRINGE 31G X 15/64" 0.3 ML MISC	2	
DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML MISC	3	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.3 ML MISC	3	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 0.5 ML MISC	3	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 15/64" 1 ML MISC	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.3 ML MISC	3	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 0.5 ML MISC	3	
DROPSAFE SAFETY SYRINGE/NEEDLE 31G X 5/16" 1 ML MISC	3	
EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	
EMBECTA INSULIN SYRINGE 28G X 1/2" 1 ML MISC	2	
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 0.5 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 27G X 1/2" 1 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 0.5 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 28G X 1/2" 1 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 1 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 30G X 1/2" 1 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 30G X 5/16" 0.5 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 0.5 ML MISC	3	
INSULIN SYRINGE-NEEDLE U-100 31G X 5/16" 1 ML MISC	3	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.3 ML MISC	2	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	2	
MAGELLAN INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	2	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.3 ML MISC	2	
MAGELLAN INSULIN SAFETY SYR 30G X 5/16" 0.5 ML MISC	2	
MONOJECT INSULIN SYRINGE 27G X 1/2" 1 ML MISC	2	
MONOJECT INSULIN SYRINGE 28G X 1/2" 0.5 ML MISC	3	
MONOJECT INSULIN SYRINGE 28G X 1/2" 1 ML MISC	2	
MONOJECT INSULIN SYRINGE 30G X 5/16" 0.3 ML MISC	2	
MONOJECT INSULIN SYRINGE 30G X 5/16" 1 ML MISC	2	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML MISC	2	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 1 ML MISC	2	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	2	
EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML MISC	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT INSULIN SYRINGE U-100 1 ML MISC	2	
MONOJECT HYPODERMIC NEEDLE 14G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 14G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 14G X 2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 16G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 16G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 16G X 3/4" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 16G X 5/8" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 18G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 18G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 18G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 18G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 18G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 18G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 19G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 19G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 19G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 19G X 1" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 20G X 1" MISC	4	EX Plan Exclusion
MONOJECT BLUNTIP CANNULA 20G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 20G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 20G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 20G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 20G X 1" MISC	4	EX Plan Exclusion
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 21G X 1-1/2" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREPOINT POLY HUB NEEDLE 21G X 1" MISC	4	EX Plan Exclusion
MONOJECT BLUNTIP CANNULA 21G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 21G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 21G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 21G X 2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 21G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 21G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 21G X 5/8" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 22G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 22G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 22G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 22G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 22G X 1" MISC	4	EX Plan Exclusion
BD ECLIPSE NEEDLE 23G X 1" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 23G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 23G X 1" MISC	4	EX Plan Exclusion
CAREPOINT SAFETY 1ST NEEDLE 23G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT SAFETY 1ST NEEDLE 23G X 1" MISC	4	EX Plan Exclusion
DEFLUX METAL NEEDLE 23G X 350MM MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE 23G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 23G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 23G X 3/4" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 23G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 23G X 5/8" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERISAFE SAFETY STERILE NEEDLE 23G X 1-1/2" MISC	4	EX Plan Exclusion
BD ECLIPSE NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 25G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 25G X 5/8" MISC	4	EX Plan Exclusion
CAREPOINT SAFETY 1ST NEEDLE 25G X 1-1/2" MISC	4	EX Plan Exclusion
CAREPOINT SAFETY 1ST NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
CAREPOINT SAFETY 1ST NEEDLE 25G X 5/8" MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE 25G X 5/8" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 25G X 1-1/4" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 25G X 2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 25G X 5/8" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 25G X 1" MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SAFETY NDL 25G X 5/8" MISC	4	EX Plan Exclusion
VERISAFE SAFETY STERILE NEEDLE 25G X 1" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 26G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 26G X 1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 27G X 1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/2" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 27G X 1-1/4" MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE 27G X 1/2" MISC	4	EX Plan Exclusion
CAREPOINT POLY HUB NEEDLE 30G X 1/2" MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT HYPODERMIC NEEDLE 30G X 3/4" MISC	4	EX Plan Exclusion
MONOJECT INTRODUCER NEEDLE 18G X 1-1/4" MISC	4	EX Plan Exclusion
MONOJECT FILTER ASPIRATOR MISC	4	EX Plan Exclusion
TB SYRINGE 1 ML MISC	4	EX Plan Exclusion
BD SYRINGE LUER-LOK 3 ML MISC	4	EX Plan Exclusion
BD SYRINGE LUER-LOK 5 ML MISC	4	EX Plan Exclusion
BD SYRINGE LUER SLIP TIP 20 ML MISC	4	EX Plan Exclusion
BD SYRINGE SLIP TIP 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE CATHETER TIP 60 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 10 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 1 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 20 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 30 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 5 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 60 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER SLIP 1 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER SLIP 60 ML MISC	4	EX Plan Exclusion
MONOJECT BLUNTIP SYR/CANNULA 3 ML MISC	4	EX Plan Exclusion
MONOJECT BLUNTIP SYR/CANNULA 6 ML MISC	4	EX Plan Exclusion
MONOJECT CONTROL SYRINGE 12 ML MISC	4	EX Plan Exclusion
MONOJECT CONTROL SYRINGE 20 ML MISC	4	EX Plan Exclusion
MONOJECT PHARMACY TRAY 12 ML MISC	4	EX Plan Exclusion
MONOJECT PHARMACY TRAY 20 ML MISC	4	EX Plan Exclusion
MONOJECT PHARMACY TRAY 35 ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT PHARMACY TRAY 3 ML MISC	4	EX Plan Exclusion
MONOJECT PHARMACY TRAY 60 ML MISC	4	EX Plan Exclusion
MONOJECT PHARMACY TRAY 6 ML MISC	4	EX Plan Exclusion
MONOJECT PISTON SYRINGE 140 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 12 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE CATH TIP 35 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE CATH TIP 60 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE ECCENTRIC TIP 60 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE ECC LUER 20 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE ECC LUER 35 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER LOCK 20 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER LOCK 35 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER LOCK 60 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER LOCK 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER-LOCK TIP 140 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE LUER-LOCK TIP 60 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE PHARMACY TRAY 1 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REG LUER 20 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REG LUER 35 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REG LUER 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REG LUER 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REGULAR TIP 20 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REGULAR TIP 3 ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SYRINGE REGULAR TIP 60 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE REGULAR TIP 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE TOOMEY TYPE 60 ML MISC	4	EX Plan Exclusion
MONOJECT TB SYRINGE 1 ML MISC	4	EX Plan Exclusion
NORM-JECT LUER SLIP SYRINGE 1 ML MISC	4	EX Plan Exclusion
SYRINGE LUER LOCK 10 ML MISC	4	EX Plan Exclusion
SYRINGE LUER LOCK 30 ML MISC	4	EX Plan Exclusion
SYRINGE LUER SLIP 1 ML MISC	4	EX Plan Exclusion
TOOMEY SYRINGE 70 ML MISC	4	EX Plan Exclusion
MONOJECT LIFESHIELD SYRINGE 18G X 1" 12 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 18G X 1" 12 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 12 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 12 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1" 12 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 12 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 18G X 1" 12 ML MISC	4	EX Plan Exclusion
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 1 ML MISC	4	EX Plan Exclusion
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 1 ML MISC	4	EX Plan Exclusion
MAGELLAN SYRINGE-SAFETY NEEDLE 23G X 1" 1 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 23G X 1" 1 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 25G X 1" 1 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 1 ML MISC	4	EX Plan Exclusion
VERISAFE SAFE STERILE SYRINGE 25G X 1" 1 ML MISC	4	EX Plan Exclusion
BD LUER-LOK SYRINGE 23G X 1" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SAFETY1ST SYR/NEEDLE 23G X 1" 3 ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 1" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SAFETY1ST SYR/NEEDLE 25G X 5/8" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 20G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 20G X 1" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 22G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 22G X 1" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 23G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 23G X 1" 3 ML MISC	4	EX Plan Exclusion
CAREPOINT SYRINGE LUER LOCK 25G X 1" 3 ML MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE/SYRINGE 18G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE/SYRINGE 18G X 1" 3 ML MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE/SYRINGE 23G X 1" 3 ML MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE/SYRINGE 25G X 1" 3 ML MISC	4	EX Plan Exclusion
EASYPOINT NEEDLE/SYRINGE 25G X 5/8" 3 ML MISC	4	EX Plan Exclusion
MONOJECT LIFESHIELD SYRINGE 18G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 23G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 25G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 25G X 5/8" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 20G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 20G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 20G X 3/4" 3 ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT SYRINGE 21G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 21G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 22G X 1-1/2" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 23G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 25G X 1-1/4" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 25G X 1" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 25G X 5/8" 3 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 27G X 1-1/4" 3 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 18G X 1" 6 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 20G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 21G X 1" 6 ML MISC	4	EX Plan Exclusion
MONOJECT MAGELLAN SYRINGE 22G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 20G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 21G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 21G X 1" 6 ML MISC	4	EX Plan Exclusion
MONOJECT SYRINGE 22G X 1-1/2" 6 ML MISC	4	EX Plan Exclusion
MAGELLAN TUBERCULIN SYRINGE 27G X 1/2" 1 ML MISC	4	EX Plan Exclusion
MAGELLAN TUBERCULIN SYRINGE 28G X 1/2" 1 ML MISC	4	EX Plan Exclusion
MONOJECT ALLERGIST TRAY 27G X 1/2" 1 ML KIT	4	EX Plan Exclusion
MONOJECT ALLERGIST TRAY 28G X 1/2" 0.5 ML KIT	4	EX Plan Exclusion
MONOJECT ALLERGIST TRAY 28G X 1/2" 1 ML KIT	4	EX Plan Exclusion
MONOJECT TB SAFETY SYRINGE 25G X 5/8" 1 ML MISC	4	EX Plan Exclusion
MONOJECT TB SAFETY SYRINGE 28G X 1/2" 1 ML MISC	4	EX Plan Exclusion
MONOJECT TB SYRINGE 25G X 5/8" 1 ML MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT TB SYRINGE 26G X 3/8" 1 ML MISC	4	EX Plan Exclusion
MONOJECT TB SYRINGE 27G X 1/2" 1 ML MISC	4	EX Plan Exclusion
MONOJECT TB SYRINGE 28G X 1/2" 0.5 ML MISC	4	EX Plan Exclusion
MONOJECT TB SYRINGE 28G X 1/2" 1 ML MISC	4	EX Plan Exclusion
NERVE STIMULATORS		
CEFALY KIT DEVICE	4	EX Plan Exclusion
CLEVER CHOICE TENS UNIT DEVICE	4	EX Plan Exclusion
EMJOI TENS DEVICE	4	EX Plan Exclusion
GAMMACORE DEVICE	4	EX Plan Exclusion
GAMMACORE SAPPHIRE 31-DAY DEVICE	4	EX Plan Exclusion
GAMMACORE SAPPHIRE D DEVICE	4	EX Plan Exclusion
GAMMACORE SAPPHIRE DEVICE	4	EX Plan Exclusion
GAMMACORE SAPPHIRE REFILL KIT MISC	4	EX Plan Exclusion
MONARCH ETNS SYSTEM DEVICE	4	EX Plan Exclusion
NERIVIO DEVICE	4	EX Plan Exclusion
NS-2 ELECTRIC PATCH POUCH MISC	4	EX Plan Exclusion
PAIN RELIEF WITH TENS S2000 DEVICE	4	EX Plan Exclusion
PONS MOUTHPIECE MISC	4	EX Plan Exclusion
PONS SYSTEM DEVICE	4	EX Plan Exclusion
PRO COMFORT TENS UNIT DEVICE	4	EX Plan Exclusion
S.T. GENESIS NERVE STIMULATOR DEVICE	4	EX Plan Exclusion
ZEWA DIGITAL TENS UNIT DEVICE	4	EX Plan Exclusion
ZEWA TENS/EMS COMBO UNIT DEVICE	4	EX Plan Exclusion
OCULAR IMPLANTS		
SUSVIMO OCULAR IMPLANT IMPLANT	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORAL DOSING DEVICES		
MONOJECT MONODOSE ORAL MED SYR MISC	4	EX Plan Exclusion
SYRINGE PRECISEDOSSE DISPENSER MISC	4	EX Plan Exclusion
OSTOMY SUPPLIES		
KARAYA GUM POWDER	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/0.8CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/1.2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/1.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/1.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/1CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/2.3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/2.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/2.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/3.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/4.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/4CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 12FR/5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/0.8CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/1.2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/1.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/1.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/1CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/2.3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/2.5CM KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO BALLOON 14FR/2.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/3.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/4.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/4CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 14FR/5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/0.8CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/1.2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/1.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/1.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/1CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/2.3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/2.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/2.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/3.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/4.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/4CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 16FR/5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/0.8CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/1.2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/1.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/1.7CM KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KANGAROO BALLOON 18FR/1CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/2.3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/2.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/2.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/3.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/4.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/4CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 18FR/5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/0.8CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/1.2CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/1.5CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/1.7CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/1CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/2.3CM KIT	4	EX Plan Exclusion
KANGAROO BALLOON 20FR/2CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/2.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/2.7CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/3.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/4.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/4CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 20FR/5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/0.8CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/1.2CM KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NUTRIPORT BALLOON 24FR/1.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/1.7CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/1CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/2.3CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/2.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/2.7CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/2CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/3.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/3CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/4.5CM KIT	4	EX Plan Exclusion
NUTRIPORT BALLOON 24FR/4CM KIT	4	EX Plan Exclusion
PARENTERAL CATHETERS		
BD NEXIVA 22GX1" MISC	4	EX Plan Exclusion
BD NEXIVA 24GX0.75" MISC	4	EX Plan Exclusion
BD SAF-T-INTIMA 24G X 0.75" KIT	4	EX Plan Exclusion
INSYTE AUTOGUARD 22GX1" MISC	4	EX Plan Exclusion
PARENTERAL THERAPY SUPPLIES		
CLEAR GLASS VIALS 5ML MISC	4	EX Plan Exclusion
I-PORT ADVANCE 6MM MISC	4	EX Plan Exclusion
I-PORT ADVANCE 9MM MISC	4	EX Plan Exclusion
MONOJECT HYPODERMIC NEEDLE TIP MISC	4	EX Plan Exclusion
MONOJECT LIFESHIELD CANNULA MISC	4	EX Plan Exclusion
MONOJECT MED PREP CANNULA MISC	4	EX Plan Exclusion
MONOJECT SMARTIP SYR/CANNULA MISC	4	EX Plan Exclusion
MONOJECT VIAL ACCESS CANNULA MISC	4	EX Plan Exclusion
NEEDLELESS PRN CONNECTORS MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEEDLELESS PRN PORT CONVERTER MISC	4	EX Plan Exclusion
PHASEAL ASSEMBLY FIXTURE MISC	4	EX Plan Exclusion
PHASEAL CAP FOR INJECTOR MISC	4	EX Plan Exclusion
PHASEAL CONNECTOR LUER LOCK MISC	4	EX Plan Exclusion
PHASEAL INFUSION ADAPTER MISC	4	EX Plan Exclusion
PHASEAL INFUSION CLAMP MISC	4	EX Plan Exclusion
PHASEAL INJECTOR LUER LOCK MISC	4	EX Plan Exclusion
PHASEAL IV BAG HANGER MISC	4	EX Plan Exclusion
PHASEAL PROTECTOR 14 MISC	4	EX Plan Exclusion
PHASEAL PROTECTOR 21 MISC	4	EX Plan Exclusion
PHASEAL PROTECTOR 28 MISC	4	EX Plan Exclusion
PHASEAL PROTECTOR 50 MISC	4	EX Plan Exclusion
PHASEAL SECONDARY SET MISC	4	EX Plan Exclusion
PHASEAL SYRINGE TRAY MISC	4	EX Plan Exclusion
PHASEAL Y-SITE CONNECTOR MISC	4	EX Plan Exclusion
SYRINGE FILTER/0.2 MICRON/25MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/0.2 MICRON/30MM MISC	4	EX Plan Exclusion
SYRINGE FILTER 0.2 MICRON/32MM MISC	4	EX Plan Exclusion
SYRINGE FILTER 0.45 MICRON MISC	4	EX Plan Exclusion
SYRINGE FILTER/D65R/PES/65MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/D65R/PTFE/65MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/D90R/PES/90MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/D90R/PTFE/90MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/MILLEX/25MM MISC	4	EX Plan Exclusion
SYRINGE FILTER/MILLEX-GS/25MM MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE FILTER/MILLEX-GV/33MM MISC	4	EX Plan Exclusion
VACUUM FILTER 0.20UM/150ML MISC	4	EX Plan Exclusion
VIAL STOPPER MISC	4	EX Plan Exclusion
PEAK FLOW METERS		
STRIVE DUAL ZONE PEAK FLOW MTR DEVICE	4	QL EX Plan Exclusion
TRUZONE PEAK FLOW METER DEVICE	4	QL EX Plan Exclusion
AEROGEAR ACTION ASTHMA KIT KIT	4	QL EX Plan Exclusion
RESPIRATORY THERAPY SUPPLIES		
ACE AEROSOL CLOUD ENHANCER MISC	4	EX Plan Exclusion
ACTIVITY POUCH MISC	4	EX Plan Exclusion
ADULT MASK DEVICE	4	EX Plan Exclusion
ADULT MASK LARGE MISC	4	EX Plan Exclusion
AEROBIKA DEVICE	4	EX Plan Exclusion
AEROBIKA OPEP W/MANOMETER KIT	4	EX Plan Exclusion
AEROECLIPSE EZ TWIST TUBING MISC	4	EX Plan Exclusion
AEROTRACH PLUS MISC	4	EX Plan Exclusion
AIRS DISPOSABLE NEBULIZER KIT	4	EX Plan Exclusion
AIRS PEDIATRIC AEROSOL MASK MISC	4	EX Plan Exclusion
ALL FLOW 1000 PFT FILTER DEVICE	4	EX Plan Exclusion
ALL FLOW 1000 PFT FILTER KIT	4	EX Plan Exclusion
ALL FLOW 1000 PFT FILTER MISC	4	EX Plan Exclusion
ALL FLOW 2000 PFT FILTER DEVICE	4	EX Plan Exclusion
ALL FLOW 3000 PFT FILTER DEVICE	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALL FLOW 3000 PFT FILTER KIT	4	EX Plan Exclusion
ALL FLOW 4000 PFT FILTER DEVICE	4	EX Plan Exclusion
ALL FLOW 4000 PFT FILTER KIT	4	EX Plan Exclusion
ALL FLOW 5000 PFT FILTER DEVICE	4	EX Plan Exclusion
ALL FLOW 5000 PFT FILTER KIT	4	EX Plan Exclusion
ALL FLOW 6000 PFT FILTER DEVICE	4	EX Plan Exclusion
ALL FLOW 6000 PFT FILTER KIT	4	EX Plan Exclusion
ALL FLOW 7000 PFT FILTER DEVICE	4	EX Plan Exclusion
BREATHE EASE NEB MASK/CHILD MISC	4	EX Plan Exclusion
BREATHE EASE NEB MASK/INFANT MISC	4	EX Plan Exclusion
CARETOUCH 2 CPAP HOSE HANGER MISC	4	EX Plan Exclusion
CARETOUCH CPAP & BIPAP HOSE MISC	4	EX Plan Exclusion
CARETOUCH CPAP MASK WIPES MISC	4	EX Plan Exclusion
CARETOUCH CPAP PRE-WASH SOLN MISC	4	EX Plan Exclusion
CARETOUCH CPAP TUBE BRUSH MISC	4	EX Plan Exclusion
CARETOUCH UNIVERSL CPAP FILTER MISC	4	EX Plan Exclusion
CO MONITOR CALIBRATION KIT	4	EX Plan Exclusion
CO MONITOR DEVICE	4	EX Plan Exclusion
CO MONITOR REPLACEMENT PIECES MISC	4	EX Plan Exclusion
DEXTER DRAGON PED COMP/NEB KIT	4	EX Plan Exclusion
DISPOSABLE FULL RANGE MOUTHPIECE MISC	4	EX Plan Exclusion
DISPOSABLE LOW RANGE MOUTHPIECE MISC	4	EX Plan Exclusion
DISPOSABLE LOW RANGE/PEDIATRIC MOUTHPIECE MISC	4	EX Plan Exclusion
DISPOSABLE UNIVERSAL RANGE MOUTHPIECE MISC	4	EX Plan Exclusion
EBASE CONTROLLER KIT MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FILTER AIR PP MISC	4	EX Plan Exclusion
FULL KIT NEBULIZER SET MISC	4	EX Plan Exclusion
HUDSON RCI AEROSOL MASK ADULT MISC	4	EX Plan Exclusion
IN-CHECK DIAL FLOW TRAINER DEVICE	4	EX Plan Exclusion
IN-CHECK INSPIRATORY FLOW MTR DEVICE	4	EX Plan Exclusion
INNOSPIRE REPLACEMENT FILTER MISC	4	EX Plan Exclusion
LITETOUCH MASK LARGE MISC	4	EX Plan Exclusion
LITETOUCH MASK MEDIUM MISC	4	EX Plan Exclusion
LITETOUCH MASK SMALL MISC	4	EX Plan Exclusion
NEBULIZER AIR TUBE/PLUGS MISC	4	EX Plan Exclusion
NEBULIZER MASK ADULT MISC	4	EX Plan Exclusion
NEBULIZER MASK CHILD MISC	4	EX Plan Exclusion
NEBULIZER/PEDIATRIC MASK KIT	4	EX Plan Exclusion
NEBULIZER/TUBING/MOUTHPIECE KIT	4	EX Plan Exclusion
OMBRA COMPRESSOR ADULT KIT	4	EX Plan Exclusion
OMBRA COMPRESSOR CHILD KIT	4	EX Plan Exclusion
OMBRA TABLE TOP COMPRESSOR DEVICE	4	EX Plan Exclusion
ONE FLOW SPIROMETER DEVICE	4	EX Plan Exclusion
ONE FLOW SPIROMETER KIT	4	EX Plan Exclusion
PARI ALTERA NEBULIZER HANDSET MISC	4	EX Plan Exclusion
PARI BABY CONVERSION KIT MISC	4	EX Plan Exclusion
PARI ERAPID NEBULIZER HANDSET MISC	4	EX Plan Exclusion
PARI EXPIRATORY FILTER SET DEVICE	4	EX Plan Exclusion
PARI LC PLUS PEDIATRIC KIT	4	EX Plan Exclusion
PARI MANUAL INTERRUPTER DEVICE	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARI MASK SET MISC	4	EX Plan Exclusion
PARI SOFT PLASTIC ADULT MASK MISC	4	EX Plan Exclusion
PARI SOFT PLASTIC PED MASK MISC	4	EX Plan Exclusion
PARI TREK S COMBO PACK DEVICE	4	EX Plan Exclusion
PARI TREK S PORTABLE POWER KIT	4	EX Plan Exclusion
PEDIATRIC COMPRESSOR/NEBULIZER KIT	4	EX Plan Exclusion
PFLEX MISC	4	EX Plan Exclusion
PILLOW MASK/ADULT MISC	4	EX Plan Exclusion
PILLOW MASK/CHILD MISC	4	EX Plan Exclusion
PILLOW MASK/PEDIATRIC MISC	4	EX Plan Exclusion
QUAKE DEVICE	4	EX Plan Exclusion
REPLACEMENT AIR FILTER MISC	4	EX Plan Exclusion
REUSABLE COMFORTSEAL MASK-LRG MISC	4	EX Plan Exclusion
REUSABLE COMFORTSEAL MASK-MED MISC	4	EX Plan Exclusion
REUSABLE COMFORTSEAL MASK-SML MISC	4	EX Plan Exclusion
SAMI THE SEAL NEBULIZER SYSTEM KIT	4	EX Plan Exclusion
SIDESTREAM ADULT FACE MASK MISC	4	EX Plan Exclusion
SIDESTREAM PEDIATRIC FACE MASK MISC	4	EX Plan Exclusion
SILICONE MASK/ADULT MISC	4	EX Plan Exclusion
SILICONE MASK/INFANT MISC	4	EX Plan Exclusion
SILICONE MASK/PEDIATRIC MISC	4	EX Plan Exclusion
SPIROMETER KIT	4	EX Plan Exclusion
SPIRO PD DEVICE	4	EX Plan Exclusion
THRESHOLD IMT MISC	4	EX Plan Exclusion
THRESHOLD PEP DEVICE	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VERSAPAP DEVICE	4	EX Plan Exclusion
VERSAPAP W/UNIVERSAL TUBING DEVICE	4	EX Plan Exclusion
WINDMILL TRAINER MISC	4	EX Plan Exclusion
RUBBER GOODS		
ENEMA BOTTLE MISC	4	EX Plan Exclusion
SCAR TREATMENTS		
CELLPAD SHEET	4	EX Plan Exclusion
CICASIL SHEET	4	EX Plan Exclusion
COATAMAX PATCH SHEET	4	EX Plan Exclusion
KELOTOP SHEET	4	EX Plan Exclusion
NUVAGEL SHEET	4	EX Plan Exclusion
NUVA III SHEET	4	EX Plan Exclusion
NUVAZIL II SHEET	4	EX Plan Exclusion
NUVAZIL SHEET	4	EX Plan Exclusion
POLYTOZA PATCH SHEET	4	EX Plan Exclusion
PROSILK SHEET	4	EX Plan Exclusion
REALSIL-6 SHEET	4	EX Plan Exclusion
REALSIL-8 SHEET	4	EX Plan Exclusion
SCARCIN PAD PLUS SHEET	4	EX Plan Exclusion
SCARCINPAD SHEET	4	EX Plan Exclusion
SCARHEAL SHEET	4	EX Plan Exclusion
SCARSILK SHEET	4	EX Plan Exclusion
SILADERM SHEET	4	EX Plan Exclusion
SILADONE SCAR PATCH SHEET	4	EX Plan Exclusion
SILINOIN 8 DAY SUPPLY SHEET	4	EX Plan Exclusion
SILIVEX SHEET	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SILTREX SHEET	4	EX Plan Exclusion
SKARLITE SHEET	4	EX Plan Exclusion
SZOSIL 15 DAY SUPPLY SHEET	4	EX Plan Exclusion
SZOSIL 8 DAY SUPPLY SHEET	4	EX Plan Exclusion
SEIZURE MONITORING PRODUCTS		
EMBRACE SEIZURE MONITORING SYS KIT	4	EX Plan Exclusion
SPACER/AEROSOL-HOLDING CHAMBERS & SUPPLIES		
AEROCHAMBER2GO ANTI-STATIC DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER HOLDING CHAMBER DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER MINI CHAMBER DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER MV MISC	4	QL EX Plan Exclusion
AEROCHAMBER PLS FLOVU MTHPIECE DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU INTERM DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU LARGE MISC	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU MEDIUM MISC	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU MISC	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU SMALL MISC	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLO-VU W/MASK MISC	4	QL EX Plan Exclusion
AEROCHAMBER PLUS FLOW VU MISC	4	QL EX Plan Exclusion
AEROCHAMBER W/FLOWSIGNAL MISC	4	QL EX Plan Exclusion
AEROCHAMBER Z-STAT PLUS CHAMBR MISC	4	QL EX Plan Exclusion
AEROCHAMBER Z-STAT PLUS/LARGE MISC	4	QL EX Plan Exclusion
AEROCHAMBER Z-STAT PLUS/MEDIUM MISC	4	QL EX Plan Exclusion
AEROCHAMBER Z-STAT PLUS MISC	4	QL EX Plan Exclusion
AEROCHAMBER Z-STAT PLUS/SMALL MISC	4	QL EX Plan Exclusion
AEROVENT PLUS DEVICE	4	QL EX Plan Exclusion
BREATHE EASE LARGE DEVICE	4	QL EX Plan Exclusion
BREATHE EASE MEDIUM DEVICE	4	QL EX Plan Exclusion
BREATHE EASE SMALL DEVICE	4	QL EX Plan Exclusion
BREATHERITE VALVED MDI CHAMBER DEVICE	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CLEVER CHOICE HOLDING CHAMBER DEVICE	4	QL EX Plan Exclusion
COMPACT SPACE CHAMBER DEVICE	4	QL EX Plan Exclusion
COMPACT SPACE CHAMBER/LG MASK DEVICE	4	QL EX Plan Exclusion
COMPACT SPACE CHAMBER/MED MASK DEVICE	4	QL EX Plan Exclusion
COMPACT SPACE CHAMBER/SM MASK DEVICE	4	QL EX Plan Exclusion
EASIVENT MASK LARGE MISC	4	QL EX Plan Exclusion
EASIVENT MASK MEDIUM MISC	4	QL EX Plan Exclusion
EASIVENT MASK SMALL MISC	4	QL EX Plan Exclusion
EASIVENT MISC	4	QL EX Plan Exclusion
EQ SPACE CHAMBER ANTI-STATIC DEVICE	4	QL EX Plan Exclusion
EQ SPACE CHAMBER ANTI-STATIC L DEVICE	4	QL EX Plan Exclusion
EQ SPACE CHAMBER ANTI-STATIC M DEVICE	4	QL EX Plan Exclusion
EQ SPACE CHAMBER ANTI-STATIC S DEVICE	4	QL EX Plan Exclusion
FLEXICHAMBER DEVICE	4	QL EX Plan Exclusion
INSPIRACHAMBER/LARGE DEVICE	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INSPIRACHAMBER/MEDIUM DEVICE	4	QL EX Plan Exclusion
INSPIRACHAMBER/MOUTHPIECE DEVICE	4	QL EX Plan Exclusion
INSPIRACHAMBER/SMALL DEVICE	4	QL EX Plan Exclusion
INSPIREASE MISC	4	QL EX Plan Exclusion
MICROCHAMBER DEVICE	4	QL EX Plan Exclusion
MICROCHAMBER MISC	4	QL EX Plan Exclusion
MICROSPACER MISC	4	QL EX Plan Exclusion
OPTICHAMBER DIAMOND DEVICE	4	QL EX Plan Exclusion
OPTICHAMBER DIAMOND-LG MASK DEVICE	4	QL EX Plan Exclusion
OPTICHAMBER DIAMOND-MD MASK MISC	4	QL EX Plan Exclusion
OPTICHAMBER DIAMOND MISC	4	QL EX Plan Exclusion
OPTICHAMBER DIAMOND-SM MASK MISC	4	QL EX Plan Exclusion
POCKET CHAMBER DEVICE	4	QL EX Plan Exclusion
POCKET SPACER DEVICE	4	QL EX Plan Exclusion
PROCHAMBER VHC DEVICE	4	QL EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RITEFLO DEVICE	4	QL EX Plan Exclusion
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	4	QL EX Plan Exclusion
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	4	QL EX Plan Exclusion
VORTEX VALVE CHAMBER-PEDI MASK DEVICE	4	QL EX Plan Exclusion
VORTEX VALVED HOLDING CHAMBER DEVICE	4	QL EX Plan Exclusion
INSPIREASE RESERVOIR BAGS MISC	4	QL EX Plan Exclusion
FLEXICHAMBER ADULT MASK/SMALL MISC	4	QL EX Plan Exclusion
FLEXICHAMBER CHILD MASK/LARGE MISC	4	QL EX Plan Exclusion
FLEXICHAMBER CHILD MASK/SMALL MISC	4	QL EX Plan Exclusion
SUBCUTANEOUS ADMINISTRATION SUPPLIES		
INSUFLOXON 25G X 0.71" MISC	4	EX Plan Exclusion
SURGICAL SEALANTS		
PREVELEAK SURGICAL SEALANT LIQUID	4	EX Plan Exclusion
TRACHEOSTOMY CARE & SUPPLIES		
ARGYLE TRACHEOSTOMY CARE TRAY KIT	4	EX Plan Exclusion
TRANSCRANIAL MAGNETIC STIMULATORS		
SAVI DEVICE	4	EX Plan Exclusion
SAVI DUAL DEVICE	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TUMOR TREATING FIELDS PRODUCTS (TTFIELDS)		
OPTUNE DEVICE	4	EX Plan Exclusion
OPTUNE LUA DEVICE	4	EX Plan Exclusion
URINARY DRAINAGE & IRRIGATION SUPPLIES		
BARD IRRIGATION SYRINGE/BULB MISC	4	EX Plan Exclusion
KANGAROO IRRIGATION KIT MISC	4	EX Plan Exclusion
KANGAROO IRRIGATION SYRINGE MISC	4	EX Plan Exclusion
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE RECEPTOR ANTAG (CGRP)		
QULIPTA 10 MG TAB	3	QL PA
QULIPTA 30 MG TAB	3	QL PA
QULIPTA 60 MG TAB	3	QL PA
NURTEC 75 MG TAB DISP	2	QL PA
UBRELVY 100 MG TAB	2	QL PA
UBRELVY 50 MG TAB	2	QL PA
ZAVZPRET 10 MG/ACT SOLUTION	3	PA
CGRP RECEPTOR ANTAGONISTS - MONOCLONAL ANTIBODIES		
VYEPTI 100 MG/ML SOLUTION	4	PA EX Plan Exclusion
AIMOVIG 140 MG/ML SOLN A-INJ	2	QL PA
AIMOVIG 70 MG/ML SOLN A-INJ	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AJOVY 225 MG/1.5ML SOLN A-INJ	2	QL PA
AJOVY 225 MG/1.5ML SOLN PRSYR	2	QL PA
EMGALITY 120 MG/ML SOLN A-INJ	2	QL PA
EMGALITY 120 MG/ML SOLN PRSYR	2	QL PA
EMGALITY (300 MG DOSE) 100 MG/ML SOLN PRSYR	2	QL PA
ERGOT COMBINATIONS		
CAFERGOT 1-100 MG TAB	3	PA
ERGOTAMINE-CAFFEINE 1-100 MG TAB	2	PA
<i>dihydroergotamine mesylate inj 1 mg/ml</i>	2	QL PA
<i>dihydroergotamine mesylate nasal spray 4 mg/ml</i>	2	QL PA
MIGRAINE PRODUCTS - CYCLOOXYGENASE 2 (COX-2) INHIBITORS		
ELYXYB 120 MG/4.8ML SOLUTION	3	
MIGRAINE PRODUCTS - NSAIDS		
<i>diclofenac potassium (migraine) packet 50 mg</i>	1	QL
SELECTIVE SEROTONIN AGONISTS 5-HT(1)		
<i>almotriptan malate tab 12.5 mg</i>	2	QL PA
<i>almotriptan malate tab 6.25 mg</i>	2	QL PA
<i>eletriptan hydrobromide tab 20 mg (base equivalent)</i>	1	QL
<i>eletriptan hydrobromide tab 40 mg (base equivalent)</i>	1	QL

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>frovatriptan succinate tab 2.5 mg (base equivalent)</i>	2	QL PA
<i>naratriptan hcl tab 1 mg (base equiv)</i>	1	QL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL
<i>naratriptan hcl tab 2.5 mg (base equiv)</i>	1	QL
<i>rizatriptan benzoate tab 10 mg (base equivalent)</i>	1	QL
<i>rizatriptan benzoate oral disintegrating tab 10 mg (base eq)</i>	1	QL
<i>rizatriptan benzoate tab 5 mg (base equivalent)</i>	1	QL
<i>rizatriptan benzoate oral disintegrating tab 5 mg (base eq)</i>	1	QL
<i>sumatriptan nasal spray 20 mg/act</i>	2	QL PA
<i>sumatriptan nasal spray 5 mg/act</i>	2	QL PA
ONZETRA XSAIL 11 MG/NOSEPC EXHP	3	QL PA
<i>sumatriptan succinate tab 100 mg</i>	1	QL
<i>sumatriptan succinate tab 25 mg</i>	1	QL
<i>sumatriptan succinate solution auto-injector 4 mg/0.5ml</i>	2	QL PA
<i>sumatriptan succinate tab 50 mg</i>	1	QL
<i>sumatriptan succinate solution auto-injector 6 mg/0.5ml</i>	2	QL PA
<i>sumatriptan succinate inj 6 mg/0.5ml</i>	2	QL PA
SUMATRIPTAN SUCCINATE REFILL 4 MG/0.5ML SOLN CART	2	QL PA
<i>sumatriptan succinate solution cartridge 4 mg/0.5ml</i>	2	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUMATRIPTAN SUCCINATE REFILL 6 MG/0.5ML SOLN CART	2	QL PA
<i>sumatriptan succinate solution cartridge 6 mg/0.5ml</i>	2	QL PA
ZOLMITRIPTAN 2.5 MG SOLUTION	1	QL
<i>zolmitriptan tab 2.5 mg</i>	1	QL
<i>zolmitriptan orally disintegrating tab 2.5 mg</i>	1	QL
<i>zolmitriptan nasal spray 5 mg/spray unit</i>	1	QL
<i>zolmitriptan tab 5 mg</i>	1	QL
<i>zolmitriptan orally disintegrating tab 5 mg</i>	1	QL
<i>zolmitriptan tab 2.5 mg</i>	3	QL PA
ZOMIG 2.5 MG TAB	3	QL PA
<i>zolmitriptan tab 5 mg</i>	3	QL PA
ZOMIG 5 MG TAB	3	QL PA
ZOMIG ZMT 2.5 MG TAB DISP	3	QL PA
ZOMIG ZMT 5 MG TAB DISP	3	QL PA
SELECTIVE SEROTONIN AGONISTS 5-HT(1F)		
REYVOW 100 MG TAB	3	QL PA
REYVOW 50 MG TAB	3	QL PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MINERALS & ELECTROLYTES		
BICARBONATES		
SODIUM ACETATE 2 MEQ/ML SOLUTION	4	EX Plan Exclusion
<i>sodium acetate inj 2 meq/ml</i>	4	EX Plan Exclusion
SODIUM ACETATE 4 MEQ/ML SOLUTION	4	EX Plan Exclusion
<i>sodium acetate inj 4 meq/ml</i>	4	EX Plan Exclusion
<i>sodium bicarbonate iv soln 4.2%</i>	4	EX Plan Exclusion
SODIUM BICARBONATE 7.5 % SOLUTION	4	EX Plan Exclusion
SODIUM BICARBONATE 8.4 % SOLUTION	4	EX Plan Exclusion
<i>sodium bicarbonate iv soln 8.4%</i>	4	EX Plan Exclusion
SODIUM BICARBONATE-DEXTROSE 150-5 MEQ/L-% SOLUTION	4	EX Plan Exclusion
THAM 30 MEQ/100ML SOLUTION	4	EX Plan Exclusion
TROMETHAMINE 30 MEQ/100ML SOLUTION	4	EX Plan Exclusion
<i>tromethamine iv soln 30 meq/100 ml (0.3 m)</i>	4	EX Plan Exclusion
CALCIUM		
CALCIUM CHLORIDE 10 % SOLUTION	4	EX Plan Exclusion
<i>calcium chloride inj 10%</i>	4	EX Plan Exclusion
CALCIUM GLUCONATE 1000 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
CALCIUM GLUCONATE 10 % SOLUTION	4	EX Plan Exclusion
<i>calcium gluconate inj 10%</i>	4	EX Plan Exclusion
CALCIUM COMBINATIONS		
CALCIUM GLUCONATE-NACL 1-0.675 GM/50ML-% SOLUTION	4	EX Plan Exclusion
<i>calcium gluconate-nacl iv soln 1 gm/50ml-0.675% (20 mg/ml)</i>	4	EX Plan Exclusion
CALCIUM GLUCONATE-NACL 1-0.8 GM/100ML-% SOLUTION	4	EX Plan Exclusion
CALCIUM GLUCONATE-NACL 1-0.9 GM/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CALCIUM GLUCONATE-NACL 2-0.675 GM/100ML-% SOLUTION	4	EX Plan Exclusion
<i>calcium gluconate-nacl iv soln 2 gm/100ml-0.675% (20 mg/ml)</i>	4	EX Plan Exclusion
CALCIUM GLUCONATE-NACL 2-0.9 GM/100ML-% SOLUTION	4	EX Plan Exclusion
ELECTROLYTES & DEXTROSE		
<i>dextrose 5% in lactated ringers</i>	4	EX Plan Exclusion
DEXTROSE-NACL 5-0.9 % SOLUTION	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 10-0.2 % SOLUTION	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 10-0.45 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 2.5-0.45 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 5% w/ sodium chloride 0.225%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.225 % SOLUTION	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.2 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 5% w/ sodium chloride 0.33%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.33 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 5% w/ sodium chloride 0.3%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.3 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 5% w/ sodium chloride 0.45%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.45 % SOLUTION	4	EX Plan Exclusion
<i>dextrose 5% w/ sodium chloride 0.9%</i>	4	EX Plan Exclusion
DEXTROSE-SODIUM CHLORIDE 5-0.9 % SOLUTION	4	EX Plan Exclusion
DEXTROSE 5%/ELECTROLYTE #48 SOLUTION	4	EX Plan Exclusion
IONOSOL-MB IN D5W SOLUTION	4	EX Plan Exclusion
NORMOSOL-M IN D5W SOLUTION	4	EX Plan Exclusion
ISOLYTE-P IN D5W SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NORMOSOL-R IN D5W SOLUTION	4	EX Plan Exclusion
ELLIOTTS B SOLUTION	4	EX Plan Exclusion
KCL-LACTATED RINGERS-D5W 20 MEQ/L SOLUTION	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN DEXTROSE 10-5 MEQ/L-% SOLUTION	4	EX Plan Exclusion
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN DEXTROSE 20-5 MEQ/L-% SOLUTION	4	EX Plan Exclusion
<i>kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 10-5-0.45 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.225% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 20-5-0.225 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 20-5-0.2 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 20-5-0.45 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 20-5-0.9 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 30-5-0.45 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 40-5-0.45 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	4	EX Plan Exclusion
KCL IN DEXTROSE-NACL 40-5-0.9 MEQ/L-%-% SOLUTION	4	EX Plan Exclusion
ELECTROLYTES PARENTERAL		
MULTIPLE ELECTRO TYPE 1 PH 5.5 SOLUTION	4	EX Plan Exclusion
PLASMA-LYTE 148 SOLUTION	4	EX Plan Exclusion
<i>*electrolyte-a solution***</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PLASMA-LYTE A SOLUTION	4	EX Plan Exclusion
NORMOSOL-R SOLUTION	4	EX Plan Exclusion
NORMOSOL-R PH 7.4 SOLUTION	4	EX Plan Exclusion
ISOLYTE-S SOLUTION	4	EX Plan Exclusion
ISOLYTE-S PH 7.4 SOLUTION	4	EX Plan Exclusion
<i>lactated ringer's solution</i>	4	EX Plan Exclusion
LACTATED RINGERS SOLUTION	4	EX Plan Exclusion
HYPERLYTE-CR CONC	4	EX Plan Exclusion
TPN ELECTROLYTES CONC	4	EX Plan Exclusion
KCL (0.149%) IN NAACL 20-0.45 MEQ/L-% SOLUTION	4	EX Plan Exclusion
KCL (0.149%) IN NAACL 20-0.9 MEQ/L-% SOLUTION	4	EX Plan Exclusion
KCL (0.298%) IN NAACL 40-0.9 MEQ/L-% SOLUTION	4	EX Plan Exclusion
KCL (IN NAACL 0.9%) 40 MEQ/500ML SOLUTION	4	EX Plan Exclusion
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN NAACL 20-0.45 MEQ/L-% SOLUTION	4	EX Plan Exclusion
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN NAACL 20-0.9 MEQ/L-% SOLUTION	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN NAACL 20 MEQ/250ML SOLUTION	4	EX Plan Exclusion
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE IN NAACL 40-0.9 MEQ/L-% SOLUTION	4	EX Plan Exclusion
KCL-LIDOCAINE-NAACL 10-10 MEQ-MG /100ML SOLUTION	4	EX Plan Exclusion
<i>ringer's solution</i>	4	EX Plan Exclusion
FLUORIDE		
<i>sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf)</i>	1	
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SODIUM FLUORIDE 0.55 (0.25 F) MG CHEW TAB	1	
<i>sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)</i>	1	
SODIUM FLUORIDE 1.1 (0.5 F) MG CHEW TAB	1	
<i>sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)</i>	1	
SODIUM FLUORIDE 1.1 (0.5 F) MG/ML SOLUTION	1	
SODIUM FLUORIDE 1.1 (0.5 F) MG TAB	1	
SODIUM FLUORIDE 2.2 (1 F) MG CHEW TAB	1	
<i>sodium fluoride chew tab 1 mg f (from 2.2 mg naf)</i>	1	
SODIUM FLUORIDE 2.2 (1 F) MG TAB	1	
MAGNESIUM		
MAGNESIUM SULFATE 20 GM/500ML SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate iv soln 20 gm/500ml (40 mg/ml)</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE 2 GM/50ML SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate iv soln 2 gm/50ml (40 mg/ml)</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE 40 GM/1000ML SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate iv soln 40 gm/1000ml (40 mg/ml)</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE 4 GM/100ML SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate iv soln 4 gm/100ml (40 mg/ml)</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE 4 GM/50ML SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate iv soln 4 gm/50ml (80 mg/ml)</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE 50 % SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate inj 50%</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE IN D5W 1-5 GM/100ML-% SOLUTION	4	EX Plan Exclusion
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	4	EX Plan Exclusion
MAGNESIUM SULFATE-NACL 2-0.9 GM/50ML-% SOLUTION	4	EX Plan Exclusion
MANGANESE		
MANGANESE CHLORIDE 0.1 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOSPHATE		
PHOSPHO-TRIN K500 500 MG TAB	1	
POTASSIUM PHOSPHATES 150 MMOLE/50ML SOLUTION	4	EX Plan Exclusion
<i>potassium phosphates inj 150 mm/50ml (phos) 220 meq/50ml (k)</i>	4	EX Plan Exclusion
POTASSIUM PHOSPHATES 15 MMOLE/5ML SOLUTION	4	EX Plan Exclusion
<i>potassium phosphates inj 15 mm/5ml (phos) 22 meq/5ml (k)</i>	4	EX Plan Exclusion
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	4	EX Plan Exclusion
POTASSIUM PHOSPHATES(66 MEQ K) 45 MMOLE/15ML SOLUTION	4	EX Plan Exclusion
<i>potassium phosphates inj 45 mm/15ml (phos) 66 meq/15ml (k)</i>	4	EX Plan Exclusion
POTASSIUM PHOSPHATES(71 MEQ K) 45 MMOLE/15ML SOLUTION	4	EX Plan Exclusion
POTASSIUM PHOSPHATES-NACL 15 MMOL/100ML SOLUTION	4	EX Plan Exclusion
POTASSIUM PHOSPHATES-NACL 15 MMOL/250ML SOLUTION	4	EX Plan Exclusion
POTASSIUM PHOSPHATES-NACL 30 MMOL/500ML SOLUTION	4	EX Plan Exclusion
PHOSPHA 250 NEUTRAL 155-852-130 MG TAB	1	
PHOSPHOROUS 155-852-130 MG TAB	1	
PHOSPHO-TRIN 250 NEUTRAL 155-852-130 MG TAB	1	
<i>pot phos monobasic w/sod phos di & monobas tab 155-852-130mg</i>	1	
WES-PHOS 250 NEUTRAL 155-852-130 MG TAB	1	
GLYCOPHOS 1 MMOLE/ML SOLUTION	4	EX Plan Exclusion
<i>sodium phosphates inj 150 mm/50ml (phos) 200 meq/50ml (na)</i>	4	EX Plan Exclusion
SODIUM PHOSPHATES 15 MMOLE/5ML SOLUTION	4	EX Plan Exclusion
<i>sodium phosphates inj 15 mm/5ml (phos) 20 meq/5ml (na)</i>	4	EX Plan Exclusion
SODIUM PHOSPHATES 45 MMOLE/15ML SOLUTION	4	EX Plan Exclusion
<i>sodium phosphates inj 45 mm/15ml (phos) 60 meq/15ml (na)</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
POTASSIUM		
POTASSIUM ACETATE 2 MEQ/ML SOLUTION	4	EX Plan Exclusion
<i>potassium acetate inj 2 meq/ml</i>	4	EX Plan Exclusion
EFFER-K 25 MEQ EFFER TAB	1	
<i>potassium bicarbonate effer tab 25 meq</i>	1	
<i>potassium bicarbonate effer tab 25 meq</i>	1	
KLOR-CON 10 10 MEQ TAB ER	1	
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride powder packet 20 meq</i>	1	
KLOR-CON 8 MEQ TAB ER	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
POTASSIUM CHLORIDE 100 MEQ/50ML SOLN PRSYR	4	EX Plan Exclusion
POTASSIUM CHLORIDE 10 MEQ/100ML SOLUTION	4	EX Plan Exclusion
<i>potassium chloride inj 10 meq/100ml</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE 10 MEQ/50ML SOLUTION	4	EX Plan Exclusion
<i>potassium chloride inj 10 meq/50ml</i>	4	EX Plan Exclusion
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
POTASSIUM CHLORIDE 20 MEQ/100ML SOLUTION	4	EX Plan Exclusion
<i>potassium chloride inj 20 meq/100ml</i>	4	EX Plan Exclusion
<i>potassium chloride oral soln 10% (20 meq/15ml)</i>	1	
POTASSIUM CHLORIDE 20 MEQ/50ML SOLUTION	4	EX Plan Exclusion
<i>potassium chloride inj 20 meq/50ml</i>	4	EX Plan Exclusion
<i>potassium chloride powder packet 20 meq</i>	1	
<i>potassium chloride inj 2 meq/ml</i>	4	EX Plan Exclusion
POTASSIUM CHLORIDE 40 MEQ/100ML SOLUTION	4	EX Plan Exclusion
<i>potassium chloride inj 40 meq/100ml</i>	4	EX Plan Exclusion
<i>potassium chloride oral soln 20% (40 meq/15ml)</i>	1	
<i>potassium chloride cap er 10 meq</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>potassium chloride tab er 10 meq</i>	1	
<i>potassium chloride tab er 20 meq (1500 mg)</i>	1	
<i>potassium chloride cap er 8 meq</i>	1	
POTASSIUM CHLORIDE ER 8 MEQ TAB ER	1	
<i>potassium chloride tab er 8 meq (600 mg)</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 10 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 15 meq</i>	1	
<i>potassium chloride microencapsulated crys er tab 20 meq</i>	1	
POTASSIUM COMBINATIONS		
EFFER-K 10 MEQ EFFER TAB	3	
EFFER-K 20 MEQ EFFER TAB	3	
SODIUM		
<i>sodium chloride iv soln 0.45%</i>	4	EX Plan Exclusion
SODIUM CHLORIDE 0.9 % SOLUTION	4	EX Plan Exclusion
<i>sodium chloride iv soln 0.9%</i>	4	EX Plan Exclusion
<i>sodium chloride inj 2.5 meq/ml (14.6%)</i>	4	EX Plan Exclusion
<i>sodium chloride iv soln 3%</i>	4	EX Plan Exclusion
SODIUM CHLORIDE 4 MEQ/ML SOLUTION	4	EX Plan Exclusion
<i>sodium chloride iv soln 4 meq/ml (23.4%)</i>	4	EX Plan Exclusion
<i>sodium chloride iv soln 5%</i>	4	EX Plan Exclusion
<i>sodium chloride preservative free (pf) inj 0.9%</i>	4	EX Plan Exclusion
AQUASTAT 0.9 % SOLUTION	4	EX Plan Exclusion
AQUASTAT SFR 0.9 % SOLUTION	4	EX Plan Exclusion
BD POSIFLUSH 0.9 % SOLUTION	4	EX Plan Exclusion
BD POSIFLUSH SAFESCRUB 0.9 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT FLUSH SYRINGE 0.9 % SOLUTION	4	EX Plan Exclusion
MONOJECT SODIUM CHLORIDE FLUSH 0.9 % SOLUTION	4	EX Plan Exclusion
NORMAL SALINE FLUSH 0.9 % SOLUTION	4	EX Plan Exclusion
SALINE FLUSH 0.9 % SOLUTION	4	EX Plan Exclusion
SODIUM CHLORIDE FLUSH 0.9 % SOLUTION	4	EX Plan Exclusion
<i>sodium chloride flush iv soln 0.9%</i>	4	EX Plan Exclusion
TRACE MINERAL COMBINATIONS		
THE LIQUILIFT TRACE 10-1000-500-60 MCG/ML KIT	4	EX Plan Exclusion
MULTITRACE-4 NEONATAL 100-25-1500 MCG/ML SOLUTION	4	EX Plan Exclusion
MULTITRACE-4 PEDIATRIC 1-100-25-1000 MCG/ML SOLUTION	4	EX Plan Exclusion
TRACE ELEMENTS 4/PEDIATRIC 1-100-30-500 MCG/ML SOLUTION	4	EX Plan Exclusion
MULTRYS 60-3-6-1000 MCG/ML SOLUTION	4	EX Plan Exclusion
TRALEMENT 300-55-60-3000 MCG/ML SOLUTION	4	EX Plan Exclusion
TRACE MINERALS		
CHROMIC CHLORIDE 40 MCG/10ML SOLUTION	4	EX Plan Exclusion
<i>chromic chloride inj 40 mcg/10ml (4 mcg/ml) (elemental cr)</i>	4	EX Plan Exclusion
CUPRIC CHLORIDE 0.4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>cupric chloride inj 0.4 mg/ml (elemental)</i>	4	EX Plan Exclusion
SELENIOUS ACID 12 MCG/2ML SOLUTION	4	EX Plan Exclusion
SELENIOUS ACID 40 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>selenious acid inj 40 mcg/ml</i>	4	EX Plan Exclusion
SELENIOUS ACID 60 MCG/ML SOLUTION	4	EX Plan Exclusion
ZINC		
ZINC CHLORIDE 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>zinc chloride inj 1 mg/ml</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZINC SULFATE 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>zinc sulfate inj 1 mg/ml</i>	4	EX Plan Exclusion
ZINC SULFATE 3 MG/ML SOLUTION	4	EX Plan Exclusion
<i>zinc sulfate inj 3 mg/ml</i>	4	EX Plan Exclusion
ZINC SULFATE 5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>zinc sulfate inj 5 mg/ml</i>	4	EX Plan Exclusion
MISCELLANEOUS THERAPEUTIC CLASSES		
ACTIVATED PHOSPHOINOSITIDE 3-KINASE DELTA SYNDROME AGENT		
JOENJA 70 MG TAB	3	PA S
ALLOGENEIC THYMUS TISSUE		
RETHYMIC IMPLANT	4	PA S EX Plan Exclusion
ANTILEPTOTICS		
THALOMID 100 MG CAP	2	PA S
THALOMID 150 MG CAP	2	PA S
THALOMID 200 MG CAP	2	PA S
THALOMID 50 MG CAP	2	PA S
B-LYMPHOCYTE STIMULATOR (BLYS)-SPECIFIC INHIBITORS		
BENLYSTA 120 MG RECON SOLN	4	PA S EX Plan Exclusion
BENLYSTA 200 MG/ML SOLN A-INJ	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENLYSTA 200 MG/ML SOLN PRSYR	3	PA S
BENLYSTA 400 MG RECON SOLN	4	PA S EX Plan Exclusion
CHELATING AGENTS		
EDETATE DISODIUM 150 MG/ML SOLUTION	4	EX Plan Exclusion
<i>penicillamine cap 250 mg</i>	1	
<i>penicillamine tab 250 mg</i>	1	
<i>trientine hcl cap 250 mg</i>	1	S
<i>trientine hcl cap 250 mg</i>	1	S
TRIENTINE HCL 500 MG CAP	1	S
COLONY STIMULATING FACTOR-1 RECEPTOR (CSF-1R) ANTIBODIES		
NIKTIMVO 22 MG/0.44ML SOLUTION	4	PA S EX Plan Exclusion
NIKTIMVO 9 MG/0.18ML SOLUTION	4	PA S EX Plan Exclusion
CONTINUOUS RENAL REPLACEMENT THERAPY (CRRT) SOLUTIONS		
PRISMASOL BGK 4/0/1.2 32-4-1.2 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL BGK 0/2.5 32-2.5 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL BGK 2/3.5 32-2-3.5 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL BGK 4/2.5 32-4-2.5 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL B22GK 4/0 22-4 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL BGK 2/0 32-2 MEQ/L SOLUTION	4	EX Plan Exclusion
PRISMASOL BK 0/0/1.2 32-1.2 MEQ/L SOLUTION	4	EX Plan Exclusion
PHOXILLUM BK4/2.5 32-4-2.5-1 MEQ-MMOL/L SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOXILLUM B22K4/0 22-4-1 MEQ-MMOL/L SOLUTION	4	EX Plan Exclusion
TRISODIUM CITRATE/CRRT SOLUTION	4	EX Plan Exclusion
REGIOCIT 0.529 % SOLUTION	4	EX Plan Exclusion
CYCLOSPORINE ANALOGS		
<i>cyclosporine cap 100 mg</i>	1	S
<i>cyclosporine cap 25 mg</i>	1	S
<i>cyclosporine iv soln 50 mg/ml</i>	4	S EX Plan Exclusion
<i>cyclosporine iv soln 50 mg/ml</i>	4	S EX Plan Exclusion
SANDIMMUNE 100 MG CAP	3	PA S
SANDIMMUNE 100 MG/ML SOLUTION	3	PA S
SANDIMMUNE 25 MG CAP	3	PA S
SANDIMMUNE 50 MG/ML SOLUTION	4	PA S EX Plan Exclusion
<i>cyclosporine modified cap 100 mg</i>	1	S
<i>cyclosporine modified cap 100 mg</i>	1	S
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	S
<i>cyclosporine modified cap 25 mg</i>	1	S
<i>cyclosporine modified cap 25 mg</i>	1	S
<i>cyclosporine modified cap 50 mg</i>	1	S
<i>cyclosporine modified cap 50 mg</i>	1	S
<i>cyclosporine modified cap 100 mg</i>	1	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cyclosporine modified oral soln 100 mg/ml</i>	1	S
<i>cyclosporine modified cap 25 mg</i>	1	S
NEORAL 100 MG CAP	3	PA S
NEORAL 100 MG/ML SOLUTION	3	PA S
NEORAL 25 MG CAP	3	PA S
LUPKYNIS 7.9 MG CAP	3	PA S
FARNESYLTRANSFERASE INHIBITORS		
ZOKINVY 50 MG CAP	3	PA S
ZOKINVY 75 MG CAP	3	PA S
HOMEOPATHIC PRODUCTS		
ACUNOL TAB	4	EX Plan Exclusion
BHI URI-CONTROL TAB	4	EX Plan Exclusion
COLCIGEL GEL	4	EX Plan Exclusion
ECZEMOL TAB	4	EX Plan Exclusion
HYLAFEM SUPPOS	4	EX Plan Exclusion
MORCIN CREAM	4	EX Plan Exclusion
PSORIZIDE FORTE 30-1-15 MG TAB	4	EX Plan Exclusion
PSORIZIDE ULTRA TAB	4	EX Plan Exclusion
SPEEDGEL RX GEL	4	EX Plan Exclusion
STREPTOCOCCINUM 30C PELLETT	4	EX Plan Exclusion
TRANZGEL GEL	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRAUMEEL OINTMENT	4	EX Plan Exclusion
TRAUMEEL TAB	4	EX Plan Exclusion
WELLMIND VERTIGO TAB	4	EX Plan Exclusion
IMMUNE GLOBULIN IMMUNOSUPPRESSANTS		
THYMOGLOBULIN 25 MG RECON SOLN	4	PA EX Plan Exclusion
ATGAM 50 MG/ML SOLUTION	4	PA EX Plan Exclusion
IMMUNOMODULATORS - ALLOGENEIC CELLULAR IMMUNOTHERAPY		
RYONCIL <12.5KG 1 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 12.5KG TO <25KG 2 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 25KG TO <37.5KG 3 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 37.5KG TO <50KG 4 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 50KG TO <62.5KG 5 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 62.5KG TO <75KG 6 X 3.8 ML KIT	4	PA S EX Plan Exclusion
RYONCIL 75KG TO <87.5KG 7 X 3.8 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RYONCIL 87.5KG TO <100KG 8 X 3.8 ML KIT	4	PA S EX Plan Exclusion
IMMUNOMODULATORS - COMBINATIONS		
VYVGART HYTRULO 1000-10000 MG-UNT/5ML SOLN PRSYR	4	PA S EX Plan Exclusion
VYVGART HYTRULO 180-2000 MG-UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
IMMUNOMODULATORS FOR MYELOYDYSPLASTIC SYNDROMES		
<i>lenalidomide cap 10 mg</i>	1	PA S
<i>lenalidomide cap 15 mg</i>	1	PA S
<i>lenalidomide cap 20 mg</i>	1	PA S
<i>lenalidomide caps 2.5 mg</i>	1	PA S
<i>lenalidomide cap 25 mg</i>	1	PA S
<i>lenalidomide cap 5 mg</i>	1	PA S
INOSINE MONOPHOSPHATE DEHYDROGENASE INHIBITORS		
CELLCEPT 200 MG/ML RECON SUSP	3	PA S
CELLCEPT 250 MG CAP	3	PA S
CELLCEPT 500 MG TAB	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>mycophenolate mofetil for oral susp 200 mg/ml</i>	1	S
<i>mycophenolate mofetil cap 250 mg</i>	1	S
<i>mycophenolate mofetil tab 500 mg</i>	1	S
MYHIBBIN 200 MG/ML SUSPENSION	3	PA S
CELLCEPT INTRAVENOUS 500 MG RECON SOLN	4	PA S EX Plan Exclusion
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	4	S EX Plan Exclusion
<i>mycophenolate mofetil hcl for iv soln 500 mg (base equiv)</i>	4	S EX Plan Exclusion
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	S
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	S
<i>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)</i>	1	S
<i>mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)</i>	1	S
MYFORTIC 180 MG TAB DR	3	PA S
MYFORTIC 360 MG TAB DR	3	PA S
INTERLEUKIN-6 (IL-6) ANTAGONISTS		
SYLVANT 100 MG RECON SOLN	4	S EX Plan Exclusion
SYLVANT 400 MG RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MACROLIDE IMMUNOSUPPRESSANTS		
<i>everolimus tab 0.25 mg</i>	1	S
<i>everolimus tab 0.5 mg</i>	1	S
<i>everolimus tab 0.75 mg</i>	1	S
<i>everolimus tab 1 mg</i>	1	S
ZORTRESS 0.25 MG TAB	3	PA S
ZORTRESS 0.5 MG TAB	3	PA S
ZORTRESS 0.75 MG TAB	3	PA S
ZORTRESS 1 MG TAB	3	PA S
RAPAMUNE 0.5 MG TAB	3	PA S
RAPAMUNE 1 MG/ML SOLUTION	3	PA S
RAPAMUNE 1 MG TAB	3	PA S
RAPAMUNE 2 MG TAB	3	PA S
<i>sirolimus tab 0.5 mg</i>	1	S
<i>sirolimus oral soln 1 mg/ml</i>	1	S
<i>sirolimus tab 1 mg</i>	1	S
<i>sirolimus tab 2 mg</i>	1	S
ASTAGRAF XL 0.5 MG CAP ER 24H	3	PA S
ASTAGRAF XL 1 MG CAP ER 24H	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ASTAGRAF XL 5 MG CAP ER 24H	3	PA S
ENVARUSUS XR 0.75 MG TAB ER 24H	3	PA S
ENVARUSUS XR 1 MG TAB ER 24H	3	PA S
ENVARUSUS XR 4 MG TAB ER 24H	3	PA S
PROGRAF 0.2 MG PACKET	3	PA S
PROGRAF 0.5 MG CAP	3	PA S
PROGRAF 1 MG CAP	3	PA S
PROGRAF 1 MG PACKET	3	PA S
PROGRAF 5 MG CAP	3	PA S
PROGRAF 5 MG/ML SOLUTION	4	PA S EX Plan Exclusion
<i>tacrolimus cap 0.5 mg</i>	1	S
<i>tacrolimus cap 1 mg</i>	1	S
<i>tacrolimus cap 5 mg</i>	1	S
MISC NATURAL PRODUCTS		
AZALGIA CAP	4	EX Plan Exclusion
BRUSELIX TAB	4	EX Plan Exclusion
IMUBOLIC CAP	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRA HERS RX CAP	4	EX Plan Exclusion
ULTRA HIS CAP	4	EX Plan Exclusion
ULTRA PCOS CAP	4	EX Plan Exclusion
XYZMUNE CAP	4	EX Plan Exclusion
MONOCLONAL ANTIBODIES		
SIMULECT 10 MG RECON SOLN	4	PA S EX Plan Exclusion
SIMULECT 20 MG RECON SOLN	4	PA S EX Plan Exclusion
GAMIFANT 100 MG/20ML SOLUTION	4	PA S EX Plan Exclusion
GAMIFANT 10 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
GAMIFANT 50 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
UPLIZNA 100 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
ENSPRYNG 120 MG/ML SOLN PRSYR	2	PA S
NEONATAL FC RECEPTOR (FCRN) ANTAGONISTS		
VYVGART 400 MG/20ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
IMAAVY 1200 MG/6.5ML SOLUTION	4	PA S EX Plan Exclusion
RYSTIGGO 280 MG/2ML SOLUTION	3	PA S
RYSTIGGO 420 MG/3ML SOLUTION	3	PA S
RYSTIGGO 560 MG/4ML SOLUTION	3	PA S
RYSTIGGO 840 MG/6ML SOLUTION	3	PA S
PERITONEAL DIALYSIS SOLUTIONS		
EXTRANEAL 7.5 % SOLUTION	4	EX Plan Exclusion
DELFLX-LC/1.5% DEXTROSE 344 MOSM/L SOLUTION	4	EX Plan Exclusion
DELFLX-LC/2.5% DEXTROSE 394 MOSM/L SOLUTION	4	EX Plan Exclusion
DELFLX-LC/4.25% DEXTROSE 483 MOSM/L SOLUTION	4	EX Plan Exclusion
DELFLX-SM/1.5% DEXTROSE 347 MOSM/L SOLUTION	4	EX Plan Exclusion
DELFLX-SM/2.5% DEXTROSE 398 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL LOW CALCIUM/1.5% DEX 344 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL LOW CALCIUM/2.5% DEX 395 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL LOW CALCIUM/4.25% DEX 483 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL PD-2/1.5% DEXTROSE 346 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL PD-2/2.5% DEXTROSE 396 MOSM/L SOLUTION	4	EX Plan Exclusion
DIANEAL PD-2/4.25% DEXTROSE 485 MOSM/L SOLUTION	4	EX Plan Exclusion
ULTRABAG/DIANEAL/2.5% DEXTROSE 395 MOSM/L SOLUTION	4	EX Plan Exclusion
ULTRABAG/DIANEAL/4.25% DEX 483 MOSM/L SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULTRABAG/DIANEAL PD-2/1.5% DEX 346 MOSM/L SOLUTION	4	EX Plan Exclusion
ULTRABAG/DIANEAL PD-2/2.5% DEX 396 MOSM/L SOLUTION	4	EX Plan Exclusion
ULTRABAG/DIANEAL PD-2/4.25%DEX 485 MOSM/L SOLUTION	4	EX Plan Exclusion
PIK3CA-RELATED OVERGROWTH SPECTRUM AGENTS - PI3K INHIB		
VIJOICE 125 MG TAB THPK	3	PA S
VIJOICE 200 & 50 MG TAB THPK	3	PA S
VIJOICE 50 MG PACKET	3	PA S
VIJOICE 50 MG TAB THPK	3	PA S
POTASSIUM REMOVING AGENTS		
VELTASSA 16.8 GM PACKET	2	PA S
VELTASSA 1 GM PACKET	2	PA S
VELTASSA 25.2 GM PACKET	2	PA S
VELTASSA 8.4 GM PACKET	2	PA S
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	1	
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	1	
<i>*sodium polystyrene sulfonate powder**</i>	1	
<i>sodium polystyrene sulfonate susp 15 gm/60ml</i>	1	
SPS (SODIUM POLYSTYRENE SULF) 30 GM/120ML SUSPENSION	2	
LOKELMA 10 GM PACKET	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LOKELMA 5 GM PACKET	2	
PURINE ANALOGS		
<i>azathioprine tab 100 mg</i>	1	
<i>azathioprine tab 75 mg</i>	1	
<i>azathioprine tab 100 mg</i>	1	
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 50 mg</i>	1	
<i>azathioprine tab 75 mg</i>	1	
ROCK INHIBITORS		
REZUROCK 200 MG TAB	3	PA S
SCLEROSING AGENTS		
ETHAMOLIN 5 % SOLUTION	4	EX Plan Exclusion
ASCLERA 0.5 % SOLUTION	4	EX Plan Exclusion
ASCLERA 1 % SOLUTION	4	EX Plan Exclusion
POLIDOCANOL 5 % SOLUTION	4	EX Plan Exclusion
VARITHENA 180 MG/18ML FOAM	4	S EX Plan Exclusion
<i>sodium tetradecyl sulfate inj 3%</i>	4	EX Plan Exclusion
SOTRADECOL 1 % SOLUTION	4	EX Plan Exclusion
<i>sodium tetradecyl sulfate inj 3%</i>	4	EX Plan Exclusion
SELECTIVE T-CELL COSTIMULATION BLOCKERS		
NULOJIX 250 MG RECON SOLN	4	PA S EX Plan Exclusion
TYPE I INTERFERON (IFN) RECEPTOR ANTAGONISTS		
SAPHNELO 300 MG/2ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
UREMIC PRURITUS AGENTS		
KORSUVA 65 MCG/1.3ML SOLUTION	4	EX Plan Exclusion
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
LIDOCAINE HCL 4 % SOLUTION	2	
<i>lidocaine hcl viscous soln 2%</i>	1	
ANTI-INFECTIVES - THROAT		
<i>clotrimazole troche 10 mg</i>	1	
ORAVIG 50 MG TAB	3	PA
NYSTATIN 100000 UNIT/ML SUSPENSION	1	
<i>nystatin susp 100000 unit/ml</i>	1	
ANTISEPTIC COMBINATIONS - MOUTH/THROAT		
DEBACTEROL 30-50 % SOLUTION	3	
DEBACTEROL 30-50 % SOLUTION	3	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate soln 0.12%</i>	1	
<i>chlorhexidine gluconate soln 0.12%</i>	1	
DENTAL PRODUCTS - COMBINATIONS		
NAFRINSE DAILY ACIDULATED 1 MG/5ML RECON SOLN	3	
DENTA 5000 PLUS SENSITIVE 1.1-5 % GEL	3	
FLUORIDEX SENSITIVITY RELIEF 1.1-5 % GEL	3	
FLUORIMAX 5000 SENSITIVE 1.1-5 % GEL	3	
FRAICHE 5000 SENSITIVE 1.1-4.5 % GEL	3	
PREVIDENT 5000 ENAMEL PROTECT 1.1-5 % GEL	2	
PREVIDENT 5000 SENSITIVE 1.1-5 % GEL	2	
SOD FLUORIDE-POTASSIUM NITRATE 1.1-5 % GEL	1	
SODIUM FLUORIDE 5000 ENAMEL 1.1-5 % GEL	1	
SODIUM FLUORIDE 5000 SENSITIVE 1.1-5 % GEL	1	
FRAICHE 5000 PREVI 1.1-3 % GEL	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUORIDE DENTAL PRODUCTS		
CLINPRO 5000 1.1 % PASTE	1	
DENTA 5000 PLUS 1.1 % CREAM	1	
<i>sodium fluoride cream 1.1%</i>	1	
DENTAGEL 1.1 % GEL	1	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	1	
FLUORIDEX 1.1 % PASTE	1	
<i>sodium fluoride paste 1.1%</i>	1	
FLUORIDEX ENHANCED WHITENING 1.1 % PASTE	1	
FLUORIMAX 5000 1.1 % PASTE	1	
FRAICHE 5000 DENTAL 1.1 % GEL	1	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	1	
JUST RIGHT 5000 1.1 % PASTE	1	
NAFRINSE DAILY/NEUTRAL 0.05 % RECON SOLN	3	
NAFRINSE WEEKLY 0.2 % RECON SOLN	3	
PREVIDENT 0.2 % SOLUTION	3	
PREVIDENT 1.1 % GEL	3	
PREVIDENT 5000 BOOSTER PLUS 1.1 % PASTE	2	
PREVIDENT 5000 DRY MOUTH 1.1 % GEL	2	
PREVIDENT 5000 KIDS 1.1 % PASTE	2	
PREVIDENT 5000 ORTHO DEFENSE 1.1 % PASTE	2	
PREVIDENT 5000 PLUS 1.1 % CREAM	3	
SF 1.1 % GEL	1	
SF 5000 PLUS 1.1 % CREAM	1	
SODIUM FLUORIDE 0.2 % SOLUTION	1	
SODIUM FLUORIDE 1.1 % CREAM	1	
SODIUM FLUORIDE 1.1 % GEL	1	
<i>sodium fluoride gel 1.1% (0.5% f)</i>	1	
SODIUM FLUORIDE 5000 PLUS 1.1 % CREAM	1	
<i>sodium fluoride cream 1.1%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sodium fluoride cream 1.1%</i>	1	
SODIUM FLUORIDE 5000 PPM 1.1 % GEL	1	
SODIUM FLUORIDE 5000 PPM 1.1 % PASTE	1	
VANISH 5 % LIQUID ER	3	
EASYGEL 0.4 % GEL	1	
FLUORIDEX DAILY RENEWAL 0.63 % CONC	1	
PROTECTANTS - MOUTH/THROAT		
GELCLAIR GEL	3	
ORAFATE 10 % PASTE	3	
PROTHELIAL 10 % PASTE	3	
SILATRIX 10 % GEL	3	
SALIVA STIMULANTS		
<i>cevimeline hcl cap 30 mg</i>	1	
<i>pilocarpine hcl tab 5 mg</i>	1	
<i>pilocarpine hcl tab 7.5 mg</i>	1	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
<i>triamcinolone acetonide dental paste 0.1%</i>	1	
MULTIVITAMINS		
B-COMPLEX VITAMINS		
B-COMPLEX SOLUTION	4	EX Plan Exclusion
<i>*b-complex vitamin inj soln**</i>	4	EX Plan Exclusion
VITAMIN B-COMPLEX 100 SOLUTION	4	EX Plan Exclusion
VITAMIN B COMPLEX-HYDROXOCOBAL SOLUTION	4	EX Plan Exclusion
B-COMPLEX W/ C & FOLIC ACID		
ACTIVITE 1 MG TAB	1	
B-PLEX TAB	1	
DEXIFOL 5 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIALYVITE TAB	1	
<i>*b-complex w/ c & folic acid tab 1 mg***</i>	1	
HYLAVITE TAB	1	
MI-VITE RX 1 MG TAB	1	
MYNEPHRON 1 MG CAP	1	
<i>*b-complex w/ c & folic acid tab 1 mg***</i>	1	
RENAL 1 MG CAP	1	
TM-VITE RX 1 MG TAB	1	
TRIPHROCAPS 1 MG CAP	1	
TRONVITE 1 MG TAB	1	
<i>*b-complex w/ c & folic acid cap 1 mg***</i>	1	
VITASURE 1 MG TAB	1	
<i>*b-complex w/ c & folic acid tab 1 mg***</i>	1	
WESCAPS 1 MG CAP	1	
<i>*b-complex w/ c & folic acid tab 1 mg***</i>	1	
B-COMPLEX W/ C-ZN & FOLIC ACID		
DIALYVITE/ZINC TAB	3	
NEPHPLEX RX TAB	3	
B-COMPLEX W/ FOLIC ACID		
PAXLYTE CAP	1	
B-COMPLEX W/ LYSINE-ZN & FOLIC ACID		
SUPERVITE LIQUID	3	
IRON W/ VITAMINS		
<i>*iron w/ vitamin tab**</i>	1	
MULTIPLE VITAMINS W/ MINERALS		
BIOCEL TAB	1	
B-PLEX PLUS TAB	1	
LYSIPLEX PLUS TAB	1	
MULTIPRO CAP	1	
NUTRIFAC ZX TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
V-C FORTE CAP	1	
VIC-FORTE CAP	1	
VITACEL TAB	1	
VITA S FORTE TAB	1	
INFUVITE ADULT SOLUTION	4	EX Plan Exclusion
NOVITE CAP	1	
VITLIPID N ADULT EMULSION	4	EX Plan Exclusion
NIACINAMIDE W/ ZINC-COPPER & FOLIC ACID		
NICOMIDE 750-27-2-0.5 MG TAB	3	
NICOTINAMIDE 750-27-2-0.5 MG TAB	1	
PED MULTI VITAMINS W/FL & FE		
MULTI-VITAMIN/FLUORIDE/IRON 0.25-10 MG/ML SOLUTION	1	
PEDIATRIC MULTIPLE VITAMINS		
INFUVITE PEDIATRIC SOLUTION	4	EX Plan Exclusion
VITALIPID N INFANT EMULSION	4	EX Plan Exclusion
VITLIPID N INFANT EMULSION	4	EX Plan Exclusion
PRENATAL MV & MIN W/FE-FA		
NEONATAL FE 90-1 MG TAB	4	EX Plan Exclusion
DERMACINRX PRETRATE 1 MG TAB	4	EX Plan Exclusion
JENLIVA PRENATAL/POSTNATAL 1 MG CAP	4	EX Plan Exclusion
MATERVIA 0.5 MG CAP	4	EX Plan Exclusion
NEOMATERNA 1 MG TAB	4	EX Plan Exclusion
NEO-VITAL RX 1 MG TAB	4	EX Plan Exclusion
PRENATVITE COMPLETE 1 MG TAB	4	EX Plan Exclusion
PRENATVITE PLUS 1 MG TAB	4	EX Plan Exclusion
PRENATVITE RX 0.8 MG TAB	4	EX Plan Exclusion
CITRANATAL BLOOM 90-1 MG TAB	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENATAL 19 29-1 MG TAB	4	EX Plan Exclusion
SE-NATAL 19 29-1 MG TAB	4	EX Plan Exclusion
ATABEX EC 29-1 MG TAB DR	4	EX Plan Exclusion
INATAL GT TAB	4	EX Plan Exclusion
OBSTETRIX EC (WITH DOCUSATE) 29-1 MG TAB	4	EX Plan Exclusion
ATABEX OB 29-1 MG TAB	4	EX Plan Exclusion
MATERNACEL 20-1 MG TAB	4	EX Plan Exclusion
PNV TABS 20-1 20-1 MG TAB	4	EX Plan Exclusion
PREGENNA 20-1 MG TAB	4	EX Plan Exclusion
VINATE II 29-1 MG TAB	4	EX Plan Exclusion
VITALARA 20-1 MG TAB	4	EX Plan Exclusion
NATACHEW 28-1 MG CHEW TAB	4	EX Plan Exclusion
CONCEPT DHA 53.5-38-1 MG CAP	4	EX Plan Exclusion
TARON-C DHA 35-1 MG CAP	4	EX Plan Exclusion
VIRT-C DHA 53.5-38-1 MG CAP	4	EX Plan Exclusion
WESCAP-C DHA 53.5-38-1 MG CAP	4	EX Plan Exclusion
ENBRACE HR CAP	4	EX Plan Exclusion
VITAFOL GUMMIES 3.33-0.333-34.8 MG CHEW TAB	4	EX Plan Exclusion
C-NATE DHA 28-1-200 MG CAP	4	EX Plan Exclusion
PNV PRENATAL PLUS MULTIVIT+DHA 27-1 & 312 MG MISC	4	EX Plan Exclusion
RELNATE DHA 28-1-200 MG CAP	4	EX Plan Exclusion
VIRT-NATE DHA 28-1-200 MG CAP	4	EX Plan Exclusion
VIVA DHA 28-1-200 MG CAP	4	EX Plan Exclusion
VP-PNV-DHA 28-1-215.8 MG CAP	4	EX Plan Exclusion
WESNATE DHA 28-1-200 MG CAP	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPLETENATE 29-1 MG CHEW TAB	4	EX Plan Exclusion
CO-NATAL FA TAB	4	EX Plan Exclusion
M-NATAL PLUS 27-1 MG TAB	4	EX Plan Exclusion
NATALVIT TAB	4	EX Plan Exclusion
NEONATAL COMPLETE 27-1 MG TAB	4	EX Plan Exclusion
NEONATAL COMPLETE 29-1 MG TAB	4	EX Plan Exclusion
NEONATAL PLUS 27-1 MG TAB	4	EX Plan Exclusion
NIVA-PLUS 27-1 MG TAB	4	EX Plan Exclusion
ONE VITE WOMENS PLUS 27-1 MG TAB	4	EX Plan Exclusion
PNV 27-CA/FE/FA 60-1 MG TAB	4	EX Plan Exclusion
PRENARA 15-1 MG CAP	4	EX Plan Exclusion
PRENATAL 19 29-1 MG CHEW TAB	4	EX Plan Exclusion
PRENATAL 19 CHEW TAB	4	EX Plan Exclusion
PRENATAL 27-1 MG TAB	4	EX Plan Exclusion
PRENATAL PLUS 27-1 MG TAB	4	EX Plan Exclusion
PRENATAL PLUS VITAMIN/MINERAL 27-1 MG TAB	4	EX Plan Exclusion
PRENATAL VITAMIN PLUS LOW IRON 27-1 MG TAB	4	EX Plan Exclusion
PRENATOL-M 27-1.2 MG TAB	4	EX Plan Exclusion
PRENATRIX 27-1 MG TAB	4	EX Plan Exclusion
PRENATRYL 27-1 MG TAB	4	EX Plan Exclusion
PREPLUS 27-1 MG TAB	4	EX Plan Exclusion
PRETAB 29-1 MG TAB	4	EX Plan Exclusion
SE-NATAL 19 29-1 MG CHEW TAB	4	EX Plan Exclusion
TRICARE TAB	4	EX Plan Exclusion
TRINATAL RX 1 60-1 MG TAB	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRINATE TAB	4	EX Plan Exclusion
VINATE ONE 60-1 MG TAB	4	EX Plan Exclusion
VITAFOL-OB TAB	4	EX Plan Exclusion
VITATHELY WITH GINGER 27-1 MG TAB	4	EX Plan Exclusion
WESTAB PLUS 27-1 MG TAB	4	EX Plan Exclusion
ALTRIXA OB 15-0.4-0.6 MG TAB	4	EX Plan Exclusion
MULTI-MAC 15-0.75-1 MG TAB	4	EX Plan Exclusion
PNV-SELECT 27-0.6-0.4 MG TAB	4	EX Plan Exclusion
AZESCO 13-1 MG TAB	4	EX Plan Exclusion
NATAL PNV 6-0.5 MG TAB	4	EX Plan Exclusion
TRINAZ 12-1 MG TAB	4	EX Plan Exclusion
ZALVIT 13-1 MG TAB	4	EX Plan Exclusion
ZIPHEX 13-1 MG TAB	4	EX Plan Exclusion
OB COMPLETE PREMIER 30-20-1 MG TAB	4	EX Plan Exclusion
ELITE-OB 50-1.25 MG TAB	4	EX Plan Exclusion
KOSHER PRENATAL PLUS IRON 30-1 MG TAB	4	EX Plan Exclusion
OB COMPLETE 50-1.25 MG TAB	4	EX Plan Exclusion
PNV TABS 29-1 29-1 MG TAB	4	EX Plan Exclusion
PRENATAL PLUS IRON 29-1 MG TAB	4	EX Plan Exclusion
THRIVITE RX 29-1 MG TAB	4	EX Plan Exclusion
SELECT-OB 29-0.6-0.4 MG CHEW TAB	4	EX Plan Exclusion
SELECT-OB 29-1 MG CHEW TAB	4	EX Plan Exclusion
NESTABS DHA 32-1 MG MISC	4	EX Plan Exclusion
NESTABS 32-1 MG TAB	4	EX Plan Exclusion
PRENATE ELITE 20-0.6-0.4 MG TAB	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUET DHA 400 25-1 & 400 MG MISC	4	EX Plan Exclusion
DUET DHA BALANCED 25-1 & 267 MG MISC	4	EX Plan Exclusion
AZESCHEW PRENATAL/POSTNATAL 13-1 MG CHEW TAB	4	EX Plan Exclusion
PRENATAL-U 106.5-1 MG CAP	4	EX Plan Exclusion
CONCEPT OB 130-92.4-1 MG CAP	4	EX Plan Exclusion
FOLIVANE-OB 85-1 MG CAP	4	EX Plan Exclusion
PROVIDA OB 20-20-1.25 MG CAP	4	EX Plan Exclusion
PRIMACARE 30-1-470 MG CAP	4	EX Plan Exclusion
PNV-OMEGA 28-0.6-0.4-340 MG CAP	4	EX Plan Exclusion
VIRT-PN PLUS 28-0.6-0.4-340 MG CAP	4	EX Plan Exclusion
ZATEAN-PN PLUS 28-0.6-0.4-340 MG CAP	4	EX Plan Exclusion
PRENA1 PEARL 30-1.4-200 MG CAP ER	4	EX Plan Exclusion
VITAPEARL 30-1.4-200 MG CAP ER	4	EX Plan Exclusion
CITRANATAL RX 27-1 MG TAB	4	EX Plan Exclusion
NEEVO DHA 27-1.13 MG CAP	4	EX Plan Exclusion
VINATE DHA RF 27-1.13 MG CAP	4	EX Plan Exclusion
VITAFOL-NANO 18-0.6-0.4 MG TAB	4	EX Plan Exclusion
OB COMPLETE ONE 50-1-476 MG CAP	4	EX Plan Exclusion
OB COMPLETE PETITE 35-5-1-200 MG CAP	4	EX Plan Exclusion
CITRANATAL B-CALM 20-1 MG & 2 X 25 MG MISC	4	EX Plan Exclusion
OB COMPLETE/DHA 30-10-1-200 MG CAP	4	EX Plan Exclusion
PRENATAL MV & MIN W/FE-FA-CA-OMEGA 3 FISH OIL		
COMPLETE NATAL DHA 29-1-200 & 200 MG MISC	4	EX Plan Exclusion
TRIVEEN-DUO DHA 29-1-200 & 300 MG MISC	4	EX Plan Exclusion
WESNATAL DHA COMPLETE 29-1-200 & 200 MG MISC	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PRENATAL MV & MIN W/FE-FA-DHA		
PREGEN DHA 28-1-35 MG CAP	4	EX Plan Exclusion
NEONATAL + DHA 29-1 & 200 MG MISC	4	EX Plan Exclusion
VITAFOL-OB+DHA 65-1 & 250 MG MISC	4	EX Plan Exclusion
SELECT-OB+DHA 29-1 & 250 MG MISC	4	EX Plan Exclusion
VITAFOL-ONE 29-1-200 MG CAP	4	EX Plan Exclusion
VITAFOL FE+ 90-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
VITAFOL ULTRA 29-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
PRENA 1 TRUE 30-1.4 & 300 MG MISC	4	EX Plan Exclusion
VITATRUE 30-1.4 & 300 MG MISC	4	EX Plan Exclusion
TRISTART DHA 31-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
TRISTART FREE 33-1 MG CAP	4	EX Plan Exclusion
TRISTART ONE 35-1-215 MG CAP	4	EX Plan Exclusion
WESTGEL DHA 31-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
PNV-DHA 27-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
PRENATE ENHANCE 28-0.6-0.4-400 MG CAP	4	EX Plan Exclusion
PRENATE RESTORE 27-0.6-0.4-400 MG CAP	4	EX Plan Exclusion
VIRT-PN DHA 27-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
VITAMEDMD ONE RX/QUATREFOLIC 30-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
WESCAP-PN DHA 27-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
ZATEAN-PN DHA 27-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
PRENATE DHA 18-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
PRENATE ESSENTIAL 18-0.6-0.4-300 MG CAP	4	EX Plan Exclusion
PRENATE PIXIE 10-0.6-0.4-200 MG CAP	4	EX Plan Exclusion
NESTABS ONE 38-1-225 MG CAP	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OBSTETRIX ONE (WITH DOCUSATE) 38-1-225 MG CAP	4	EX Plan Exclusion
PRENAISSANCE PLUS 28-1-250 MG CAP	4	EX Plan Exclusion
PRENATE MINI 18-0.6-0.4-350 MG CAP	4	EX Plan Exclusion
CITRANATAL 90 DHA 90-1 & 300 MG MISC	4	EX Plan Exclusion
CITRANATAL ASSURE 35-1 & 300 MG MISC	4	EX Plan Exclusion
CITRANATAL BLOOM DHA 90-1 & 300 MG MISC	4	EX Plan Exclusion
CITRANATAL DHA 27-1 & 250 MG MISC	4	EX Plan Exclusion
CITRANATAL ESSENCE 35-1 & 300 MG THER PACK	4	EX Plan Exclusion
PNV-DHA+DOCUSATE 27-1.25-300 MG CAP	4	EX Plan Exclusion
PRENAISSANCE 29-1.25-325 MG CAP	4	EX Plan Exclusion
TARON-PREX 30-1.2-265 MG CAP	4	EX Plan Exclusion
CITRANATAL HARMONY 27-1-260 MG CAP	4	EX Plan Exclusion
CITRANATAL MEDLEY 27-1-200 MG CAP	4	EX Plan Exclusion
PRENATAL MV & MINERALS W/FA WITHOUT IRON		
PRENATE 0.6-0.4 MG CHEW TAB	4	EX Plan Exclusion
PRENATAL VITAMINS		
NEONATAL 19 1 MG TAB	4	EX Plan Exclusion
PREMESISRX 1 MG TAB	4	EX Plan Exclusion
PRENATE AM 1 MG TAB	4	EX Plan Exclusion
PRENA1 1.4 MG CHEW TAB	4	EX Plan Exclusion
VITAMEDMD REDICHEW RX 1.4 MG CHEW TAB	4	EX Plan Exclusion
VITAFOL STRIPS 1 MG FILM	4	EX Plan Exclusion
SPECIALTY VITAMINS PRODUCTS		
<i>*speciality vitamin product tab**</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MUSCULOSKELETAL THERAPY AGENTS		
ARTICULAR CARTILAGE REPAIR THERAPY		
MACI SHEET	4	PA S EX Plan Exclusion
CENTRAL MUSCLE RELAXANTS		
<i>baclofen intrathecal inj 10 mg/20ml (500 mcg/ml)</i>	4	EX Plan Exclusion
<i>baclofen oral soln 10 mg/5ml</i>	4	EX Plan Exclusion
<i>baclofen tab 10 mg</i>	1	
<i>baclofen tab 15 mg</i>	1	
<i>baclofen intrathecal inj 20 mg/20ml (1000 mcg/ml)</i>	4	EX Plan Exclusion
<i>baclofen tab 20 mg</i>	1	
<i>baclofen susp 25 mg/5ml</i>	1	
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	4	EX Plan Exclusion
<i>baclofen intrathecal inj 40 mg/20ml (2000 mcg/ml)</i>	4	EX Plan Exclusion
BACLOFEN 50 MCG/ML SOLN PRSYR	4	PA EX Plan Exclusion
BACLOFEN 5 MG/5ML SOLUTION	1	
BACLOFEN 5 MG/5ML SOLUTION	4	PA EX Plan Exclusion
<i>baclofen oral soln 5 mg/5ml</i>	1	
<i>baclofen tab 5 mg</i>	1	
BACLOFEN REFILL KIT-SYNCHROMED 40 MG/20ML KIT	4	PA EX Plan Exclusion
FLEQSUVY 25 MG/5ML SUSPENSION	3	PA
GABLOFEN 10000 MCG/20ML SOLN PRSYR	4	PA EX Plan Exclusion
GABLOFEN 10000 MCG/20ML SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GABLOFEN 20000 MCG/20ML SOLN PRSYR	4	PA EX Plan Exclusion
GABLOFEN 20000 MCG/20ML SOLUTION	4	PA EX Plan Exclusion
GABLOFEN 40000 MCG/20ML SOLN PRSYR	4	PA EX Plan Exclusion
GABLOFEN 40000 MCG/20ML SOLUTION	4	PA EX Plan Exclusion
GABLOFEN 50 MCG/ML SOLN PRSYR	4	PA EX Plan Exclusion
LIORESAL 0.05 MG/ML SOLUTION	4	PA EX Plan Exclusion
LIORESAL 10 MG/20ML SOLUTION	4	PA EX Plan Exclusion
LIORESAL 10 MG/5ML SOLUTION	4	PA EX Plan Exclusion
LIORESAL 40 MG/20ML SOLUTION	4	PA EX Plan Exclusion
LYVISPAH 10 MG PACKET	2	PA
LYVISPAH 20 MG PACKET	2	PA
LYVISPAH 5 MG PACKET	2	PA
OZOBAX 5 MG/5ML SOLUTION	1	
OZOBAX DS 10 MG/5ML SOLUTION	4	EX Plan Exclusion
<i>carisoprodol tab 250 mg</i>	1	
<i>carisoprodol tab 350 mg</i>	1	
<i>carisoprodol tab 350 mg</i>	1	
<i>chlorzoxazone tab 250 mg</i>	1	
<i>chlorzoxazone tab 375 mg</i>	1	
<i>chlorzoxazone tab 500 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>chlorzoxazone tab 750 mg</i>	1	
<i>chlorzoxazone tab 375 mg</i>	1	
<i>chlorzoxazone tab 750 mg</i>	1	
<i>cyclobenzaprine hcl tab 10 mg</i>	1	
<i>cyclobenzaprine hcl tab 5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	1	
<i>cyclobenzaprine hcl tab 7.5 mg</i>	1	
<i>metaxalone tab 400 mg</i>	1	
METAXALONE 640 MG TAB	1	
<i>metaxalone tab 800 mg</i>	1	
<i>methocarbamol inj 1000 mg/10ml</i>	4	EX Plan Exclusion
<i>methocarbamol tab 1000 mg</i>	1	
<i>methocarbamol tab 500 mg</i>	1	
<i>methocarbamol tab 750 mg</i>	1	
ROBAXIN 1000 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>methocarbamol tab 1000 mg</i>	1	
<i>orphenadrine citrate inj 30 mg/ml</i>	4	EX Plan Exclusion
<i>orphenadrine citrate tab er 12hr 100 mg</i>	1	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 2 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl tab 4 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	
<i>tizanidine hcl cap 6 mg (base equivalent)</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIRECT MUSCLE RELAXANTS		
DANTRIUM 20 MG RECON SOLN	4	EX Plan Exclusion
DANTRIUM 25 MG CAP	3	
<i>dantrolene sodium cap 100 mg</i>	1	
<i>dantrolene sodium for iv soln 20 mg</i>	4	EX Plan Exclusion
<i>dantrolene sodium cap 25 mg</i>	1	
<i>dantrolene sodium cap 50 mg</i>	1	
<i>dantrolene sodium for iv soln 20 mg</i>	4	EX Plan Exclusion
RYANODEX 250 MG RECON SUSP	4	EX Plan Exclusion
MUSCLE RELAXANT COMBINATIONS		
<i>orphenadrine w/ aspirin & caffeine tab 50-770-60 mg</i>	1	
ORPHENADRINE-ASPIRIN-CAFFEINE 25-385-30 MG TAB	1	
ORPHENGESIC FORTE 50-770-60 MG TAB	1	
RETINOIC ACID RECEPTOR GAMMA SELECTIVE AGONISTS		
SOHONOS 10 MG CAP	3	PA S
SOHONOS 1.5 MG CAP	3	PA S
SOHONOS 1 MG CAP	3	PA S
SOHONOS 2.5 MG CAP	3	PA S
SOHONOS 5 MG CAP	3	PA S
VISCOSUPPLEMENTS		
GEL-ONE 30 MG/3ML PRSYR	3	PA S
SYNVISIC 16 MG/2ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYNVISC ONE 48 MG/6ML SOLN PRSYR	2	PA S
DUROLANE 60 MG/3ML PRSYR	3	PA S
EUFLEXXA 20 MG/2ML SOLN PRSYR	3	PA S
GELSYN-3 16.8 MG/2ML SOLN PRSYR	3	PA S
HYALGAN 20 MG/2ML SOLN PRSYR	2	PA S
HYALGAN 20 MG/2ML SOLUTION	2	PA S
VISCO-3 25 MG/2.5ML SOLN PRSYR	2	PA S
NASAL AGENTS - SYSTEMIC AND TOPICAL		
ANESTHETIC COMBINATIONS		
LIDOCAINE HCL-OXYMETAZOLINE 2-0.025 % (2 ML) SOLN PRSYR	3	
ANTI-HISTAMINE-STEROID		
<i>azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act</i>	1	
DYMISTA 137-50 MCG/ACT SUSPENSION	3	
RYALTRIS 665-25 MCG/ACT SUSPENSION	2	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide nasal soln 0.03% (21 mcg/spray)</i>	1	
<i>ipratropium bromide nasal soln 0.06% (42 mcg/spray)</i>	1	
NASAL ANTIHISTAMINES		
<i>azelastine hcl nasal spray 0.15% (205.5 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>azelastine hcl nasal spray 0.1% (137 mcg/spray)</i>	1	
<i>olopatadine hcl nasal soln 0.6%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NASAL STEROIDS		
BECONASE AQ 42 MCG/SPRAY SUSPENSION	3	
OMNARIS 50 MCG/ACT SUSPENSION	3	
<i>flunisolide nasal soln 25 mcg/act (0.025%)</i>	1	
<i>fluticasone propionate nasal susp 50 mcg/act</i>	1	
<i>mometasone furoate nasal susp 50 mcg/act</i>	1	
PROPEL 370 MCG IMPLANT	4	EX Plan Exclusion
PROPEL CONTOUR 370 MCG IMPLANT	4	EX Plan Exclusion
PROPEL MINI 370 MCG IMPLANT	4	EX Plan Exclusion
PROPEL MINI SDS 370 MCG IMPLANT	4	EX Plan Exclusion
SINUVA 1350 MCG IMPLANT	4	S EX Plan Exclusion
TOPICAL DECONGESTANTS		
ADRENALIN 0.1 % SOLUTION	4	EX Plan Exclusion
<i>epinephrine hcl nasal soln 0.1%</i>	4	EX Plan Exclusion
NEUROMUSCULAR AGENTS		
ALS AGENT COMBINATIONS		
RELYVRIO 3-1 GM PACKET	3	PA S
ALS AGENTS - ANTISENSE OLIGONUCLEOTIDES		
QALSODY 100 MG/15ML SOLUTION	3	S
ALS AGENTS - MISCELLANEOUS		
<i>edaravone inj 30 mg/100ml (0.3 mg/ml)</i>	4	PA S EX Plan Exclusion
EDARAVONE 60 MG/100ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>edaravone inj 60 mg/100ml (0.6 mg/ml)</i>	4	PA S EX Plan Exclusion
RADICAVA 30 MG/100ML SOLUTION	4	PA S EX Plan Exclusion
RADICAVA ORS 105 MG/5ML SUSPENSION	2	PA S
RADICAVA ORS STARTER KIT 105 MG/5ML SUSPENSION	2	PA S
BENZATHIAZOLES		
EXSERVAN 50 MG FILM	3	PA S
RILUTEK 50 MG TAB	3	PA S
<i>riluzole tab 50 mg</i>	1	PA S
TEGLUTIK 50 MG/10ML SUSPENSION	3	PA S
TIGLUTIK 50 MG/10ML SUSPENSION	3	PA S
DEPOLARIZING MUSCLE RELAXANTS		
ANECTINE 20 MG/ML SOLUTION	4	EX Plan Exclusion
QUELICIN 20 MG/ML SOLUTION	4	EX Plan Exclusion
SUCCINYLCHOLINE CHLORIDE 100 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
SUCCINYLCHOLINE CHLORIDE 140 MG/7ML SOLN PRSYR	4	EX Plan Exclusion
SUCCINYLCHOLINE CHLORIDE 200 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
SUCCINYLCHOLINE CHLORIDE 20 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>succinylcholine chloride inj 20 mg/ml</i>	4	EX Plan Exclusion
SUCCINYLBHOLINE CL +RFID 100 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
SUCCINYLBHOLINE CL +RFID 200 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
FRIEDRICH'S ATAXIA AGENTS - NRF2 PATHWAY ACTIVATORS		
SKYCLARYS 50 MG CAP	3	PA S
MUSCULAR DYSTROPHY - GENE THERAPY AGENTS		
AMONDYS 45 100 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
ELEVIDYS 10.0-10.4 KG 10 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 10.5-11.4 KG 11 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 11.5-12.4 KG 12 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 12.5-13.4 KG 13 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 13.5-14.4 KG 14 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 14.5-15.4 KG 15 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 15.5-16.4 KG 16 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 16.5-17.4 KG 17 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 17.5-18.4 KG 18 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 18.5-19.4 KG 19 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 19.5-20.4 KG 20 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 20.5-21.4 KG 21 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 21.5-22.4 KG 22 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 22.5-23.4 KG 23 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 23.5-24.4 KG 24 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 24.5-25.4 KG 25 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 25.5-26.4 KG 26 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 26.5-27.4 KG 27 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 27.5-28.4 KG 28 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 28.5-29.4 KG 29 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 29.5-30.4 KG 30 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 30.5-31.4 KG 31 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 31.5-32.4 KG 32 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 32.5-33.4 KG 33 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 33.5-34.4 KG 34 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 34.5-35.4 KG 35 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 35.5-36.4 KG 36 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 36.5-37.4 KG 37 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 37.5-38.4 KG 38 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 38.5-39.4 KG 39 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 39.5-40.4 KG 40 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 40.5-41.4 KG 41 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 41.5-42.4 KG 42 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 42.5-43.4 KG 43 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 43.5-44.4 KG 44 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 44.5-45.4 KG 45 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 45.5-46.4 KG 46 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 46.5-47.4 KG 47 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 47.5-48.4 KG 48 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 48.5-49.4 KG 49 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 49.5-50.4 KG 50 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 50.5-51.4 KG 51 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 51.5-52.4 KG 52 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 52.5-53.4 KG 53 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 53.5-54.4 KG 54 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 54.5-55.4 KG 55 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 55.5-56.4 KG 56 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 56.5-57.4 KG 57 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 57.5-58.4 KG 58 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 58.5-59.4 KG 59 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 59.5-60.4 KG 60 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 60.5-61.4 KG 61 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 61.5-62.4 KG 62 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 62.5-63.4 KG 63 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 63.5-64.4 KG 64 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 64.5-65.4 KG 65 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 65.5-66.4 KG 66 X 10 ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELEVIDYS 66.5-67.4 KG 67 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 67.5-68.4 KG 68 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 68.5-69.4 KG 69 X 10 ML KIT	4	PA S EX Plan Exclusion
ELEVIDYS 69.5 KG PLUS 70 X 10 ML KIT	4	PA S EX Plan Exclusion
EXONDYS 51 100 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
EXONDYS 51 500 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
VYONDYS 53 100 MG/2ML SOLUTION	4	PA S EX Plan Exclusion
VILTEPSO 250 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
MUSCULAR DYSTROPHY - HISTONE DEACETYLASE INHIBITORS		
DUVYZAT 8.86 MG/ML SUSPENSION	3	PA S
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
DYSPORE 300 UNIT RECON SOLN	2	PA
DYSPORE 500 UNIT RECON SOLN	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DAXXIFY 100 UNIT RECON SOLN	4	EX Plan Exclusion
XEOMIN 100 UNIT RECON SOLN	2	PA
XEOMIN 200 UNIT RECON SOLN	2	PA
XEOMIN 50 UNIT RECON SOLN	2	PA
BOTOX 100 UNIT RECON SOLN	2	PA
BOTOX 200 UNIT RECON SOLN	2	PA
MYOBLOC 10000 UNIT/2ML SOLUTION	2	PA
MYOBLOC 2500 UNIT/0.5ML SOLUTION	2	PA
MYOBLOC 5000 UNIT/ML SOLUTION	2	PA
NONDEPOLARIZING MUSCLE RELAXANTS		
<i>atracurium besylate iv soln 100 mg/10ml</i>	4	EX Plan Exclusion
<i>atracurium besylate preservative free (pf) iv soln 50 mg/5ml</i>	4	EX Plan Exclusion
<i>cisatracurium besylate iv soln 20 mg/10ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>cisatracurium besylate (pf) iv soln 10 mg/5ml (2 mg/ml)</i>	4	EX Plan Exclusion
<i>cisatracurium besylate (pf) iv soln 200 mg/20ml (10 mg/ml)</i>	4	EX Plan Exclusion
NIMBEX 10 MG/5ML SOLUTION	4	EX Plan Exclusion
NIMBEX 200 MG/20ML SOLUTION	4	EX Plan Exclusion
NIMBEX 20 MG/10ML SOLUTION	4	EX Plan Exclusion
ROCURONIUM BROMIDE 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>rocuronium bromide iv soln 100 mg/10ml (10 mg/ml)</i>	4	EX Plan Exclusion
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	4	EX Plan Exclusion
ROCURONIUM BROMIDE 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>rocuronium bromide iv soln 50 mg/5ml (10 mg/ml)</i>	4	EX Plan Exclusion
ROCURONIUM BROMIDE 75 MG/7.5ML SOLN PRSYR	4	EX Plan Exclusion
ROCURONIUM BROMIDE +RFID 100 MG/10ML SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VECURONIUM BROMIDE 10 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>vecuronium bromide for inj 10 mg</i>	4	EX Plan Exclusion
<i>vecuronium bromide for inj 20 mg</i>	4	EX Plan Exclusion
RETT SYNDROME AGENTS - GLYCINE-PROLINE-GLUTAMATE ANALOGS		
DAYBUE 200 MG/ML SOLUTION	3	PA S
SPINAL MUSCULAR ATROPHY-GENE THERAPY AGENTS		
ZOLGENSMA 10.1-10.5 KG 7X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 10.6-11.0 KG 2X5.5ML & 6X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 11.1-11.5 KG 1X5.5ML & 7X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 11.6-12.0 KG 8X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 12.1-12.5 KG 2X5.5ML & 7X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 12.6-13.0 KG 1X5.5ML & 8X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 13.1-13.5 KG 9X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 13.6-14.0 KG 2X5.5ML & 8X8.3ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLGENSMA 14.1-14.5 KG 1X5.5ML & 9X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 14.6-15.0 KG 10X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 15.1-15.5 KG 2X5.5ML & 9X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 15.6-16.0 KG 1X5.5ML & 10X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 16.1-16.5 KG 11X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 16.6-17.0 KG 2X5.5ML & 10X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 17.1-17.5 KG 1X5.5ML & 11X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 17.6-18.0 KG 12X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 18.1-18.5 KG 2X5.5ML & 11X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 18.6-19.0 KG 1X5.5ML & 12X8.3ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLGENSMA 19.1-19.5 KG 13X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 19.6-20.0 KG 2X5.5ML & 12X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 20.1-20.5 KG 1X5.5ML & 13X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 20.6-21.0 KG 14X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 2.6-3.0 KG 2X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 3.1-3.5 KG 2X5.5ML & 1X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 3.6-4.0 KG 1X5.5ML & 2X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 4.1-4.5 KG 3X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 4.6-5.0 KG 2X5.5ML & 2X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 5.1-5.5 KG 1X5.5ML & 3X8.3ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLGENSMA 5.6-6.0 KG 4X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 6.1-6.5 KG 2X5.5ML & 3X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 6.6-7.0 KG 1X5.5ML & 4X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 7.1-7.5 KG 5X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 7.6-8.0 KG 2X5.5ML & 4X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 8.1-8.5 KG 1X5.5ML & 5X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 8.6-9.0 KG 6X8.3 ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 9.1-9.5 KG 2X5.5ML & 5X8.3ML KIT	4	PA S EX Plan Exclusion
ZOLGENSMA 9.6-10.0 KG 1X5.5ML & 6X8.3ML KIT	4	PA S EX Plan Exclusion
SPINAL MUSCULAR ATROPHY-SMN2 SPLICING MODIFIERS		
EVRYSDI 0.75 MG/ML RECON SOLN	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EVRYSDI 5 MG TAB	2	PA S
NUTRIENTS		
AMINO ACID MIXTURES		
AMINO ACID-CALCIUM-HEP IN D10W 3.5 % SOLUTION	4	EX Plan Exclusion
AMINO ACID-CALCIUM-HEP IN D10W 3 % SOLUTION	4	EX Plan Exclusion
AMINO ACID-CALCIUM-HEP IN D10W 4 % SOLUTION	4	EX Plan Exclusion
AMINO AC-LOW CALCIUM-HEP D10W 3.5 % SOLUTION	4	EX Plan Exclusion
NEONATAL PN STARTER BAG 2.5 % SOLUTION	4	EX Plan Exclusion
NEONATAL PN STARTER BAG(W HEP) 3 % SOLUTION	4	EX Plan Exclusion
NEONATAL PN STARTER (HEPARIN) 3 % SOLUTION	4	EX Plan Exclusion
AMINO ACID-CALCIUM-HEP IN D5W 3 % SOLUTION	4	EX Plan Exclusion
AMINO AC-LOWCALCIUM-HEP IN D5W 3 % SOLUTION	4	EX Plan Exclusion
NEONATAL PN STARTER BAG 3 % SOLUTION	4	EX Plan Exclusion
PROCALAMINE 3 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (4.25/10) 4.25 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (8/10) 8 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (8/14) 8 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (5/15) 5 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (5/20) 5 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (2.75/5) 2.75 % SOLUTION	4	EX Plan Exclusion
CLINIMIX E/DEXTROSE (4.25/5) 4.25 % SOLUTION	4	EX Plan Exclusion
AMINO ACID-HEPARIN-D10W 3.5 % SOLUTION	4	EX Plan Exclusion
AMINO ACID 5 % SOLUTION	4	EX Plan Exclusion
AMINOPROTECT 5 % SOLUTION	4	EX Plan Exclusion
AMINOSYN II 10 % SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>*amino acid infusion 15%***</i>	4	EX Plan Exclusion
AMINOSYN II 15 % SOLUTION	4	EX Plan Exclusion
AMINOSYN-PF 10 % SOLUTION	4	EX Plan Exclusion
AMINOSYN-PF 7% 7 % SOLUTION	4	EX Plan Exclusion
AMINOSYN-PF 7 % SOLUTION	4	EX Plan Exclusion
<i>*amino acid infusion 15%***</i>	4	EX Plan Exclusion
FREAMINE III 10 % SOLUTION	4	EX Plan Exclusion
<i>*amino acid infusion 15%***</i>	4	EX Plan Exclusion
PREMASOL 10 % SOLUTION	4	EX Plan Exclusion
PROSOL 20 % SOLUTION	4	EX Plan Exclusion
TRAVASOL 10 % SOLUTION	4	EX Plan Exclusion
TROPHAMINE 10 % SOLUTION	4	EX Plan Exclusion
AMINO ACID INFUSION IN D10W 2.5 % SOLUTION	4	EX Plan Exclusion
AMINO ACID INFUSION IN D10W 3.5 % SOLUTION	4	EX Plan Exclusion
AMINO ACID INFUSION IN D10W 3 % SOLUTION	4	EX Plan Exclusion
AMINO ACID INFUSION IN D10W 4 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (4.25/10) 4.25 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (8/10) 8 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (8/14) 8 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (5/15) 5 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (5/20) 5 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (4.25/5) 4.25 % SOLUTION	4	EX Plan Exclusion
CLINIMIX/DEXTROSE (6/5) 6 % SOLUTION	4	EX Plan Exclusion
AMINOAMRMS CAP	1	
AMINORELIEFRMS CAP	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AMINO ACIDS-SINGLE		
ELCYS 50 MG/ML SOLUTION	4	EX Plan Exclusion
GLUTATHIONE 6 GM/30ML SOLUTION	4	EX Plan Exclusion
CARBOHYDRATES		
DEXTROSE 10 % SOLUTION	4	EX Plan Exclusion
<i>dextrose inj 10%</i>	4	EX Plan Exclusion
DEXTROSE 20 % SOLUTION	4	EX Plan Exclusion
DEXTROSE 250 MG/ML SOLUTION	4	EX Plan Exclusion
DEXTROSE 30 % SOLUTION	4	EX Plan Exclusion
DEXTROSE 40 % SOLUTION	4	EX Plan Exclusion
DEXTROSE 50 % SOLUTION	4	EX Plan Exclusion
<i>dextrose inj 50%</i>	4	EX Plan Exclusion
DEXTROSE 5 % SOLUTION	4	EX Plan Exclusion
<i>dextrose inj 5%</i>	4	EX Plan Exclusion
DEXTROSE 70 % SOLUTION	4	EX Plan Exclusion
GLUCOSE (DEXTROSE) 50 % SOLUTION	4	EX Plan Exclusion
LIPIDS		
SMOFLIPID 20 % EMULSION	4	EX Plan Exclusion
OMEGAIVEN 10 GM/100ML EMULSION	4	EX Plan Exclusion
OMEGAIVEN 5 GM/50ML EMULSION	4	EX Plan Exclusion
INTRALIPID 20 % EMULSION	4	EX Plan Exclusion
INTRALIPID 30 % EMULSION	4	EX Plan Exclusion
NUTRILIPID 20 % EMULSION	4	EX Plan Exclusion
CLINOLIPID 20 % EMULSION	4	EX Plan Exclusion
DOJOLVI 100 % LIQUID	3	S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LIPOTROPIC COMBINATIONS		
LIPO 50-50-25 MG/ML SOLUTION	4	EX Plan Exclusion
LIPO-C SOLUTION	4	EX Plan Exclusion
PROTEIN-CARBOHYDRATE-LIPID WITH ELECTROLYTE COMBINATIONS		
KABIVEN 3.3-10.8-3.9 % EMULSION	4	EX Plan Exclusion
PERIKABIVEN 2.4-6.8-3.5-0.5 % EMULSION	4	EX Plan Exclusion
OPHTHALMIC AGENTS		
ALPHA ADRENERGIC AGONIST & CARBONIC ANHYDRASE INHIB COMB		
BRIMONIDINE-DORZOLAMIDE 0.1-2 % SOLUTION	3	
BRIMONIDINE-DORZOLAMIDE 0.15-2 % SOLUTION	3	
SIMBRINZA 1-0.2 % SUSPENSION	2	
ARTIFICIAL TEAR INSERTS		
LACRISERT 5 MG INSERT	4	EX Plan Exclusion
BETA-BLOCKERS - OPTHALMIC		
BETAXOLOL HCL 0.5 % SOLUTION	1	
<i>betaxolol hcl ophth soln 0.5%</i>	1	
CARTEOLOL HCL 1 % SOLUTION	1	
LEVOBUNOLOL HCL 0.5 % SOLUTION	1	
BETIMOL 0.25 % SOLUTION	2	
BETIMOL 0.5 % SOLUTION	2	
<i>timolol ophth soln 0.5%</i>	1	
<i>timolol maleate ophth gel forming soln 0.25%</i>	1	
<i>timolol maleate ophth soln 0.25%</i>	2	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate ophth gel forming soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5%</i>	1	
<i>timolol maleate preservative free ophth soln 0.5%</i>	1	
<i>timolol maleate ophth soln 0.5% (once-daily)</i>	1	
<i>timolol maleate preservative free ophth soln 0.25%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>timolol maleate preservative free ophth soln 0.5%</i>	1	
BETA-BLOCKERS - OPHTHALMIC COMBINATIONS		
BIMATOPROST-TIMOLOL MALEATE 0.01-0.5 % SOLUTION	3	
<i>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</i>	1	
COMBIGAN 0.2-0.5 % SOLUTION	2	
COSOPT 22.3-6.8 MG/ML SOLUTION	3	
COSOPT PF 2-0.5 % SOLUTION	2	
<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>	1	
DORZOLAMIDE HCL-TIMOLOL MAL 22.3-6.8 MG/ML SOLUTION	1	
<i>dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml</i>	1	
<i>dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf</i>	1	
<i>dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%</i>	1	
LATANOPROST-TIMOLOL MALEATE 0.005-0.5 % SOLUTION	3	
TIMOLOL-BRIMON-DORZOL-BIMATOPR 0.5-0.1-2-0.01 % SOLUTION	3	
TIMOLOL-BRIMON-DORZOL-BIMATOPR 0.5-0.15-2-0.01 % SOLUTION	3	
TIMOLOL-BRIMON-DORZOL-LATANOPR 0.5-0.15-2 -0.005% SOLUTION	3	
TIMOLOL-BRIMONIDINE-DORZOLAMID 0.5-0.1-2 % SOLUTION	3	
TIMOLOL-BRIMONIDINE-DORZOLAMID 0.5-0.15-2 % SOLUTION	3	
TIMOLOL-DORZOLAMID-BIMATOPROST 0.5-2-0.01 % SOLUTION	3	
TIMOLOL-DORZOLAMID-LATANOPROST 0.5-0.15-0.005 % SOLUTION	3	
CHOLINERGIC AGONISTS		
TYRVAYA 0.03 MG/ACT SOLUTION	3	
CYCLOPLEGIC MYDRIATIC COMBINATIONS		
CYCLOMYDRIL 0.2-1 % SOLUTION	3	
TROPIC-CYCLOP-PE-KETO-PROPAR SOLN PRSYR	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TROPIC-CYCLOPENT-PE-KETOROLAC 1-1-10-0.5 % SOLN PRSYR	3	
TROPIC-CYCLOPENT-PE-KETOROLAC 1-1-10-0.5 % SOLUTION	3	
TROPIC-CYCLOPENT-PE-KETOROLAC 1-1-2.5-0.5 % SOLN PRSYR	3	
TROPIC-CYCLOPENT-PE-KETOROLAC 1-1-2.5-0.5 % SOLUTION	3	
TROPICAMIDE-CYCLOPENTOLATE-PE 1-1-2.5 % SOLUTION	3	
TROPICAMIDE-CYCLOPENTOLATE-PE 1-1-2.5 % SOLUTION	3	
TROPIC-PROPARACA-PE-KETOROLAC 1-0.5-2.5-0.5 % SOLUTION	3	
MYDCOMBI 1-2.5 % SOLN CART	3	
TROPICAMIDE-PHENYLEPHRINE 1-2.5 % SOLUTION	3	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 0.01 % SOLUTION	3	
ATROPINE SULFATE 0.025 % SOLUTION	3	
ATROPINE SULFATE 0.05 % SOLUTION	3	
ATROPINE SULFATE 1 % OINTMENT	1	
<i>atropine sulfate ophth oint 1%</i>	1	
ATROPINE SULFATE 1 % SOLUTION	1	
ATROPINE SULFATE 1 % SOLUTION	1	
<i>atropine sulfate ophth soln 1%</i>	1	
ISOPTO ATROPINE 1 % SOLUTION	1	
CYCLOGYL 0.5 % SOLUTION	2	
CYCLOGYL 1 % SOLUTION	3	
CYCLOGYL 2 % SOLUTION	3	
<i>cyclopentolate hcl ophth soln 0.5%</i>	1	
<i>cyclopentolate hcl ophth soln 1%</i>	1	
<i>cyclopentolate hcl ophth soln 2%</i>	1	
HOMATROPAIRE 5 % SOLUTION	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALTAFRIN 10 % SOLUTION	1	
ALTAFRIN 2.5 % SOLUTION	1	
<i>phenylephrine hcl ophth soln 10%</i>	1	
PHENYLEPHRINE HCL 2.5 % SOLUTION	1	
<i>phenylephrine hcl ophth soln 2.5%</i>	1	
MYDRIACYL 1 % SOLUTION	3	
<i>tropicamide ophth soln 0.5%</i>	1	
<i>tropicamide ophth soln 1%</i>	1	
LYMPHOCYTE FUNCTION-ASSOCIATED ANTIGEN-1 (LFA-1) ANTAG		
XIIDRA 5 % SOLUTION	2	
MIOTICS - CHOLINESTERASE INHIBITORS		
PHOSPHOLINE IODIDE 0.125 % RECON SOLN	3	
MIOTICS - DIRECT ACTING		
<i>pilocarpine hcl ophth soln 1%</i>	1	
<i>pilocarpine hcl ophth soln 2%</i>	1	
<i>pilocarpine hcl ophth soln 4%</i>	1	
QLOSI 0.4 % SOLUTION	2	
VUITY 1.25 % SOLUTION	2	
OPHTHALMIC - MULTIPLE RECEPTOR ANGIOGENESIS INHIBITORS		
VABYSMO 6 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
VABYSMO 6 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
OPHTHALMIC ANTI-INFECTIVE COMBINATIONS		
<i>bacitracin-polymyxin b ophth oint</i>	1	
BACITRACIN-POLYMYXIN B 500-10000 UNIT/GM OINTMENT	1	
<i>bacitracin-polymyxin b ophth oint</i>	1	
MOXIFLOXACIN-BROMFENAC 0.5-0.075 % SOLUTION	3	
MOXIFLOXACIN HCL-BSS 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEOMYCIN-BACITRACIN ZN-POLYMYX 5-400-10000 OINTMENT	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
NEOMYCIN-POLYMYXIN-GRAMICIDIN 1.75-10000-.025 SOLUTION	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
TOBRAMYCIN-VANCOMYCIN HCL 1.5-5 % SOLUTION	3	
OPHTHALMIC ANTIALLERGIC		
<i>azelastine hcl ophth soln 0.05%</i>	1	
<i>bepotastine besilate ophth soln 1.5%</i>	1	
ZERVIATE 0.24 % SOLUTION	2	
CROMOLYN SODIUM 4 % SOLUTION	1	
<i>cromolyn sodium ophth soln 4%</i>	1	
<i>epinastine hcl ophth soln 0.05%</i>	1	
<i>olopatadine hcl ophth soln 0.1% (base equivalent)</i>	1	
<i>olopatadine hcl ophth soln 0.2% (base equivalent)</i>	1	
OPHTHALMIC ANTIBIOTICS		
AZASITE 1 % SOLUTION	2	
KLARITY-A 1 % SOLUTION	3	
BACITRACIN 500 UNIT/GM OINTMENT	1	
CILOXAN 0.3 % OINTMENT	2	
<i>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</i>	1	
ERYTHROMYCIN 5 MG/GM OINTMENT	1	
<i>erythromycin ophth oint 5 mg/gm</i>	1	
<i>gatifloxacin ophth soln 0.5%</i>	1	
GENTAK 0.3 % OINTMENT	1	
<i>gentamicin sulfate ophth soln 0.3%</i>	1	
LEVOFLOXACIN 0.5 % SOLUTION	1	
<i>levofloxacin ophth soln 0.5%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEVOFLOXACIN 1.5 % SOLUTION	1	
MITOSOL 0.2 MG KIT	3	
MOXIFLOXACIN HCL 0.16 % SOLN PRSYR	4	EX Plan Exclusion
MOXIFLOXACIN HCL 0.3 MG/0.3ML SOLN PRSYR	4	EX Plan Exclusion
MOXIFLOXACIN HCL 0.5 % SOLN PRSYR	4	EX Plan Exclusion
<i>moxifloxacin hcl ophth soln 0.5% (base equiv)</i>	1	
MOXIFLOXACIN HCL 1 MG/ML SOLUTION	4	EX Plan Exclusion
MOXIFLOXACIN HCL (2X DAY) 0.5 % SOLUTION	1	
MOXIFLOXACIN HCL 5 MG/ML SOLUTION	4	EX Plan Exclusion
<i>ofloxacin ophth soln 0.3%</i>	1	
<i>tobramycin ophth soln 0.3%</i>	1	
VANCOMYCIN HCL 10 MG/ML SOLN PRSYR	4	EX Plan Exclusion
OPHTHALMIC ANTIFUNGAL		
NATACYN 5 % SUSPENSION	3	
OPHTHALMIC ANTISEPTICS		
BETADINE OPHTHALMIC PREP 5 % SOLUTION	3	
POVIDONE-IODINE 5 % SOLUTION	3	
OPHTHALMIC ANTIVIRALS		
ZIRGAN 0.15 % GEL	2	
TRIFLURIDINE 1 % SOLUTION	1	
OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS		
AZOPT 1 % SUSPENSION	2	
<i>brinzolamide ophth susp 1%</i>	1	
DORZOLAMIDE HCL 2 % SOLUTION	1	
<i>dorzolamide hcl ophth soln 2%</i>	1	
TRUSOPT 2 % SOLUTION	3	
OPHTHALMIC COMPLEMENT C3 INHIBITORS		
SYFOVRE 15 MG/0.1ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC COMPLEMENT C5 INHIBITORS		
IZERVAY 2 MG/0.1ML SOLUTION	4	S EX Plan Exclusion
OPHTHALMIC DIAGNOSTIC PRODUCTS		
<i>fluorescein sodium iv soln 10%</i>	4	EX Plan Exclusion
AK-FLUOR 25 % SOLUTION	4	EX Plan Exclusion
<i>fluorescein sodium iv soln 10%</i>	4	EX Plan Exclusion
FLUORESCEIN SODIUM 25 % SOLUTION	4	EX Plan Exclusion
FLUORESCITE 10 % SOLUTION	4	EX Plan Exclusion
BIO GLO 1 MG STRIP	4	EX Plan Exclusion
FLUORESCEIN SODIUM 1 MG STRIP	4	EX Plan Exclusion
FLUOR-I-STRIPS A.T. 1 MG STRIP	4	EX Plan Exclusion
FUL-GLO 0.6 MG STRIP	4	EX Plan Exclusion
<i>fluorescein sodium ophth strips 1 mg</i>	4	EX Plan Exclusion
GLOSTRIPS 1 MG STRIP	4	EX Plan Exclusion
ALTAFLUOR BENOX 0.25-0.4 % SOLUTION	4	EX Plan Exclusion
FLUORESCEIN-BENOXINATE 0.25-0.4 % SOLUTION	4	EX Plan Exclusion
FLUORESCEIN SODIUM/BENOXINATE 0.3-0.4 % SOLUTION	4	EX Plan Exclusion
FLUCAINE 0.25-0.5 % SOLUTION	4	EX Plan Exclusion
PROPARACAINE-FLUORESCEIN 0.5-0.25 % SOLUTION	4	EX Plan Exclusion
FLURA-SAFE 0.35-0.4 % SOLUTION	4	EX Plan Exclusion
PAREMYD 1-0.25 % SOLUTION	4	EX Plan Exclusion
GREEN GLO LISSAMINE GREEN 1.5 MG STRIP	4	EX Plan Exclusion
OPHTHALMIC ECTOPARASITICIDE		
XDEMVIY 0.25 % SOLUTION	2	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC GENE THERAPY		
ENCELTO 200000 CELLS IMPLANT	4	PA S EX Plan Exclusion
LUXTURNA 5000000000000000 VG/ML SUSPENSION	4	PA S EX Plan Exclusion
OPHTHALMIC IMMUNOMODULATORS		
CEQUA 0.09 % SOLUTION	2	
<i>cyclosporine (ophth) emulsion 0.05%</i>	1	
KLARITY-C DROPS 0.1 % EMULSION	2	
RESTASIS 0.05 % EMULSION	2	
RESTASIS MULTIDOSE 0.05 % EMULSION	2	
VERKAZIA 0.1 % EMULSION	3	
OPHTHALMIC IRRIGATION SOLUTIONS		
<i>*ophthalmic irrigation solution - intraocular***</i>	4	EX Plan Exclusion
BSS PLUS SOLUTION	4	EX Plan Exclusion
BSS SOLUTION	4	EX Plan Exclusion
OPHTHALMIC KINASE INHIBITORS - COMBINATIONS		
ROCKLATAN 0.02-0.005 % SOLUTION	2	
OPHTHALMIC LOCAL ANESTHETIC - COMBINATIONS		
BUP-LIDO 0.375-2 % SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE HCL-BUPIVACAINE HCL 2-0.375 % (10 ML) SOLN PRSYR	4	EX Plan Exclusion
LIDOCAINE-EPINEPHRINE 7.5-0.25 MG/ML SOLUTION	4	EX Plan Exclusion
LIDOCAINE-PHENYLEPHRINE 1-1.5 % SOLUTION	4	EX Plan Exclusion
LIDOCAINE-PHENYLEPHRINE-BSS 1-1.5 % (1ML) SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC LOCAL ANESTHETICS		
IHEEZO 3 % GEL	3	
AKTEN 3.5 % GEL	3	
<i>proparacaine hcl ophth soln 0.5%</i>	1	
ALTACAINE 0.5 % SOLUTION	1	
ALTACAINE 0.5 % SOLUTION	1	
TETRACAINE HCL 0.5 % SOLUTION	1	
<i>tetracaine hcl ophth soln 0.5%</i>	1	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE 0.002 % SOLUTION	3	S
OPHTHALMIC NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>bromfenac sodium ophth soln 0.075% (base equivalent)</i>	1	
<i>bromfenac sodium ophth soln 0.07% (base equivalent)</i>	1	
<i>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</i>	1	
BROMSITE 0.075 % SOLUTION	3	
PROLENSA 0.07 % SOLUTION	3	
<i>diclofenac sodium ophth soln 0.1%</i>	1	
FLURBIPROFEN SODIUM 0.03 % SOLUTION	1	
<i>ketorolac tromethamine ophth soln 0.4%</i>	1	
<i>ketorolac tromethamine ophth soln 0.5%</i>	1	
ILEVRO 0.3 % SUSPENSION	2	
NEVANAC 0.1 % SUSPENSION	2	
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE 15 MG RECON SOLN	4	S EX Plan Exclusion
OPHTHALMIC PHOTOENHANCER COMBINATIONS		
PHOTREXA-PHOTREXA VISCOUS KIT 0.146 & 0.146-20 % SOLN PRSYR	3	
OPHTHALMIC RHO KINASE INHIBITORS		
RHOPRESSA 0.02 % SOLUTION	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OPHTHALMIC SELECTIVE ALPHA ADRENERGIC AGONISTS		
APRACLONIDINE HCL 0.5 % SOLUTION	2	
<i>apraclonidine hcl ophth soln 0.5% (base equivalent)</i>	1	
<i>brimonidine tartrate ophth soln 0.15%</i>	1	
<i>brimonidine tartrate ophth soln 0.1%</i>	1	
<i>brimonidine tartrate ophth soln 0.2%</i>	1	
OPHTHALMIC STEROID COMBINATIONS		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
BACITRA-NEOMYCIN-POLYMYXIN-HC 1 % OINTMENT	1	
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
PRED-G 0.3-1 % SUSPENSION	3	
PRED-G S.O.P. 0.3-0.6 % OINTMENT	3	
MAXITROL 0.1 % SUSPENSION	3	
MAXITROL 3.5-10000-0.1 OINTMENT	3	
MAXITROL 3.5-10000-0.1 SUSPENSION	3	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION	2	
PREDNISOLONE ACET-MOXIFLOXACIN 1-0.5 % SUSPENSION	3	
PREDNISOL ACE-MOXIFLOX-BROMFEN 1-0.5-0.075 % SUSPENSION	3	
PREDNISOLON-MOXIFLOX-NEPAFENAC 1-0.5-0.1 % SUSPENSION	3	
PREDNISOLONE ACETATE-NEPAFENAC 1-0.1 % SUSPENSION	3	
PREDNISOLONE-BROMFENAC 1-0.075 % SOLUTION	3	
PREDNISOLONE-BROMFENAC 1-0.075 % SUSPENSION	3	
PREDNISOLONE-GATIFLOXACIN 1-0.5 % SUSPENSION	3	
PREDNISOLON-GATIFLOX-BROMFENAC 1-0.5-0.075 % SOLUTION	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PREDNISOLON-GATIFLOX-BROMFENAC 1-0.5-0.075 % SUSPENSION	3	
DOUBLE PM 1-0.5 % RECON SOLN	3	
PREDNISOLONE-MOXIFLOXACIN 1-0.5 % SOLUTION	3	
PREDNISOLON-MOXIFLOX-BROMFENAC 1-0.5-0.075 % SOLUTION	3	
TRIPLE PMB 1-0.5-0.09 % RECON SOLN	3	
PREDNISOLON-MOXIFLOX-KETOROLAC 1-0.5-0.5 % SOLUTION	3	
TRIPLE PMK 1-0.5-0.5 % RECON SOLN	3	
BLEPHAMIDE S.O.P. 10-0.2 % OINTMENT	3	
SULFACETAMIDE-PREDNISOLONE 10-0.23 % SOLUTION	1	
TOBRADEX 0.3-0.1 % OINTMENT	2	
TOBRADEX 0.3-0.1 % SUSPENSION	3	
TOBRADEX ST 0.3-0.05 % SUSPENSION	2	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
OPHTHALMIC STEROIDS		
CLOBETASOL PROPIONATE 0.05 % SUSPENSION	3	
DEXTENZA 0.4 MG INSERT	4	EX Plan Exclusion
DEXYCU 9 % SUSPENSION	4	EX Plan Exclusion
MAXIDEX 0.1 % SUSPENSION	2	
OZURDEX 0.7 MG IMPLANT	4	S EX Plan Exclusion
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	1	
<i>difluprednate ophth emulsion 0.05%</i>	1	
DUREZOL 0.05 % EMULSION	3	
ILUVIEN 0.19 MG IMPLANT	4	S EX Plan Exclusion
RETISERT 0.59 MG IMPLANT	4	S EX Plan Exclusion
YUTIQ 0.18 MG IMPLANT	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLAREX 0.1 % SUSPENSION	3	
<i>fluorometholone ophth susp 0.1%</i>	1	
FML 0.1 % OINTMENT	2	
FML FORTE 0.25 % SUSPENSION	2	
FML LIQUIFILM 0.1 % SUSPENSION	3	
ALREX 0.2 % SUSPENSION	3	
EYSUVIS 0.25 % SUSPENSION	2	
INVELTYS 1 % SUSPENSION	3	
KLARITY-L 0.2 % EMULSION	3	
KLARITY-L 0.5 % EMULSION	3	
LOTEMAX 0.5 % GEL	3	
LOTEMAX 0.5 % OINTMENT	3	
LOTEMAX 0.5 % SUSPENSION	3	
LOTEMAX SM 0.38 % GEL	2	
<i>loteprednol etabonate ophth susp 0.2%</i>	1	
<i>loteprednol etabonate ophth gel 0.5%</i>	1	
<i>loteprednol etabonate ophth susp 0.5%</i>	1	
PRED FORTE 1 % SUSPENSION	1	
PRED MILD 0.12 % SUSPENSION	2	
<i>prednisolone acetate ophth susp 1%</i>	1	
<i>prednisolone acetate ophth susp 1%</i>	1	
PREDNISOLONE ACETATE P-F 1 % SUSPENSION	1	
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	1	
TRIESENCE 40 MG/ML SUSPENSION	4	S EX Plan Exclusion
XIPERE 40 MG/ML SUSPENSION	4	S EX Plan Exclusion
OPHTHALMIC SULFONAMIDES		
SULFACETAMIDE SODIUM 10 % OINTMENT	2	
SULFACETAMIDE SODIUM 10 % SOLUTION	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sulfacetamide sodium ophth soln 10%</i>	2	
OPHTHALMIC SURGICAL AIDS		
TISSUEBLUE 0.025 % SOLN PRSYR	4	EX Plan Exclusion
GELFILM FILM	4	EX Plan Exclusion
GELFILM FILM	4	EX Plan Exclusion
CELLUGEL 2 % SOLUTION	4	EX Plan Exclusion
AMVISC 9.6 MG/0.8ML SOLN PRSYR	4	EX Plan Exclusion
AMVISC PLUS 12.8 MG/0.8ML SOLN PRSYR	4	EX Plan Exclusion
HEALON5 PRO 13.8 MG/0.6ML SOLN PRSYR	4	EX Plan Exclusion
HEALON DUET PRO 1 & 3 % SOLN PRSYR	4	EX Plan Exclusion
HEALON GV PRO 15.3 MG/0.85ML SOLN PRSYR	4	EX Plan Exclusion
HEALON PRO 5.5 MG/0.55ML SOLN PRSYR	4	EX Plan Exclusion
HEALON PRO 8.5 MG/0.85ML SOLN PRSYR	4	EX Plan Exclusion
NUVISC 9.6 MG/0.8ML SOLN PRSYR	4	EX Plan Exclusion
PROVISC 4 MG/0.4ML SOLN PRSYR	4	EX Plan Exclusion
PROVISC 5.5 MG/0.55ML SOLN PRSYR	4	EX Plan Exclusion
PROVISC 8.5 MG/0.85ML SOLN PRSYR	4	EX Plan Exclusion
TOTALVISC 1 & 2.5 % SOLN PRSYR	4	EX Plan Exclusion
MEMBRANEBLUE 0.15 % SOLN PRSYR	4	EX Plan Exclusion
VISIONBLUE 0.06 % SOLN PRSYR	4	EX Plan Exclusion
OPHTHALMIC SURGICAL AIDS - COMBINATIONS		
DISCOVISC 40-17 MG/ML SOLUTION	4	EX Plan Exclusion
VISCOAT 20-15 MG/0.5ML SOLN PRSYR	4	EX Plan Exclusion
VISCOAT 30-22.5 MG/0.75ML SOLN PRSYR	4	EX Plan Exclusion
DUOVISC 0.4-0.35 ML KIT	4	EX Plan Exclusion
DUOVISC 0.55-0.5 ML KIT	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DUOVISC 0.85-0.5 ML KIT	4	EX Plan Exclusion
OMIDRIA 1-0.3 % SOLUTION	4	EX Plan Exclusion
OPHTHALMICS - BLEPHAROPTOSIS AGENTS		
UPNEEQ 0.1 % SOLUTION	3	
OPHTHALMICS - CYSTINOSIS AGENTS		
CYSTADROPS 0.37 % SOLUTION	3	S
CYSTARAN 0.44 % SOLUTION	3	S
OPHTHALMICS MISC. - OTHER		
CHONDROITIN SULFATE 0.25 % SOLUTION	3	
MIEBO 1.338 GM/ML SOLUTION	2	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost ophth soln 0.03%</i>	1	
LUMIGAN 0.01 % SOLUTION	2	
LATANOPROST 0.005 % SOLUTION	2	
<i>latanoprost ophth soln 0.005%</i>	1	
XALATAN 0.005 % SOLUTION	2	
VYZULTA 0.024 % SOLUTION	2	
<i>tafluprost preservative free (pf) ophth soln 0.0015%</i>	1	
ZIOPTAN 0.0015 % SOLUTION	2	
IDOSE TR 75 MCG IMPLANT	4	EX Plan Exclusion
<i>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</i>	1	
VASCULAR ENDOTHELIAL GROWTH FACTOR (VEGF) ANTAGONISTS		
EYLEA 2 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
EYLEA 2 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
EYLEA HD 8 MG/0.07ML SOLUTION	4	S EX Plan Exclusion
PAVBLU 2 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PAVBLU 2 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
BEVACIZUMAB 1.25 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 2.25 MG/0.09ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 2.5 MG/0.1ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 2.75 MG/0.11ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 2 MG/0.08ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 3.25 MG/0.13ML SOLN PRSYR	4	S EX Plan Exclusion
BEVACIZUMAB 3.75 MG/0.15ML SOLN PRSYR	4	S EX Plan Exclusion
BEOVU 6 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
BEOVU 6 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
LUCENTIS 0.3 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
LUCENTIS 0.3 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
LUCENTIS 0.5 MG/0.05ML SOLN PRSYR	4	S EX Plan Exclusion
LUCENTIS 0.5 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
SUSVIMO (IMPLANT 1ST FILL) 10 MG/0.1ML SOLUTION	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUSVIMO (IMPLANT REFILL) 10 MG/0.1ML SOLUTION	4	S EX Plan Exclusion
CIMERLI 0.3 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
CIMERLI 0.5 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
BYOOVIZ 0.5 MG/0.05ML SOLUTION	4	S EX Plan Exclusion
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid otic soln 2%</i>	1	
OTIC ANALGESIC COMBINATIONS		
PRAMOTIC 1-0.1 % LIQUID	3	
OTIC ANTI-INFECTIVES		
CETRAXAL 0.2 % SOLUTION	3	
<i>ciprofloxacin hcl otic soln 0.2% (base equivalent)</i>	1	
<i>ofloxacin otic soln 0.3%</i>	1	
OTIC STEROID-ANTI-INFECTIVE COMBINATIONS		
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
CIPROFLOXACIN-FLUOCINOLONE PF 0.3-0.025 % SOLUTION	3	
OTOVEL 0.3-0.025 % SOLUTION	3	
<i>ciprofloxacin-hydrocortisone otic susp 0.2-1%</i>	2	
CIPRO HC 0.2-1 % SUSPENSION	2	
CORTISPORIN-TC 3.3-3-10-0.5 MG/ML SUSPENSION	3	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OTIC STEROIDS		
DEX24 24 MG/ML SOLUTION	4	EX Plan Exclusion
DERMOTIC 0.01 % OIL	3	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>fluocinolone acetonide (otic) oil 0.01%</i>	1	
<i>hydrocortisone w/ acetic acid otic soln 1-2%</i>	1	
OXYTOCICS		
ABORTIFACIENTS/CERVICAL RIPENING - PROSTAGLANDINS		
CARBOPROST TROMETHAMINE 250 MCG/ML SOLN PRSYR	4	EX Plan Exclusion
<i>carboprost tromethamine im soln 250 mcg/ml</i>	4	EX Plan Exclusion
HEMABATE 250 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>methylergonovine maleate tab 0.2 mg</i>	1	
<i>methylergonovine maleate inj 0.2 mg/ml</i>	4	EX Plan Exclusion
<i>methylergonovine maleate tab 0.2 mg</i>	1	
<i>oxytocin inj 10 unit/ml</i>	4	EX Plan Exclusion
PITOCIN 10 UNIT/ML SOLUTION	4	EX Plan Exclusion
OXYTOCIN-LACTATED RINGERS 10 UNIT/500ML SOLUTION	4	EX Plan Exclusion
OXYTOCIN-LACTATED RINGERS 15 UNIT/250ML SOLUTION	4	EX Plan Exclusion
OXYTOCIN-LACTATED RINGERS 20 UNIT/L SOLUTION	4	EX Plan Exclusion
OXYTOCIN-LACTATED RINGERS 30 UNIT/500ML SOLUTION	4	EX Plan Exclusion
OXYTOCIN-SODIUM CHLORIDE 15-0.9 UT/250ML-% SOLUTION	4	EX Plan Exclusion
OXYTOCIN-SODIUM CHLORIDE 20-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion
OXYTOCIN-SODIUM CHLORIDE 30-0.9 UT/500ML-% SOLUTION	4	EX Plan Exclusion
OXYTOCIN-SODIUM CHLORIDE 40-0.9 UNIT/L-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
ANTITOXINS-ANTIVENINS		
ANTIVENIN LATRODECTUS MACTANS KIT	4	PA EX Plan Exclusion
ANTIVENIN MICRURUS FULVIUS RECON SOLN	4	PA EX Plan Exclusion
ANASCORP RECON SOLN	4	PA EX Plan Exclusion
ANAVIP RECON SOLN	4	PA EX Plan Exclusion
CROFAB RECON SOLN	4	PA EX Plan Exclusion
ANTIVIRAL MONOCLONAL ANTIBODIES		
BAMLANIVIMAB 700 MG/20ML SOLUTION	4	PA EX Plan Exclusion
BEBTELOVIMAB 175 MG/2ML SOLUTION	4	PA EX Plan Exclusion
CASIRIVIMAB 1332 MG/11.1ML SOLUTION	4	PA EX Plan Exclusion
CASIRIVIMAB 300 MG/2.5ML SOLUTION	4	PA EX Plan Exclusion
ENFLONSIA 105 MG/0.7ML SOLN PRSYR	4	PA EX Plan Exclusion
ETESEVIMAB 700 MG/20ML SOLUTION	4	PA EX Plan Exclusion
IMDEVIMAB 1332 MG/11.1ML SOLUTION	4	PA EX Plan Exclusion
IMDEVIMAB 300 MG/2.5ML SOLUTION	4	PA EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BEYFORTUS 100 MG/ML SOLN PRSYR	4	PA EX Plan Exclusion
BEYFORTUS 50 MG/0.5ML SOLN PRSYR	4	PA EX Plan Exclusion
SYNAGIS 100 MG/ML SOLUTION	4	PA S EX Plan Exclusion
SYNAGIS 50 MG/0.5ML SOLUTION	4	PA S EX Plan Exclusion
PEMGARDA 500 MG/4ML SOLUTION	4	EX Plan Exclusion
SOTROVIMAB 500 MG/8ML SOLUTION	4	PA EX Plan Exclusion
BACTERIAL MONOCLONAL ANTIBODIES		
ZINPLAVA 1000 MG/40ML SOLUTION	4	PA EX Plan Exclusion
IMMUNE SERUMS		
BABYBIG 100 MG RECON SOLN	4	PA EX Plan Exclusion
CYTOGAM 50 MG/ML SOLUTION	4	PA S EX Plan Exclusion
HEPAGAM B 312 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
HYPERHEP B 110 UNIT/0.5ML SOLN PRSYR	4	PA S EX Plan Exclusion
HYPERHEP B 220 UNIT/ML SOLN PRSYR	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPERHEP B 220 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
NABI-HB 312 UNIT/ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 1.65 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 1 GM/6ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 2 GM/12ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 3.3 GM/20ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 4 GM/24ML SOLUTION	4	PA S EX Plan Exclusion
CUTAQUIG 8 GM/48ML SOLUTION	4	PA S EX Plan Exclusion
PANZYGA 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
PANZYGA 1 GM/10ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PANZYGA 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
PANZYGA 2.5 GM/25ML SOLUTION	4	PA S EX Plan Exclusion
PANZYGA 30 GM/300ML SOLUTION	4	PA S EX Plan Exclusion
PANZYGA 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
GAMASTAN INJECTABLE	4	PA S EX Plan Exclusion
BIVIGAM 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
BIVIGAM 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 0.5 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 10 GM/200ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLEBOGAMMA DIF 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 20 GM/400ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 2.5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 5 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
FLEBOGAMMA DIF 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD S/D LESS IGA 10 GM RECON SOLN	4	PA S EX Plan Exclusion
GAMMAGARD S/D LESS IGA 5 GM RECON SOLN	4	PA S EX Plan Exclusion
GAMMAPLEX 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAPLEX 10 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAPLEX 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMMAPLEX 20 GM/400ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAPLEX 5 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAPLEX 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 10 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 1 GM/20ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 25 GM/500ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 2.5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 2 GM/20ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OCTAGAM 30 GM/300ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 5 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
OCTAGAM 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
PRIVIGEN 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
PRIVIGEN 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
PRIVIGEN 40 GM/400ML SOLUTION	4	PA S EX Plan Exclusion
PRIVIGEN 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD 1 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMMAGARD 2.5 GM/25ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD 30 GM/300ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAGARD 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAKED 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAKED 1 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAKED 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion
GAMMAKED 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
GAMUNEX-C 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
GAMUNEX-C 1 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
GAMUNEX-C 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GAMUNEX-C 2.5 GM/25ML SOLUTION	4	PA S EX Plan Exclusion
GAMUNEX-C 40 GM/400ML SOLUTION	4	PA S EX Plan Exclusion
GAMUNEX-C 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
XEMBIFY 10 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
XEMBIFY 1 GM/5ML SOLUTION	4	PA S EX Plan Exclusion
XEMBIFY 2 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
XEMBIFY 4 GM/20ML SOLUTION	4	PA S EX Plan Exclusion
ASCENIV 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
ALYGLO 10 GM/100ML SOLUTION	4	PA S EX Plan Exclusion
ALYGLO 20 GM/200ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALYGLO 5 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
CUVITRU 10 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
CUVITRU 1 GM/5ML SOLUTION	4	PA S EX Plan Exclusion
CUVITRU 2 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
CUVITRU 4 GM/20ML SOLUTION	4	PA S EX Plan Exclusion
CUVITRU 8 GM/40ML SOLUTION	4	PA S EX Plan Exclusion
HIZENTRA 10 GM/50ML SOLN PRSYR	4	PA S EX Plan Exclusion
HIZENTRA 10 GM/50ML SOLUTION	4	PA S EX Plan Exclusion
HIZENTRA 1 GM/5ML SOLN PRSYR	4	PA S EX Plan Exclusion
HIZENTRA 1 GM/5ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HIZENTRA 2 GM/10ML SOLN PRSYR	4	PA S EX Plan Exclusion
HIZENTRA 2 GM/10ML SOLUTION	4	PA S EX Plan Exclusion
HIZENTRA 4 GM/20ML SOLN PRSYR	4	PA S EX Plan Exclusion
HIZENTRA 4 GM/20ML SOLUTION	4	PA S EX Plan Exclusion
HYPERRAB 1500 UNIT/5ML SOLUTION	4	PA EX Plan Exclusion
HYPERRAB 300 UNIT/ML SOLUTION	4	PA EX Plan Exclusion
HYPERRAB 900 UNIT/3ML SOLUTION	4	PA EX Plan Exclusion
IMOGAM RABIES-HT 300 UNIT/2ML SOLUTION	4	PA EX Plan Exclusion
KEDRAB 1500 UNIT/10ML SOLUTION	4	PA EX Plan Exclusion
KEDRAB 300 UNIT/2ML SOLUTION	4	PA EX Plan Exclusion
HYPERRHO S/D 1500 UNIT SOLN PRSYR	4	PA S EX Plan Exclusion
HYPERRHO S/D 250 UNIT SOLN PRSYR	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MICRHOGAM ULTRA-FILTERED PLUS 250 UNIT SOLN PRSYR	4	PA S EX Plan Exclusion
RHOGAM ULTRA-FILTERED PLUS 1500 UNIT SOLN PRSYR	4	PA S EX Plan Exclusion
RHOPHYLAC 1500 UNIT/2ML SOLN PRSYR	4	PA S EX Plan Exclusion
WINRHO SDF 15000 UNIT/13ML SOLUTION	4	PA S EX Plan Exclusion
WINRHO SDF 1500 UNIT/1.3ML SOLUTION	4	PA S EX Plan Exclusion
WINRHO SDF 2500 UNIT/2.2ML SOLUTION	4	PA S EX Plan Exclusion
WINRHO SDF 5000 UNIT/4.4ML SOLUTION	4	PA S EX Plan Exclusion
HYPERTET 250 UNIT/ML SOLN PRSYR	4	PA EX Plan Exclusion
CNJ-016 50000 UNIT/VIAL SOLUTION	4	PA EX Plan Exclusion
VARIZIG 125 UNIT/1.2ML SOLUTION	4	PA S EX Plan Exclusion
VARIZIG 125 UNIT/1.2ML SOLUTION	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOCLONAL ANTIBODY - COMBINATIONS		
REGEN-COV 1332 & 1332 MG/11.1ML SOLUTION	4	PA EX Plan Exclusion
REGEN-COV 1332 & (4)300MG/ 11.1&2.5ML SOLUTION	4	PA EX Plan Exclusion
REGEN-COV 300 & 300 MG/2.5ML SOLUTION	4	PA EX Plan Exclusion
REGEN-COV (4)300 & (4)300 MG/2.5ML SOLUTION	4	PA EX Plan Exclusion
REGEN-COV (4)300MG & 1332/ 2.5&11.1ML SOLUTION	4	PA EX Plan Exclusion
REGEN-COV 600-600 MG/10ML SOLUTION	4	PA EX Plan Exclusion
EVUSHELD 150 & 150 MG/1.5ML SOLUTION	4	PA EX Plan Exclusion
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA 10 GM/100ML KIT	4	PA S EX Plan Exclusion
HYQVIA 20 GM/200ML KIT	4	PA S EX Plan Exclusion
HYQVIA 2.5 GM/25ML KIT	4	PA S EX Plan Exclusion
HYQVIA 30 GM/300ML KIT	4	PA S EX Plan Exclusion
HYQVIA 5 GM/50ML KIT	4	PA S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENICILLINS		
AMINOPENICILLINS		
<i>amoxicillin (trihydrate) for susp 125 mg/5ml</i>	1	
AMOXICILLIN 125 MG CHEW TAB	1	
<i>amoxicillin (trihydrate) for susp 200 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) for susp 250 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) cap 250 mg</i>	1	
AMOXICILLIN 250 MG CHEW TAB	1	
<i>amoxicillin (trihydrate) for susp 400 mg/5ml</i>	1	
<i>amoxicillin (trihydrate) cap 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 500 mg</i>	1	
<i>amoxicillin (trihydrate) tab 875 mg</i>	1	
<i>ampicillin cap 500 mg</i>	1	
<i>ampicillin sodium for iv soln 10 gm</i>	4	EX Plan Exclusion
AMPICILLIN SODIUM 125 MG RECON SOLN	4	EX Plan Exclusion
AMPICILLIN SODIUM 1 GM RECON SOLN	4	EX Plan Exclusion
<i>ampicillin sodium for inj 1 gm</i>	4	EX Plan Exclusion
<i>ampicillin sodium for inj 250 mg</i>	4	EX Plan Exclusion
AMPICILLIN SODIUM 2 GM RECON SOLN	4	EX Plan Exclusion
<i>ampicillin sodium for inj 2 gm</i>	4	EX Plan Exclusion
<i>ampicillin sodium for inj 500 mg</i>	4	EX Plan Exclusion
NATURAL PENICILLINS		
BICILLIN L-A 1200000 UNIT/2ML SUSP PRSYR	4	EX Plan Exclusion
BICILLIN L-A 2400000 UNIT/4ML SUSP PRSYR	4	EX Plan Exclusion
BICILLIN L-A 600000 UNIT/ML SUSP PRSYR	4	EX Plan Exclusion
EXTENCILLINE 1200000 UNIT RECON SUSP	4	EX Plan Exclusion
EXTENCILLINE 2400000 UNIT RECON SUSP	4	EX Plan Exclusion
LENTOCILIN 1200000 UNIT RECON SUSP	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>penicillin g potassium for inj 20000000 unit</i>	4	EX Plan Exclusion
<i>penicillin g potassium for inj 5000000 unit</i>	4	EX Plan Exclusion
<i>penicillin g potassium for inj 20000000 unit</i>	4	EX Plan Exclusion
<i>penicillin g potassium for inj 5000000 unit</i>	4	EX Plan Exclusion
PENICILLIN G POT IN DEXTROSE 20000 UNIT/ML SOLUTION	4	EX Plan Exclusion
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML SOLUTION	4	EX Plan Exclusion
PENICILLIN G POT IN DEXTROSE 60000 UNIT/ML SOLUTION	4	EX Plan Exclusion
PENICILLIN G PROCAINE 600000 UNIT/ML SUSPENSION	4	EX Plan Exclusion
PENICILLIN G SODIUM 5000000 UNIT RECON SOLN	4	EX Plan Exclusion
PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN	1	
PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN	1	
<i>penicillin v potassium tab 250 mg</i>	1	
<i>penicillin v potassium tab 500 mg</i>	1	
PENICILLIN COMBINATIONS		
<i>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</i>	1	
AMOXICILLIN-POT CLAVULANATE 200-28.5 MG CHEW TAB	1	
<i>amoxicillin & k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate for susp 400-57 mg/5ml</i>	1	
AMOXICILLIN-POT CLAVULANATE 400-57 MG CHEW TAB	1	
<i>amoxicillin & k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin & k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
AMPICILLIN-SULBACTAM SODIUM 1.5 (1-0.5) GM RECON SOLN	4	EX Plan Exclusion
<i>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</i>	4	EX Plan Exclusion
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ampicillin & sulbactam sodium for inj 3 (2-1) gm</i>	4	EX Plan Exclusion
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	4	EX Plan Exclusion
UNASYN 1.5 (1-0.5) GM RECON SOLN	4	EX Plan Exclusion
UNASYN 15 (10-5) GM RECON SOLN	4	EX Plan Exclusion
UNASYN 3 (2-1) GM RECON SOLN	4	EX Plan Exclusion
BICILLIN C-R 1200000 UNIT/2ML SUSPENSION	4	EX Plan Exclusion
BICILLIN C-R 900/300 900000-300000 UNIT/2ML SUSPENSION	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	4	EX Plan Exclusion
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	4	EX Plan Exclusion
ZOSYN 2-0.25 GM/50ML SOLUTION	4	EX Plan Exclusion
ZOSYN 3-0.375 GM/50ML SOLUTION	4	EX Plan Exclusion
ZOSYN 4-0.5 GM/100ML SOLUTION	4	EX Plan Exclusion
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium cap 250 mg</i>	1	
<i>dicloxacillin sodium cap 500 mg</i>	1	
<i>nafcillin sodium for iv soln 10 gm</i>	4	EX Plan Exclusion
NAFCILLIN SODIUM 1 GM RECON SOLN	4	EX Plan Exclusion
<i>nafcillin sodium for inj 1 gm</i>	4	EX Plan Exclusion
NAFCILLIN SODIUM 2 GM RECON SOLN	4	EX Plan Exclusion
<i>nafcillin sodium for inj 2 gm</i>	4	EX Plan Exclusion
NAFCILLIN SODIUM IN DEXTROSE 1 GM/50ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NAFCILLIN SODIUM IN DEXTROSE 2 GM/100ML SOLUTION	4	EX Plan Exclusion
<i>oxacillin sodium for iv soln 10 gm (base equivalent)</i>	4	EX Plan Exclusion
<i>oxacillin sodium for inj 1 gm (base equivalent)</i>	4	EX Plan Exclusion
<i>oxacillin sodium for inj 2 gm (base equivalent)</i>	4	EX Plan Exclusion
OXACILLIN SODIUM IN DEXTROSE 1 GM/50ML SOLUTION	4	EX Plan Exclusion
OXACILLIN SODIUM IN DEXTROSE 2 GM/50ML SOLUTION	4	EX Plan Exclusion
PHARMACEUTICAL ADJUVANTS		
PARENTERAL VEHICLES		
SALINE BACTERIOSTATIC 0.9 % SOLUTION	4	EX Plan Exclusion
SODIUM CHLORIDE BACTERIOSTATIC 0.9 % SOLUTION	4	EX Plan Exclusion
DILUENT FOR LEFAMULIN 0.9 % SOLUTION	4	EX Plan Exclusion
IV STABILIZER FOR LUMOXITI 0.7-6.5-6.4 MG/ML SOLUTION	4	EX Plan Exclusion
DILUENT FOR TREPROSTINIL SOLUTION	4	EX Plan Exclusion
<i>glycine diluent for injection</i>	4	EX Plan Exclusion
STERILE DILUENT FLOLAN PH 12 SOLUTION	4	EX Plan Exclusion
STERILE DILUENT FOR REMODULIN SOLUTION	4	EX Plan Exclusion
SALINE-PHENOL 0.4-0.9 % SOLUTION	4	EX Plan Exclusion
BACTERIOSTATIC WATER(BENZ ALC) SOLUTION	4	EX Plan Exclusion
STERILE WATER FOR INJECTION SOLUTION	4	EX Plan Exclusion
<i>water for injection</i>	4	EX Plan Exclusion
PROGESTINS		
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>medroxyprogesterone acetate tab 10 mg</i>	1	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 2.5 mg</i>	1	
<i>medroxyprogesterone acetate tab 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>medroxyprogesterone acetate tab 5 mg</i>	1	
MEGESTROL ACETATE 625 MG/5ML SUSPENSION	1	
<i>megestrol acetate susp 625 mg/5ml</i>	1	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>norethindrone acetate tab 5 mg</i>	1	
<i>progesterone cap 100 mg</i>	1	
<i>progesterone cap 200 mg</i>	1	
<i>progesterone im in oil 50 mg/ml</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR OPIOID WITHDRAWAL		
<i>lofexidine hcl tab 0.18 mg (base equivalent)</i>	1	PA
ALCOHOL DETERRENTS		
<i>acamprosate calcium tab delayed release 333 mg</i>	1	
<i>disulfiram tab 250 mg</i>	1	
<i>disulfiram tab 500 mg</i>	1	
ALZHEIMER'S TREATMENT - ANTI-AMYLOID ANTIBODIES		
ADUHELM 170 MG/1.7ML SOLUTION	4	S EX Plan Exclusion
ADUHELM 300 MG/3ML SOLUTION	4	S EX Plan Exclusion
KISUNLA 350 MG/20ML SOLUTION	4	S EX Plan Exclusion
LEQEMBI 200 MG/2ML SOLUTION	4	S EX Plan Exclusion
LEQEMBI 500 MG/5ML SOLUTION	4	S EX Plan Exclusion
ANTI-CATAPLECTIC AGENTS		
SODIUM OXYBATE 500 MG/ML SOLUTION	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-CATAPLECTIC COMBINATIONS		
XYWAV 500 MG/ML SOLUTION	3	PA S
ANTIDEMENTIA AGENT COMBINATIONS		
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	2	
<i>memantine hcl-donepezil hcl cap er 24hr 21-10 mg</i>	2	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	2	
<i>memantine hcl-donepezil hcl cap er 24hr 14-10 mg</i>	2	
<i>memantine hcl-donepezil hcl cap er 24hr 28-10 mg</i>	2	
BENZODIAZEPINES & TRICYCLIC AGENTS		
CHLORDIAZEPOXIDE-AMITRIPTYLINE 10-25 MG TAB	1	
CHLORDIAZEPOXIDE-AMITRIPTYLINE 5-12.5 MG TAB	1	
CALD - AUTOLOGOUS CELLULAR GENE THERAPY AGENTS		
SKYSONA SUSPENSION	4	PA S EX Plan Exclusion
CHOLINOMIMETICS - ACHE INHIBITORS		
ADLARITY 10 MG/DAY PATCH WK	3	PA
ADLARITY 5 MG/DAY PATCH WK	3	PA
<i>donepezil hydrochloride tab 10 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 10 mg</i>	1	
<i>donepezil hydrochloride tab 23 mg</i>	1	
<i>donepezil hydrochloride tab 5 mg</i>	1	
<i>donepezil hydrochloride orally disintegrating tab 5 mg</i>	1	
<i>galantamine hydrobromide tab 12 mg</i>	1	
GALANTAMINE HYDROBROMIDE 4 MG/ML SOLUTION	1	
<i>galantamine hydrobromide tab 4 mg</i>	1	
<i>galantamine hydrobromide tab 8 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 16 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>galantamine hydrobromide cap er 24hr 24 mg</i>	1	
<i>galantamine hydrobromide cap er 24hr 8 mg</i>	1	
<i>rivastigmine td patch 24hr 13.3 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 4.6 mg/24hr</i>	1	
<i>rivastigmine td patch 24hr 9.5 mg/24hr</i>	1	
<i>rivastigmine tartrate cap 1.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 3 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 4.5 mg (base equivalent)</i>	1	
<i>rivastigmine tartrate cap 6 mg (base equivalent)</i>	1	
FIBROMYALGIA AGENT - SNRIS		
SAVELLA 100 MG TAB	2	PA
SAVELLA 12.5 MG TAB	2	PA
SAVELLA 25 MG TAB	2	PA
SAVELLA 50 MG TAB	2	PA
SAVELLA TITRATION PACK 12.5 & 25 & 50 MG MISC	2	PA
MELANOCORTIN RECEPTOR AGONISTS		
VYLEESI 1.75 MG/0.3ML SOLN A-INJ	4	PA EX Plan Exclusion
MLD - AUTOLOGOUS CELLULAR GENE THERAPY AGENTS		
LENMELDY SUSPENSION	4	PA S EX Plan Exclusion
MOVEMENT DISORDER DRUG THERAPY		
AUSTEDO 12 MG TAB	2	PA S
AUSTEDO 6 MG TAB	2	PA S
AUSTEDO 9 MG TAB	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUSTEDO PATIENT TITRATION KIT 6 & 9 & 12 MG TAB THPK	2	PA S
AUSTEDO XR 12 MG TAB ER 24H	2	PA S
AUSTEDO XR 18 MG TAB ER 24H	2	PA S
AUSTEDO XR 24 MG TAB ER 24H	2	PA S
AUSTEDO XR 30 MG TAB ER 24H	2	PA S
AUSTEDO XR 36 MG TAB ER 24H	2	PA S
AUSTEDO XR 42 MG TAB ER 24H	2	PA S
AUSTEDO XR 48 MG TAB ER 24H	2	PA S
AUSTEDO XR 6 MG TAB ER 24H	2	PA S
AUSTEDO XR PATIENT TITRATION 12 & 18 & 24 & 30 MG TBER THPK	2	PA S
AUSTEDO XR PATIENT TITRATION 6 & 12 & 24 MG TBER THPK	2	PA S
<i>tetrabenazine tab 12.5 mg</i>	1	PA S
<i>tetrabenazine tab 25 mg</i>	1	PA S
INGREZZA 40 & 80 MG CAP THPK	2	PA S
INGREZZA 40 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INGREZZA 40 MG CAP SPRINK	2	PA S
INGREZZA 60 MG CAP	2	PA S
INGREZZA 60 MG CAP SPRINK	2	PA S
INGREZZA 80 MG CAP	2	PA S
INGREZZA 80 MG CAP SPRINK	2	PA S
MS AGENTS - PYRIMIDINE SYNTHESIS INHIBITORS		
<i>teriflunomide tab 14 mg</i>	1	PA S
<i>teriflunomide tab 7 mg</i>	1	PA S
MULTIPLE SCLEROSIS AGENTS		
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	1	PA S
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	1	PA S
<i>glatiramer acetate soln prefilled syringe 20 mg/ml</i>	1	PA S
<i>glatiramer acetate soln prefilled syringe 40 mg/ml</i>	1	PA S
MULTIPLE SCLEROSIS AGENTS - ANTIMETABOLITES		
MAVENCLAD (10 TABS) 10 MG TAB THPK	3	PA S
MAVENCLAD (4 TABS) 10 MG TAB THPK	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MAVENCLAD (5 TABS) 10 MG TAB THPK	3	PA S
MAVENCLAD (6 TABS) 10 MG TAB THPK	3	PA S
MAVENCLAD (7 TABS) 10 MG TAB THPK	3	PA S
MAVENCLAD (8 TABS) 10 MG TAB THPK	3	PA S
MAVENCLAD (9 TABS) 10 MG TAB THPK	3	PA S
MULTIPLE SCLEROSIS AGENTS - COMBINATIONS		
OCREVUS ZUNOVO 920-23000 MG-UT/23ML SOLUTION	3	PA S
MULTIPLE SCLEROSIS AGENTS - INTERFERONS		
AVONEX PEN 30 MCG/0.5ML AUT-IJ KIT	3	PA S
AVONEX PREFILLED 30 MCG/0.5ML PREF SY KT	3	PA S
EXTAVIA 0.3 MG KIT	2	PA S
PLEGRIDY 125 MCG/0.5ML SOLN A-INJ	3	PA S
PLEGRIDY 125 MCG/0.5ML SOLN PRSYR	3	PA S
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN A-INJ	3	PA S
PLEGRIDY STARTER PACK 63 & 94 MCG/0.5ML SOLN PRSYR	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MULTIPLE SCLEROSIS AGENTS - MONOCLONAL ANTIBODIES		
LEMTRADA 12 MG/1.2ML SOLUTION	4	PA S EX Plan Exclusion
TYSABRI 300 MG/15ML CONC	4	PA S EX Plan Exclusion
OCREVUS 300 MG/10ML SOLUTION	4	PA S EX Plan Exclusion
KESIMPTA 20 MG/0.4ML SOLN A-INJ	3	PA S
BRIUMVI 150 MG/6ML SOLUTION	4	PA S EX Plan Exclusion
MULTIPLE SCLEROSIS AGENTS - NRF2 PATHWAY ACTIVATORS		
<i>dimethyl fumarate capsule delayed release 120 mg</i>	1	PA S
<i>dimethyl fumarate capsule delayed release 240 mg</i>	1	PA S
<i>dimethyl fumarate capsule dr starter pack 120 mg & 240 mg</i>	1	PA S
VUMERITY 231 MG CAP DR	3	PA S
BAFIERTAM 95 MG CAP DR	3	PA S
MULTIPLE SCLEROSIS AGENTS - POTASSIUM CHANNEL BLOCKERS		
<i>dalfampridine tab er 12hr 10 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONISTS		
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 10 mg</i>	1	
MEMANTINE HCL 28 X 5 MG & 21 X 10 MG TAB	1	
<i>memantine hcl oral solution 2 mg/ml</i>	1	
<i>memantine hcl tab 5 mg</i>	1	
<i>memantine hcl cap er 24hr 14 mg</i>	1	
<i>memantine hcl cap er 24hr 21 mg</i>	1	
<i>memantine hcl cap er 24hr 28 mg</i>	1	
<i>memantine hcl cap er 24hr 7 mg</i>	1	
PHENOTHIAZINES & TRICYCLIC AGENTS		
PERPHENAZINE-AMITRIPTYLINE 2-10 MG TAB	1	
PERPHENAZINE-AMITRIPTYLINE 2-25 MG TAB	1	
PERPHENAZINE-AMITRIPTYLINE 4-10 MG TAB	1	
PERPHENAZINE-AMITRIPTYLINE 4-25 MG TAB	1	
PERPHENAZINE-AMITRIPTYLINE 4-50 MG TAB	1	
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
<i>gabapentin (once-daily) tab 300 mg</i>	1	
<i>gabapentin (once-daily) tab 600 mg</i>	1	
GRALISE 300 MG TAB	2	
GRALISE 450 MG TAB	2	
GRALISE 600 MG TAB	2	
GRALISE 750 MG TAB	2	
GRALISE 900 MG TAB	2	
<i>pregabalin tab er 24hr 165 mg</i>	1	
<i>pregabalin tab er 24hr 330 mg</i>	1	
<i>pregabalin tab er 24hr 82.5 mg</i>	1	
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS - SSRIS		
FLUOXETINE HCL (PMDD) 10 MG TAB	1	
FLUOXETINE HCL (PMDD) 20 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PSEUDOBULBAR AFFECT AGENT COMBINATIONS		
NUEDEXTA 20-10 MG CAP	2	PA
PIMOZIDE 1 MG TAB	1	PA
PIMOZIDE 2 MG TAB	1	PA
RESTLESS LEG SYNDROME (RLS) AGENTS		
HORIZANT 300 MG TAB ER	3	PA
HORIZANT 600 MG TAB ER	3	PA
SEROTONIN 1A RECEPT AGONIST/SEROTONIN 2A RECEPT ANTAG		
ADDYI 100 MG TAB	4	PA EX Plan Exclusion
SMALL INTERFERING RIBONUCLEIC ACID (SIRNA) AGENTS		
ONPATTRO 10 MG/5ML SOLUTION	4	PA S EX Plan Exclusion
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	
<i>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</i>	1	
NICOTROL 10 MG INHALER	3	
NICOTROL NS 10 MG/ML SOLUTION	3	
APO-VARENICLINE 0.5 MG TAB	3	
APO-VARENICLINE 1 MG TAB	3	
<i>varenicline tartrate tab 0.5 mg (base equiv)</i>	1	
<i>varenicline tartrate tab 1 mg (base equiv)</i>	1	
<i>varenicline tartrate tab 1 mg (base equiv)</i>	1	
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	1	
SPHINGOSINE 1-PHOSPHATE (S1P) RECEPTOR MODULATORS		
<i>fingolimod hcl cap 0.5 mg (base equiv)</i>	1	PA S
GILENYA 0.25 MG CAP	2	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEPOSIA 0.92 MG CAP	3	PA S
ZEPOSIA 7-DAY STARTER PACK 4 X 0.23MG & 3 X 0.46MG CAP THPK	3	PA S
ZEPOSIA STARTER KIT 0.23MG & 0.46MG 0.92MG(21) CAP THPK	3	PA S
ZEPOSIA STARTER KIT 0.23MG & 0.46MG & 0.92MG CAP THPK	3	PA S
PONVORY 20 MG TAB	3	PA S
PONVORY STARTER PACK 2-3-4-5-6-7-8-9 & 10 MG TAB THPK	3	PA S
MAYZENT 0.25 MG TAB	3	PA S
MAYZENT 1 MG TAB	3	PA S
MAYZENT 2 MG TAB	3	PA S
MAYZENT STARTER PACK 12 X 0.25 MG TAB THPK	3	PA S
MAYZENT STARTER PACK 7 X 0.25 MG TAB THPK	3	PA S
THIENBENZODIAZEPINES & OPIOID ANTAGONISTS		
LYBALVI 10-10 MG TAB	3	PA
LYBALVI 15-10 MG TAB	3	PA
LYBALVI 20-10 MG TAB	3	PA
LYBALVI 5-10 MG TAB	3	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THIENBENZODIAZEPINES & SSRIS		
<i>olanzapine-fluoxetine hcl cap 12-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 12-50 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 3-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-25 mg</i>	1	
<i>olanzapine-fluoxetine hcl cap 6-50 mg</i>	1	
SYMBYAX 3-25 MG CAP	3	PA
SYMBYAX 6-25 MG CAP	3	PA
VASOMOTOR SYMPTOM AGENTS - SSRIS		
<i>paroxetine mesylate cap 7.5 mg (base equiv)</i>	1	
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST NP 1000 MG RECON SOLN	4	S EX Plan Exclusion
ARALAST NP 500 MG RECON SOLN	4	S EX Plan Exclusion
GLASSIA 1000 MG/50ML SOLUTION	4	S EX Plan Exclusion
GLASSIA 4 GM/200ML SOLUTION	4	S EX Plan Exclusion
GLASSIA 5 GM/250ML SOLUTION	4	S EX Plan Exclusion
PROLASTIN-C 1000 MG/20ML SOLUTION	4	S EX Plan Exclusion
PROLASTIN-C 1000 MG RECON SOLN	4	S EX Plan Exclusion
ZEMAIRA 1000 MG RECON SOLN	4	S EX Plan Exclusion
ZEMAIRA 4000 MG RECON SOLN	4	S EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZEMAIRA 5000 MG RECON SOLN	4	S EX Plan Exclusion
CFTR POTENTIATORS		
KALYDECO 13.4 MG PACKET	3	PA S
KALYDECO 150 MG TAB	3	PA S
KALYDECO 25 MG PACKET	3	PA S
KALYDECO 50 MG PACKET	3	PA S
KALYDECO 5.8 MG PACKET	3	PA S
KALYDECO 75 MG PACKET	3	PA S
CYSTIC FIBROSIS AGENT - COMBINATIONS		
TRIKAFTA 100-50-75 & 150 MG TAB THPK	2	PA S
TRIKAFTA 100-50-75 & 75 MG THER PACK	2	PA S
TRIKAFTA 50-25-37.5 & 75 MG TAB THPK	2	PA S
TRIKAFTA 80-40-60 & 59.5 MG THER PACK	2	PA S
ORKAMBI 100-125 MG PACKET	3	PA S
ORKAMBI 100-125 MG TAB	3	PA S
ORKAMBI 150-188 MG PACKET	3	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORKAMBI 200-125 MG TAB	3	PA S
ORKAMBI 75-94 MG PACKET	3	PA S
SYMDEKO 100-150 & 150 MG TAB THPK	3	PA S
SYMDEKO 50-75 & 75 MG TAB THPK	3	PA S
ALYFTREK 10-50-125 MG TAB	3	PA S
ALYFTREK 4-20-50 MG TAB	3	PA S
CYSTIC FIBROSIS AGENTS - MISCELLANEOUS		
BRONCHITOL 40 MG CAP	3	PA S
BRONCHITOL TOLERANCE TEST 40 MG CAP	3	PA S
HYDROLYTIC ENZYMES		
PULMOZYME 2.5 MG/2.5ML SOLUTION	2	PA S
PLEURAL SCLEROSING AGENTS		
STERITALC 2 GM POWDER	4	EX Plan Exclusion
STERITALC 3 GM POWDER	4	EX Plan Exclusion
STERITALC 4 GM POWDER	4	EX Plan Exclusion
PULMONARY FIBROSIS AGENTS		
<i>pirfenidone cap 267 mg</i>	1	PA S
<i>pirfenidone tab 267 mg</i>	1	PA S

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PIRFENIDONE 534 MG TAB	1	PA S
<i>pirfenidone tab 801 mg</i>	1	PA S
PULMONARY FIBROSIS AGENTS - KINASE INHIBITORS		
OFEV 100 MG CAP	2	PA S
OFEV 150 MG CAP	2	PA S
SURVANTA 25-0.9 MG/ML-% SUSPENSION	4	PA EX Plan Exclusion
INFASURF 35-0.9 MG/ML-% SUSPENSION	4	PA EX Plan Exclusion
CUROSURF 120 MG/1.5ML SUSPENSION	4	PA EX Plan Exclusion
CUROSURF 240 MG/3ML SUSPENSION	4	PA EX Plan Exclusion
SULFONAMIDES		
<i>sulfadiazine tab 500 mg</i>	1	
<i>sulfadiazine tab 500 mg</i>	1	
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA 100 MG RECON SOLN	4	EX Plan Exclusion
NUZYRA 150 MG TAB	3	PA
FLUOROCYCLINES		
XERAVA 100 MG RECON SOLN	4	EX Plan Exclusion
XERAVA 50 MG RECON SOLN	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GLYCYLCYCLINES		
TIGECYCLINE 50 MG RECON SOLN	4	EX Plan Exclusion
<i>tigecycline for iv soln 50 mg</i>	4	EX Plan Exclusion
TYGACIL 50 MG RECON SOLN	4	EX Plan Exclusion
<i>demeclocycline hcl tab 150 mg</i>	2	
<i>demeclocycline hcl tab 300 mg</i>	2	
<i>doxycycline hyclate for inj 100 mg</i>	4	EX Plan Exclusion
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline hyclate for inj 100 mg</i>	4	EX Plan Exclusion
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate tab delayed release 100 mg</i>	2	PA
<i>doxycycline hyclate tab 150 mg</i>	1	
<i>doxycycline hyclate tab delayed release 150 mg</i>	2	PA
<i>doxycycline hyclate tab delayed release 200 mg</i>	2	PA
<i>doxycycline hyclate tab 20 mg</i>	1	
<i>doxycycline hyclate cap 50 mg</i>	1	
<i>doxycycline hyclate tab 50 mg</i>	1	
<i>doxycycline hyclate tab delayed release 50 mg</i>	2	PA
<i>doxycycline hyclate tab 75 mg</i>	1	
<i>doxycycline hyclate tab delayed release 75 mg</i>	2	PA
DOXYCYCLINE HYCLATE 80 MG TAB DR	2	PA
<i>doxycycline hyclate tab 100 mg</i>	1	
<i>doxycycline hyclate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate tab 100 mg</i>	1	
<i>doxycycline monohydrate cap 150 mg</i>	1	
<i>doxycycline monohydrate tab 150 mg</i>	1	
<i>doxycycline monohydrate for susp 25 mg/5ml</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>doxycycline monohydrate cap 50 mg</i>	1	
<i>doxycycline monohydrate tab 50 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	1	
<i>doxycycline monohydrate tab 75 mg</i>	1	
<i>doxycycline monohydrate cap 100 mg</i>	1	
<i>doxycycline monohydrate cap 75 mg</i>	1	
MINOCIN 100 MG RECON SOLN	4	EX Plan Exclusion
<i>minocycline hcl cap 100 mg</i>	1	
<i>minocycline hcl tab 100 mg</i>	1	
<i>minocycline hcl cap 50 mg</i>	1	
<i>minocycline hcl tab 50 mg</i>	1	
<i>minocycline hcl cap 75 mg</i>	1	
<i>minocycline hcl tab 75 mg</i>	1	
<i>minocycline hcl tab er 24hr 105 mg</i>	2	PA
<i>minocycline hcl tab er 24hr 80 mg</i>	2	PA
SOLODYN 105 MG TAB ER 24H	2	PA
SOLODYN 115 MG TAB ER 24H	2	PA
SOLODYN 55 MG TAB ER 24H	2	PA
SOLODYN 65 MG TAB ER 24H	2	PA
SOLODYN 80 MG TAB ER 24H	2	PA
<i>tetracycline hcl cap 250 mg</i>	1	
TETRACYCLINE HCL 250 MG TAB	1	
<i>tetracycline hcl cap 500 mg</i>	1	
TETRACYCLINE HCL 500 MG TAB	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole tab 10 mg</i>	1	
<i>methimazole tab 10 mg</i>	1	
<i>methimazole tab 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methimazole tab 5 mg</i>	1	
<i>propylthiouracil tab 50 mg</i>	1	
ANTITHYROID AGENTS - RADIOPHARMACEUTICALS		
SODIUM IODIDE I-131 1000 MCI/ML SOLUTION	4	EX Plan Exclusion
THYROID HORMONES		
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
LEVOTHYROXINE SODIUM 100 MCG/5ML SOLUTION	4	EX Plan Exclusion
LEVOTHYROXINE SODIUM 100 MCG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LEVOTHYROXINE SODIUM 100 MCG RECON SOLN	4	EX Plan Exclusion
<i>levothyroxine sodium for iv inj 100 mcg</i>	4	EX Plan Exclusion
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
LEVOTHYROXINE SODIUM 200 MCG/5ML SOLUTION	4	EX Plan Exclusion
LEVOTHYROXINE SODIUM 200 MCG RECON SOLN	4	EX Plan Exclusion
<i>levothyroxine sodium for iv inj 200 mcg</i>	4	EX Plan Exclusion
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
LEVOTHYROXINE SODIUM 500 MCG/5ML SOLUTION	4	EX Plan Exclusion
LEVOTHYROXINE SODIUM 500 MCG RECON SOLN	4	EX Plan Exclusion
<i>levothyroxine sodium for iv inj 500 mcg</i>	4	EX Plan Exclusion
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
SYNTHROID 100 MCG TAB	2	
SYNTHROID 112 MCG TAB	2	
SYNTHROID 125 MCG TAB	2	
SYNTHROID 137 MCG TAB	2	
SYNTHROID 150 MCG TAB	2	
SYNTHROID 175 MCG TAB	2	
SYNTHROID 200 MCG TAB	2	
SYNTHROID 25 MCG TAB	2	
SYNTHROID 300 MCG TAB	2	
SYNTHROID 50 MCG TAB	2	
SYNTHROID 75 MCG TAB	2	
SYNTHROID 88 MCG TAB	2	
<i>levothyroxine sodium tab 100 mcg</i>	1	
<i>levothyroxine sodium tab 112 mcg</i>	1	
<i>levothyroxine sodium tab 125 mcg</i>	1	
<i>levothyroxine sodium tab 137 mcg</i>	1	
<i>levothyroxine sodium tab 150 mcg</i>	1	
<i>levothyroxine sodium tab 175 mcg</i>	1	
<i>levothyroxine sodium tab 200 mcg</i>	1	
<i>levothyroxine sodium tab 25 mcg</i>	1	
<i>levothyroxine sodium tab 300 mcg</i>	1	
<i>levothyroxine sodium tab 50 mcg</i>	1	
<i>levothyroxine sodium tab 75 mcg</i>	1	
<i>levothyroxine sodium tab 88 mcg</i>	1	
CYTOMEL 25 MCG TAB	2	
CYTOMEL 50 MCG TAB	2	
CYTOMEL 5 MCG TAB	2	
<i>liothyronine sodium tab 25 mcg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>liothyronine sodium tab 50 mcg</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
LIOTHYRONINE SODIUM 10 MCG/ML SOLUTION	4	EX Plan Exclusion
<i>liothyronine sodium tab 25 mcg</i>	1	
<i>liothyronine sodium tab 50 mcg</i>	1	
<i>liothyronine sodium tab 5 mcg</i>	1	
TRIOSTAT 10 MCG/ML SOLUTION	4	EX Plan Exclusion
ADTHYZA 120 MG TAB	3	
ADTHYZA 130 MG TAB	3	
ADTHYZA 15 MG TAB	3	
ADTHYZA 16.25 MG TAB	3	
ADTHYZA 30 MG TAB	3	
ADTHYZA 32.5 MG TAB	3	
ADTHYZA 60 MG TAB	3	
ADTHYZA 65 MG TAB	3	
ADTHYZA 90 MG TAB	3	
ADTHYZA 97.5 MG TAB	3	
ARMOUR THYROID 120 MG TAB	2	
ARMOUR THYROID 15 MG TAB	2	
ARMOUR THYROID 180 MG TAB	2	
ARMOUR THYROID 240 MG TAB	2	
ARMOUR THYROID 300 MG TAB	2	
ARMOUR THYROID 30 MG TAB	2	
ARMOUR THYROID 60 MG TAB	2	
ARMOUR THYROID 90 MG TAB	2	
NIVA THYROID 120 MG TAB	3	
NIVA THYROID 15 MG TAB	3	
NIVA THYROID 30 MG TAB	3	
NIVA THYROID 60 MG TAB	3	
NIVA THYROID 90 MG TAB	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NP THYROID 120 MG TAB	1	
NP THYROID 15 MG TAB	1	
NP THYROID 30 MG TAB	1	
NP THYROID 60 MG TAB	1	
NP THYROID 90 MG TAB	1	
RENTHYROID 120 MG TAB	3	
RENTHYROID 15 MG TAB	3	
RENTHYROID 30 MG TAB	3	
RENTHYROID 60 MG TAB	3	
RENTHYROID 90 MG TAB	3	
THYROID 120 MG TAB	3	
THYROID 15 MG TAB	3	
THYROID 30 MG TAB	2	
THYROID 60 MG TAB	3	
THYROID 90 MG TAB	2	
TOXOIDS		
TOXOID COMBINATIONS		
PENTACEL RECON SUSP	2	
PEDIARIX SUSP PRSYR	2	
KINRIX 0.5 ML SUSP PRSYR	2	
QUADRACEL 0.5 ML SUSP PRSYR	2	
QUADRACEL SUSPENSION	2	
VAXELIS SUSPENSION	2	
VAXELIS SUSP PRSYR	2	
DAPTACEL 23-15-5 SUSPENSION	2	
INFANRIX 25-58-10 SUSPENSION	2	
DIPHThERIA-TETANUS TOXOIDS DT 25-5 LFU/0.5ML SUSPENSION	2	
TDVAX 2-2 LF/0.5ML SUSPENSION	2	
TENIVAC 5-2 LFU INJECTABLE	2	
TETANUS-DIPHThERIA TOXOIDS TD 2-2 LF/0.5ML SUSPENSION	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ADACEL 5-2-15.5 LF-MCG/0.5 SUSPENSION	2	
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSPENSION	2	
BOOSTRIX 5-2.5-18.5 LF-MCG/0.5 SUSP PRSYR	2	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTICHOLINERGIC COMBINATIONS		
BELLADONNA ALKALOIDS-OPIUM 16.2-30 MG SUPPOS	3	
BELLADONNA ALKALOIDS-OPIUM 16.2-60 MG SUPPOS	3	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	1	
CHLORDIAZEPOXIDE-CLIDINIUM 5-2.5 MG CAP	1	
<i>chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg</i>	1	
PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG/5ML ELIXIR	1	
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	1	
PB-HYOSCY-ATROPINE-SCOPOLAMINE 16.2 MG TAB	1	
<i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i>	1	
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	1	
<i>pb-hyoscy-atrop-scopol elix 16.2-0.1037-0.0194-0.0065 mg/5ml</i>	1	
<i>pb-hyoscy-atrop-scopol tab 16.2-0.1037-0.0194-0.0065 mg</i>	1	
PHENOHYTRO 16.2 MG/5ML ELIXIR	1	
PHENOHYTRO 16.2 MG TAB	1	
ANTISPASMODICS		
<i>dicyclomine hcl oral soln 10 mg/5ml</i>	1	
<i>dicyclomine hcl cap 10 mg</i>	1	
<i>dicyclomine hcl inj 10 mg/ml</i>	1	
<i>dicyclomine hcl tab 20 mg</i>	1	
DICYCLOMINE HCL 40 MG TAB	1	
BELLADONNA ALKALOIDS		
ATROPEN 0.25 MG/0.3ML SOLN A-INJ	4	EX Plan Exclusion
ATROPEN 0.5 MG/0.7ML SOLN A-INJ	4	EX Plan Exclusion
ATROPEN 1 MG/0.7ML SOLN A-INJ	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ATROPEN 2 MG/0.7ML SOLN A-INJ	4	EX Plan Exclusion
ATROPINE SULFATE 0.25 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)</i>	4	EX Plan Exclusion
ATROPINE SULFATE 0.4 MG/ML SOLN PRSYR	4	EX Plan Exclusion
ATROPINE SULFATE 0.4 MG/ML SOLUTION	4	EX Plan Exclusion
<i>atropine sulfate iv soln 0.4 mg/ml</i>	4	EX Plan Exclusion
ATROPINE SULFATE 0.5 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)</i>	4	EX Plan Exclusion
ATROPINE SULFATE 0.8 MG/2ML SOLN PRSYR	4	EX Plan Exclusion
ATROPINE SULFATE 1.2 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
ATROPINE SULFATE 1 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
<i>atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)</i>	4	EX Plan Exclusion
ATROPINE SULFATE 1 MG/2.5ML SOLN PRSYR	4	EX Plan Exclusion
ATROPINE SULFATE 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>atropine sulfate iv soln 1 mg/ml</i>	4	EX Plan Exclusion
ATROPINE SULFATE 8 MG/20ML SOLUTION	4	EX Plan Exclusion
<i>atropine sulfate inj 8 mg/20ml (0.4 mg/ml)</i>	4	EX Plan Exclusion
ATROPINE SULFATE (PF) 0.4 MG/ML SOLUTION	4	EX Plan Exclusion
ATROPINE SULFATE (PF) 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
HYOSCYAMINE SULFATE 0.125 MG/5ML ELIXIR	1	
<i>hyoscyamine sulfate elixir 0.125 mg/5ml</i>	1	
HYOSCYAMINE SULFATE 0.125 MG/ML SOLUTION	1	
<i>hyoscyamine sulfate soln 0.125 mg/ml</i>	1	
HYOSCYAMINE SULFATE 0.125 MG SL TAB	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
HYOSCYAMINE SULFATE 0.125 MG TAB	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hyoscyamine sulfate tab 0.125 mg</i>	1	
HYOSCYAMINE SULFATE 0.125 MG TAB DISP	1	
<i>hyoscyamine sulfate tab disint 0.125 mg</i>	1	
HYOSCYAMINE SULFATE 0.5 MG/ML SOLUTION	1	
HYOSCYAMINE SULFATE ER 0.375 MG TAB ER 12H	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
HYOSCYAMINE SULFATE SL 0.125 MG SL TAB	1	
HYOSYNE 0.125 MG/5ML ELIXIR	1	
HYOSYNE 0.125 MG/ML SOLUTION	1	
NULEV 0.125 MG TAB DISP	1	
OSCIMIN 0.125 MG SL TAB	1	
OSCIMIN 0.125 MG TAB	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
<i>hyoscyamine sulfate sl tab 0.125 mg</i>	1	
<i>hyoscyamine sulfate tab er 12hr 0.375 mg</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine tab 200 mg</i>	1	
<i>cimetidine tab 300 mg</i>	1	
<i>cimetidine tab 400 mg</i>	1	
<i>cimetidine tab 800 mg</i>	1	
CIMETIDINE HCL 300 MG/5ML SOLUTION	1	
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>cimetidine hcl soln 300 mg/5ml</i>	1	
<i>famotidine inj 200 mg/20ml</i>	4	EX Plan Exclusion
<i>famotidine tab 20 mg</i>	1	
<i>famotidine inj 40 mg/4ml</i>	4	EX Plan Exclusion
<i>famotidine for susp 40 mg/5ml</i>	1	
<i>famotidine tab 40 mg</i>	1	
<i>famotidine preservative free inj 20 mg/2ml</i>	4	EX Plan Exclusion
FAMOTIDINE PREMIXED 20-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nizatidine cap 150 mg</i>	1	
NIZATIDINE 15 MG/ML SOLUTION	1	
NIZATIDINE 300 MG CAP	1	
MISC. ANTI-ULCER		
<i>sucralfate susp 1 gm/10ml</i>	1	
<i>sucralfate tab 1 gm</i>	1	
PPI - POTASSIUM-COMPETITIVE ACID BLOCKERS (P-CAB)		
VOQUEZNA 10 MG TAB	2	PA
VOQUEZNA 20 MG TAB	2	PA
PROTON PUMP INHIBITOR-ANTACID COMBINATIONS		
<i>omeprazole-sodium bicarbonate cap 20-1100 mg</i>	1	
<i>omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg</i>	1	
<i>omeprazole-sodium bicarbonate cap 40-1100 mg</i>	1	
<i>omeprazole-sodium bicarbonate powd pack for susp 40-1680 mg</i>	1	
PROTON PUMP INHIBITORS		
<i>dexlansoprazole cap delayed release 30 mg</i>	1	
<i>dexlansoprazole cap delayed release 60 mg</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 10 mg</i>	1	
<i>esomeprazole magnesium cap delayed release 20 mg (base eq)</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 20 mg</i>	1	
<i>esomeprazole magnesium for delayed release susp pack 2.5 mg</i>	1	
<i>esomeprazole magnesium cap delayed release 40 mg (base eq)</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 40 mg</i>	1	
<i>esomeprazole magnesium for delayed release susp packet 5 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>esomeprazole sodium for intravenous soln 40 mg (base equiv)</i>	4	EX Plan Exclusion
NEXIUM I.V. 40 MG RECON SOLN	4	EX Plan Exclusion
ESOMEPRAZOLE STRONTIUM 49.3 MG CAP DR	1	
FIRST-LANSOPRAZOLE 3 MG/ML SUSPENSION	3	
<i>lansoprazole cap delayed release 15 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 15 mg</i>	1	
<i>lansoprazole cap delayed release 30 mg</i>	1	
<i>lansoprazole tab delayed release orally disintegrating 30 mg</i>	1	
FIRST-OMEPRAZOLE 2 MG/ML SUSPENSION	3	
<i>omeprazole cap delayed release 10 mg</i>	1	
<i>omeprazole cap delayed release 20 mg</i>	1	
<i>omeprazole cap delayed release 40 mg</i>	1	
OMEPRAZOLE+SYRSPEND SF ALKA 2 MG/ML SUSPENSION	3	
FIRST PANTOPRAZOLE 4 MG/ML SUSPENSION	3	
<i>pantoprazole sodium ec tab 20 mg (base equiv)</i>	1	
<i>pantoprazole sodium for delayed release susp packet 40 mg</i>	1	
PANTOPRAZOLE SODIUM 40 MG RECON SOLN	4	EX Plan Exclusion
<i>pantoprazole sodium for iv soln 40 mg (base equiv)</i>	4	EX Plan Exclusion
<i>pantoprazole sodium ec tab 40 mg (base equiv)</i>	1	
PROTONIX 40 MG RECON SOLN	4	EX Plan Exclusion
PANTOPRAZOLE SODIUM-NACL 40-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
PANTOPRAZOLE SODIUM-NACL 40-0.9 MG/50ML-% SOLUTION	4	EX Plan Exclusion
PANTOPRAZOLE SODIUM-NACL 80-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion
RABEPRAZOLE SODIUM 10 MG CAP SPRINK	1	
<i>rabeprazole sodium ec tab 20 mg</i>	1	
QUATERNARY ANTICHOLINERGICS		
CUVPOSA 1 MG/5ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DARTISLA ODT 1.7 MG TAB DISP	3	
<i>glycopyrrolate inj 0.2 mg/ml</i>	4	EX Plan Exclusion
<i>glycopyrrolate inj 0.4 mg/2ml (0.2 mg/ml)</i>	4	EX Plan Exclusion
GLYCOPYRROLATE 0.6 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
GLYCOPYRROLATE 1.5 MG TAB	1	
GLYCOPYRROLATE 1 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>glycopyrrolate inj 1 mg/5ml (0.2 mg/ml)</i>	4	EX Plan Exclusion
<i>glycopyrrolate oral soln 1 mg/5ml</i>	4	EX Plan Exclusion
<i>glycopyrrolate oral soln 1 mg/5ml</i>	1	
<i>glycopyrrolate tab 1 mg</i>	1	
<i>glycopyrrolate tab 2 mg</i>	1	
<i>glycopyrrolate inj 4 mg/20ml (0.2 mg/ml)</i>	4	EX Plan Exclusion
<i>glycopyrrolate inj pf soln prefilled syringe 0.2 mg/ml</i>	4	EX Plan Exclusion
<i>glycopyrrolate inj pf soln pref syr 0.4 mg/2ml (0.2 mg/ml)</i>	4	EX Plan Exclusion
GLYCOPYRROLATE (PF) 0.6 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
GLYCOPYRROLATE PF 0.6 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
<i>glycopyrrolate inj pf soln pref syr 0.4 mg/2ml (0.2 mg/ml)</i>	4	EX Plan Exclusion
GLYRX-PF 0.2 MG/ML SOLUTION	4	EX Plan Exclusion
GLYRX-PF 0.4 MG/2ML SOLUTION	4	EX Plan Exclusion
GLYRX-PF 0.6 MG/3ML SOLN PRSYR	4	EX Plan Exclusion
GLYRX-PF 1 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>methscopolamine bromide tab 2.5 mg</i>	1	
<i>methscopolamine bromide tab 5 mg</i>	1	
ULCER ANTI-INFECTIVE W/ BISMUTH COMBINATIONS		
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	
<i>bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg</i>	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ULCER ANTI-INFECTIVE W/ PROTON PUMP INHIBITORS		
<i>amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg</i>	2	PA
AMOXICILL-CLARITHRO-LANSOPRAZ 500 & 500 & 30 MG THER PACK	2	PA
TALICIA 250-12.5-10 MG CAP DR	2	PA
ULCER ANTI-INFECTIVE-PCAB COMBINATIONS		
VOQUEZNA TRIPLE PAK 500-500-20 MG THER PACK	3	PA
VOQUEZNA DUAL PAK 500-20 MG THER PACK	3	PA
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 100 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
<i>misoprostol tab 200 mcg</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINIC (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide tab er 24hr 15 mg (base equiv)</i>	2	PA
<i>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)</i>	2	PA
<i>fesoterodine fumarate tab er 24hr 4 mg</i>	1	
<i>fesoterodine fumarate tab er 24hr 8 mg</i>	1	
OXYBUTYNIN CHLORIDE 2.5 MG TAB	1	
<i>oxybutynin chloride solution 5 mg/5ml</i>	1	
<i>oxybutynin chloride solution 5 mg/5ml</i>	1	
<i>oxybutynin chloride solution 5 mg/5ml</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 10 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 15 mg</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>oxybutynin chloride tab er 24hr 5 mg</i>	1	
<i>solifenacin succinate tab 10 mg</i>	1	
<i>solifenacin succinate tab 5 mg</i>	1	
VESICARE LS 5 MG/5ML SUSPENSION	3	
<i>tolterodine tartrate tab 1 mg</i>	1	
<i>tolterodine tartrate tab 2 mg</i>	1	
<i>tolterodine tartrate cap er 24hr 2 mg</i>	2	PA
<i>tolterodine tartrate cap er 24hr 4 mg</i>	2	PA
<i>tropium chloride tab 20 mg</i>	1	
<i>tropium chloride cap er 24hr 60 mg</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
<i>mirabegron tab er 24 hr 25 mg</i>	1	
<i>mirabegron tab er 24 hr 50 mg</i>	1	
MYRBETRIQ 8 MG/ML SRER	3	PA
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride tab 10 mg</i>	1	
<i>bethanechol chloride tab 25 mg</i>	1	
<i>bethanechol chloride tab 50 mg</i>	1	
<i>bethanechol chloride tab 5 mg</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl tab 100 mg</i>	1	
VACCINES		
BACTERIAL VACCINES		
BIOTHRAX SUSPENSION	4	EX Plan Exclusion
BCG VACCINE 50 MG RECON SOLN	4	EX Plan Exclusion
VAXCHORA RECON SUSP	4	EX Plan Exclusion
ACTHIB RECON SOLN	2	
HIBERIX 10 MCG RECON SOLN	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEDVAX HIB 7.5 MCG/0.5ML SUSPENSION	2	
PENMENVY RECON SUSP	2	
PENBRAYA RECON SUSP	2	
MENVEO RECON SOLN	2	
MENVEO SOLUTION	2	
MENACTRA SOLUTION	2	
MENQUADFI SOLUTION	2	
TRUMENBA SUSP PRSYR	2	
BEXSERO SUSP PRSYR	2	
PREVNAR 13 SUSPENSION	2	
VAXNEUVANCE 0.5 ML SUSP PRSYR	2	
PREVNAR 20 0.5 ML SUSP PRSYR	2	
CAPVAXIVE 0.5 ML SOLN PRSYR	2	
PNEUMOVAX 23 25 MCG/0.5ML SOLN PRSYR	2	
PNEUMOVAX 23 25 MCG/0.5ML SOLUTION	2	
VIVOTIF CAP DR	4	EX Plan Exclusion
TYPHIM VI 25 MCG/0.5ML SOLN PRSYR	4	EX Plan Exclusion
TYPHIM VI 25 MCG/0.5ML SOLUTION	4	EX Plan Exclusion
VIRAL VACCINE COMBINATIONS		
TWINRIX 720-20 ELU-MCG/ML SUSP PRSYR	2	
PROQUAD RECON SUSP	2	
M-M-R II RECON SOLN	2	
PRIORIX RECON SUSP	2	
VIRAL VACCINES		
IXCHIQ RECON SOLN	4	EX Plan Exclusion
VIMKUNYA 40 MCG/0.8ML SUSP PRSYR	4	EX Plan Exclusion
MODERNA COVID-19 BIVAL 6M-5Y 10 MCG/0.2ML SUSPENSION	2	
MODERNA COVID-19 BIVAL BOOSTER 50 MCG/0.5ML SUSPENSION	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MODERNA COVID-19 BIVALENT 50 MCG/0.5ML SUSPENSION	2	
PFIZER COVID-19 BIVAL 6MO-4YR 3 MCG/0.2ML SUSPENSION	2	
PFIZER COVID-19 VAC BIVAL 5-11 10 MCG/0.2ML SUSPENSION	2	
PFIZER COVID-19 VAC BIVALENT 30 MCG/0.3ML SUSPENSION	2	
ASTRAZENECA COVID-19 VACCINE 0.5 ML SUSPENSION	2	
JANSSEN COVID-19 VACCINE 0.5 ML SUSPENSION	2	
COMIRNATY 30 MCG/0.3ML SUSPENSION	2	
COMIRNATY 30 MCG/0.3ML SUSP PRSYR	2	
COMIRNATY 5-11 YEARS 10 MCG/0.3ML SUSPENSION	2	
MNEXSPIKE 10 MCG/0.2ML SUSP PRSYR	2	
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSPENSION	2	
MODERNA COVID-19 VAC 6M-11Y 25 MCG/0.25ML SUSP PRSYR	2	
MODERNA COVID-19 VAC (BOOSTER) 50 MCG/0.5ML SUSPENSION	2	
MODERNA COVID-19 VACC 6-11Y 50 MCG/0.5ML SUSPENSION	2	
MODERNA COVID-19 VACC 6M-5Y 25 MCG/0.25ML SUSPENSION	2	
MODERNA COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	2	
PFIZER-BIONT COVID-19 VAC-TRIS 30 MCG/0.3ML SUSPENSION	2	
PFIZER-BIONTECH COVID-19 VACC 30 MCG/0.3ML SUSPENSION	2	
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.2ML SUSPENSION	2	
PFIZER COVID-19 VAC-TRIS 5-11Y 10 MCG/0.3ML SUSPENSION	2	
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.2ML SUSPENSION	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PFIZER COVID-19 VAC-TRIS 6M-4Y 3 MCG/0.3ML SUSPENSION	2	
SPIKEVAX 50 MCG/0.5ML SUSPENSION	2	
SPIKEVAX 50 MCG/0.5ML SUSP PRSYR	2	
SPIKEVAX COVID-19 VACCINE 100 MCG/0.5ML SUSPENSION	2	
SANOFI COVID-19 VAC (BOOSTER) 5 MCG/0.5ML EMULSION	2	
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSPENSION	2	
NOVAVAX COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	2	
NUVAXOVID COVID-19 VACCINE 5 MCG/0.5ML SUSP PRSYR	2	
DENGVAXIA RECON SUSP	4	EX Plan Exclusion
ERVEBO SUSPENSION	4	EX Plan Exclusion
HAVRIX 1440 EL U/ML SUSPENSION	2	
HAVRIX 720 EL U/0.5ML SUSPENSION	2	
HAVRIX 720 EL U/0.5ML SUSP PRSYR	2	
VAQTA 25 UNIT/0.5ML SUSPENSION	2	
VAQTA 50 UNIT/ML SUSPENSION	2	
PREHEVBRIO 10 MCG/ML SUSPENSION	2	
ENGERIX-B 10 MCG/0.5ML SUSP PRSYR	2	
ENGERIX-B 20 MCG/ML SUSPENSION	2	
ENGERIX-B 20 MCG/ML SUSP PRSYR	2	
RECOMBIVAX HB 10 MCG/ML SUSPENSION	2	
RECOMBIVAX HB 10 MCG/ML SUSP PRSYR	2	
RECOMBIVAX HB 40 MCG/ML SUSPENSION	2	
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION	2	
RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR	2	
HEPLISAV-B 20 MCG/0.5ML SOLN PRSYR	2	
GARDASIL 9 SUSPENSION	2	
GARDASIL 9 SUSP PRSYR	2	
AUDENZ 0.5 ML PRSYR	3	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUDENZ EMULSION	3	
FLUMIST LIQUID	3	
FLUBLOK 0.5 ML SOLN PRSYR	3	
AFLURIA SUSPENSION	2	
FLUZONE SUSPENSION	2	
FLUZONE HIGH-DOSE 0.5 ML SUSP PRSYR	2	
AFLURIA PRESERVATIVE FREE 0.5 ML SUSP PRSYR	2	
FLUARIX 0.5 ML SUSP PRSYR	2	
FLULAVAL 0.5 ML SUSP PRSYR	2	
FLUZONE 0.5 ML SUSP PRSYR	2	
FLUCELVAX 0.5 ML SUSP PRSYR	2	
FLUCELVAX SUSPENSION	2	
FLUAD 0.5 ML SUSP PRSYR	2	
IXIARO SUSPENSION	4	EX Plan Exclusion
IPOL INJECTABLE	2	
RABAVERT RECON SUSP	4	EX Plan Exclusion
IMOVAX RABIES 2.5 UNIT/ML RECON SUSP	4	EX Plan Exclusion
IMOVAX RABIES 2.5 UNIT/ML RECON SUSP	4	EX Plan Exclusion
ROTARIX RECON SUSP	2	
ROTARIX SUSPENSION	2	
ROTATEQ SOLUTION	2	
MRESVIA 50 MCG/0.5ML SUSP PRSYR	3	
AREXVY 120 MCG/0.5ML RECON SUSP	3	
ABRYSVO 120 MCG/0.5ML RECON SOLN	3	
JYNNEOS 0.5 ML SUSPENSION	4	EX Plan Exclusion
ACAM2000 RECON SOLN	4	EX Plan Exclusion
ACAM2000 RECON SOLN	3	
TICOVAC 1.2 MCG/0.25ML SUSP PRSYR	4	EX Plan Exclusion
TICOVAC 2.4 MCG/0.5ML SUSP PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VARIVAX 1350 PFU/0.5ML RECON SUSP	2	
STAMARIL RECON SUSP	4	EX Plan Exclusion
YF-VAX INJECTABLE	4	EX Plan Exclusion
SHINGRIX 50 MCG/0.5ML RECON SUSP	2	
VAGINAL AND RELATED PRODUCTS		
IMIDAZOLE-RELATED ANTIFUNGALS		
GYNAZOLE-1 2 % CREAM	3	
MICONAZOLE 3 200 MG SUPPOS	1	
<i>terconazole vaginal cream 0.4%</i>	1	
<i>terconazole vaginal cream 0.8%</i>	1	
<i>terconazole vaginal suppos 80 mg</i>	1	
MISCELLANEOUS VAGINAL COMBINATIONS		
TRIMO-SAN 0.025-0.01 % GEL	3	
MISCELLANEOUS VAGINAL PRODUCTS		
INTRAROSA 6.5 MG INSERT	2	
VAGINAL ANTI-INFECTIVES		
CLINDESSE 2 % CREAM	2	
CLEOCIN 2 % CREAM	3	
<i>clindamycin phosphate vaginal cream 2%</i>	1	
XACIATO 2 % GEL	3	
<i>metronidazole vaginal gel 0.75%</i>	1	
<i>metronidazole vaginal gel 0.75%</i>	1	
VANAZOLE 0.75 % GEL	3	
VAGINAL CONTRACEPTIVE PH MODULATOR - COMBINATIONS		
PHEXXI 1.8-1-0.4 % GEL	2	
VAGINAL ESTROGENS		
FEMRING 0.05 MG/24HR RING	2	
FEMRING 0.1 MG/24HR RING	2	
<i>estradiol vaginal cream 0.01%</i>	1	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>estradiol vaginal cream 0.1 mg/gm</i>	1	
<i>estradiol vaginal tab 10 mcg</i>	1	
IMVEXXY MAINTENANCE PACK 10 MCG INSERT	2	
IMVEXXY MAINTENANCE PACK 4 MCG INSERT	2	
IMVEXXY STARTER PACK 10 MCG INSERT	2	
IMVEXXY STARTER PACK 4 MCG INSERT	2	
VAGIFEM 10 MCG TAB	2	
<i>estradiol vaginal tab 10 mcg</i>	1	
PREMARIN 0.625 MG/GM CREAM	2	
VAGINAL PROGESTINS		
ENDOMETRIN 100 MG INSERT	2	
FIRST-PROGESTERONE VGS 100 MG SUPPOS	3	
FIRST-PROGESTERONE VGS 200 MG SUPPOS	3	
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
AUVI-Q 0.1 MG/0.1ML SOLN A-INJ	2	
EPINEPHRINE 0.15 MG/0.15ML SOLN A-INJ	1	
<i>epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)</i>	1	
EPINEPHRINE 0.3 MG/0.3ML SOLN A-INJ	1	
<i>epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)</i>	1	
EPINEPHRINE 0.3 MG/0.3ML SOLN PRSYR	1	
<i>epinephrine inj 1 mg/ml (1:1000)</i>	1	
<i>epinephrine inj 30 mg/30ml (1 mg/ml) (1:1000)</i>	1	
EPINEPHRINE PROFESSIONAL 1 MG/ML KIT	3	
EPINEPHRINESNAP 1 MG/ML KIT	3	
EPINEPHRINESNAP-EMS 1 MG/ML KIT	3	
EPINEPHRINESNAP-V 1 MG/ML KIT	3	
EPISNAP 1 MG/ML KIT	3	
SYMJEPI 0.15 MG/0.3ML SOLN PRSYR	2	
SYMJEPI 0.3 MG/0.3ML SOLN PRSYR	2	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa cap 100 mg</i>	1	PA S
<i>droxidopa cap 200 mg</i>	1	PA S
<i>droxidopa cap 300 mg</i>	1	PA S
GIAPREZA 0.5 MG/ML SOLUTION	4	EX Plan Exclusion
GIAPREZA 2.5 MG/ML SOLUTION	4	EX Plan Exclusion
REZIPRES 23.5 MG/5ML SOLUTION	4	EX Plan Exclusion
REZIPRES 47 MG/10ML SOLUTION	4	EX Plan Exclusion
AKOVAZ 25 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
AKOVAZ 50 MG/ML SOLUTION	4	EX Plan Exclusion
EMERPHED 25 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
EMERPHED 50 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
EMERPHED 5 MG/ML SOLUTION	4	EX Plan Exclusion
EPHEDRINE SULFATE 50 MG/ML SOLUTION	4	EX Plan Exclusion
<i>ephedrine sulfate iv soln 50 mg/ml</i>	4	EX Plan Exclusion
<i>ephedrine sulfate prefilled syringe 25 mg/5ml (5 mg/ml)</i>	4	EX Plan Exclusion
EPHEDRINE SULFATE (PRESSORS) 25 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE (PRESSORS) 50 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE (PRESSORS) 50 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
<i>ephedrine sulfate iv soln 50 mg/ml</i>	4	EX Plan Exclusion
EPHEDRINE SULFATE (PRESSORS) 50 MG/ML SOLUTION	4	EX Plan Exclusion
EPHEDRINE SULFATE (PRESSORS) 5 MG/ML SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPHEDRINE SULFATE-NAACL 100-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE-NAACL 10-0.9 MG/ML-% SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE-NAACL 15-0.9 MG/3ML-% SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE-NAACL 25-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE-NAACL 50-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
EPHEDRINE SULFATE-NAACL 50-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE 0.1 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE 0.2 MG/0.2ML SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE 10 MG/10ML SOLUTION	4	EX Plan Exclusion
EPINEPHRINE 1 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE 1 MG/10ML SOLUTION	4	EX Plan Exclusion
EPINEPHRINE 1 MG/ML SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>epinephrine inj 1 mg/ml</i>	4	EX Plan Exclusion
EPINEPHRINE PF 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>epinephrine pf inj 1 mg/ml</i>	4	EX Plan Exclusion
EPINEPHRINE BITARTRATE-NAACL 100-0.9 MCG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE BITARTRATE-NAACL 16-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-DEXTROSE 100-5 MCG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE-DEXTROSE 2-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-DEXTROSE 5-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE HCL-DEXTROSE 4-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
EPINEPHRINE HCL-NACL 4-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE HCL-NACL 8-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
ADRENALIN 5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
ADRENALIN 8-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
ADRENALIN-NACL 4-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-NACL 1-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
EPINEPHRINE-NACL 2-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-NACL 4-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-NACL 5-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
EPINEPHRINE-NACL 8-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
<i>midodrine hcl tab 10 mg</i>	1	
<i>midodrine hcl tab 2.5 mg</i>	1	
<i>midodrine hcl tab 5 mg</i>	1	
LEVOPHED 1 MG/ML SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE BITARTRATE 1 MG/ML SOLUTION	4	EX Plan Exclusion
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	4	EX Plan Exclusion
<i>norepinephrine bitartrate iv soln 1 mg/ml (base equivalent)</i>	4	EX Plan Exclusion
NOREPINEPHRINE BITARTRATE 2 MG/ML SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-DEXTROSE 16-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-DEXTROSE 4-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-DEXTROSE 8-5 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-DEXTROSE 8-5 MG/500ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-SODIUM CHLORIDE 16-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-SODIUM CHLORIDE 32-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NOREPINEPHRINE-SODIUM CHLORIDE 4-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-SODIUM CHLORIDE 8-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
NOREPINEPHRINE-SODIUM CHLORIDE 8-0.9 MG/500ML-% SOLUTION	4	EX Plan Exclusion
BIORPHEN 0.5 MG/5ML SOLUTION	4	EX Plan Exclusion
IMMPHENTIV 0.5 MG/5ML SOLUTION	4	EX Plan Exclusion
IMMPHENTIV 1 MG/10ML SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL 0.4 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL 0.8 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL 10 MG/ML SOLUTION	4	EX Plan Exclusion
<i>phenylephrine hcl iv soln 10 mg/ml</i>	4	EX Plan Exclusion
PHENYLEPHRINE HCL 1 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL 1 MG/10ML SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 0.4 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 0.4 MG/10ML SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 0.5 MG/5ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 0.8 MG/10ML SOLUTION	4	EX Plan Exclusion
<i>phenylephrine hcl iv soln 10 mg/ml</i>	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 10 MG/ML SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 1 MG/10ML SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL (PRESSORS) 5 MG/50ML SOLN PRSYR	4	EX Plan Exclusion
VAZCULEP 10 MG/ML SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 0.4-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENYLEPHRINE HCL-NACL 0.4-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 0.5-0.9 MG/5ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 0.8-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 100-0.9 MCG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 100-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 10-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 1-0.9 MG/10ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 200-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 20-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 20-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 25-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 40-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 50-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 5-0.9 MG/50ML-% SOLN PRSYR	4	EX Plan Exclusion
PHENYLEPHRINE HCL-NACL 80-0.9 MG/250ML-% SOLUTION	4	EX Plan Exclusion
VITAMINS		
VITAMIN B-1		
<i>thiamine hcl inj 100 mg/ml</i>	4	EX Plan Exclusion
<i>thiamine hcl inj 100 mg/ml</i>	4	EX Plan Exclusion
<i>thiamine hcl inj 100 mg/ml</i>	1	
THIAMINE HCL-NACL 500-0.9 MG/100ML-% SOLUTION	4	EX Plan Exclusion

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VITAMIN C		
ASCOR 25000 MG/50ML SOLUTION	4	EX Plan Exclusion
ASCORBIC ACID 15000 MG/30ML SOLUTION	4	EX Plan Exclusion
<i>ascorbic acid inj 500 mg/ml</i>	1	
VITAMIN D		
DRISDOL 1.25 MG (50000 UT) CAP	4	EX Plan Exclusion
ERGOCAL 62.5 MCG (2500 UT) CAP	4	EX Plan Exclusion
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	4	EX Plan Exclusion
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	4	EX Plan Exclusion
<i>ergocalciferol cap 1.25 mg (50000 unit)</i>	4	EX Plan Exclusion
VITAMIN E		
WHEAT GERM OIL OIL	3	
VITAMIN K		
<i>phytonadione inj 10 mg/ml</i>	1	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	
<i>phytonadione tab 5 mg</i>	1	
<i>phytonadione inj 10 mg/ml</i>	1	
<i>phytonadione inj 1 mg/0.5ml (2 mg/ml)</i>	1	

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adapalene-benzoyl peroxide	278	AEROCHAMBER PLUS FLO-VU SMALL	504
ADAPTER CAP	468	AEROCHAMBER PLUS FLO-VU W/MASK	504
ADBRY	292	AEROCHAMBER PLUS FLOW VU	504
ADCETRIS	157	AEROCHAMBER W/FLOWSIGNAL	504
ADD-VANTAGE ADDAPTOR CONNECTOR	468	AEROCHAMBER Z-STAT PLUS	504
ADDYI	609	AEROCHAMBER Z-STAT PLUS CHAMBR	504
adefovir dipivoxil	226	AEROCHAMBER Z-STAT PLUS/LARGE	504
ADEMPAS	246	AEROCHAMBER Z-STAT PLUS/MEDIUM	504
ADENOCAINE	240	AEROCHAMBER Z-STAT PLUS/SMALL	504
adenosine	78	AEROCHAMBER2GO ANTI-STATIC	503
adenosine (diagnostic)	321	AEROECLIPSE EZ TWIST TUBING	498
ADHANSIA XR	10,11	AEROECLIPSE II NEBULIZER	479
ADIPEX-P	6	AEROECLIPSE II W/ELBOW ADAPTER	479
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ADLYXIN	114	AEROECLIPSE XL NEBULIZER	479
ADLYXIN STARTER PACK	114	AEROGEAR ACTION ASTHMA KIT	498
ADRENALIN	550,638	AEROTRACH PLUS	498
ADRENALIN-NACL	638	AEROVENT PLUS	504
ADREVIEW	324	AFFINITY	308
ADRIAMYCIN	180	AFLURIA	633
ADSTILADRIN	170	AFLURIA PRESERVATIVE FREE	633
ADTHYZA	620	AFSTYLA	395,396
ADUHELM	601	AGAMREE	273
ADULT MASK	498	AGGRASTAT	411
ADULT MASK LARGE	498	AGONEAZE	315
ADVAIR DISKUS	81	AIMOVIG	508
ADVAIR HFA	81	AIRAVITE	420
ADVATE	390,391	AIRS DISPOSABLE NEBULIZER	498
ADYNOVATE	394,395	AIRS PEDIATRIC AEROSOL MASK	498
ADZYNMA	386	AIRSUPRA	80
AEMCOLO	67	AJOVY	509
AEROBIKA	498	AK-FLUOR	573
AEROBIKA OPEP W/MANOMETER	498	AKEEGA	171
AEROCHAMBER HOLDING CHAMBER	503	AKLIEF	284
AEROCHAMBER MINI CHAMBER	503	AKOVAZ	636
AEROCHAMBER MV	503	AKTEN	575
AEROCHAMBER PLS FLOVU MTHPIECE	503	AKYNZEO	124
AEROCHAMBER PLUS FLO-VU	503	AKYNZEO (READY-TO-USE)	124
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ALBUKED 25	413	ALMOND (DIAGNOSTIC)	317
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ALBUMIN HUMAN	413	ALOGLIPTIN BENZOATE	109
ALBUMIN-ZLB	413	ALOGLIPTIN-METFORMIN HCL	110
ALBUMINEX	414	ALOGLIPTIN-PIOGLITAZONE	111
ALBURX	413	ALOPRIM	385
ALBUTEIN	413	ALORA	369
albuterol sulfate	83	alose tron hcl	373,374
ALBUTEROL SULFATE	83	ALPHA-LIPOIC ACID	27
ALBUTEROL SULFATE HFA	83	ALPHAMOP FOAM REPLACEMENT PADS	468
alclometasone dipropionate	292	ALPHANATE	396,397
ALCLOMETASONE DIPROPIONATE	292	ALPHANINE SD	397,398
ALCOH-GLOVE CONTOURED WIPE	445	alprazolam	76,77
ALCOH-WIPE	445	ALPRAZOLAM INTENSOL	77
ALDER	13	ALPROLIX	398,399
ALDURAZYME	357	ALREX	578
ALECENSA	154	ALTACAINE	575
alendronate sodium	341,342	ALTAFLUOR BENOX	573
ALENDRONATE SODIUM	341,342	ALTAFRIN	570
ALEVAMAX	303	ALTERNARIA ALTERNAT (DIAGNOST)	317
ALEVICYN ANTIPRURITIC	303	ALTERNARIA ALTERNATA	13
ALEVICYN ANTIPRURITIC SG	303	ALTRENO	283
ALFALFA	317	ALTRIXA OB	541
ALFENTANIL HCL	45	ALTUVIIO	389
ALFERON N	187	ALUMINUM FLIP OFF SEALS 13MM	468
alfuzosin hcl	382	ALUMINUM FLIP OFF SEALS 20MM	468
ALHEMO	408	ALUNBRIG	154,155
ALIMTA	153	ALVAIZ	425,426
ALIQOPA	201	ALVESCO	85
aliskiren fumarate	141	alvimopan	377
ALKERAN	200	ALYFTREK	613
ALKINDI SPRINKLE	268,269	ALYGLO	592,593
ALL FLOW 1000 PFT FILTER	498	ALYMSYS	206
ALL FLOW 2000 PFT FILTER	498	amantadine hcl	208
ALL FLOW 3000 PFT FILTER	498,499	AMBER GLASS BOTTLE	468
ALL FLOW 4000 PFT FILTER	499	AMBER GLASS VIALS 2ML	468
ALL FLOW 5000 PFT FILTER	499	AMBER GLASS VIALS 2ML/13MM	468
ALL FLOW 6000 PFT FILTER	499	AMBER GLASS VIALS 30ML/20MM	468
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allopurinol	385	ambrisentan	246

AMCINONIDE	292,293	amlodipine besylate-benazepril hcl	133
amcinonide	293	amlodipine besylate-olmesartan medoxomil	137
AMD FOAM DRESSING	458	amlodipine besylate-valsartan	137
AMD FOAM DRESSING TOPSHEET	458	amlodipine-valsartan-hydrochlorothiazide	136
AMELUZ	305	AMMONIA N 13	323
AMERICAN BEECH	13	AMMONUL	365
AMERICAN BEECH POLLEN	13	AMNIOCORE AMNIOTIC MEMBRANE	308
AMERICAN COCKROACH	13	AMNIOCORE HUMAN TISSUE	308
AMERICAN ELM	13	AMNIOFIX	308
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AMERICAN LOBSTER (DIAGNOSTIC)	317	AMONDYS 45	552
AMERICAN SYCAMORE	13	amoxapine	106
AMIDATE	380	AMOXICILL-CLARITHRO-LANSOPRAZ	628
AMIELLE VAGINAL TRAINER	468	amoxicillin	597
AMIGO INSULIN PUMP	463	AMOXICILLIN	597
amiloride & hydrochlorothiazide	338	amoxicillin & pot clavulanate	598
amiloride hcl	340	amoxicillin-clarithromycin w/ lansoprazole	628
AMILORIDE-HYDROCHLOROTHIAZIDE	338	AMOXICILLIN-POT CLAVULANATE	598
AMINO AC-LOW CALCIUM-HEP D10W	564	AMPHENOL-40	309
AMINO AC-LOWCALCIUM-HEP IN D5W	564	amphetamine sulfate	3
AMINO ACID	564	amphetamine-dextroamphetamine	2,3
amino acid infusion	565	AMPHOTERICIN B	126
AMINO ACID INFUSION IN D10W	565	amphotericin b liposome	126
AMINO ACID-CALCIUM-HEP IN D10W	564	ampicillin	597
AMINO ACID-CALCIUM-HEP IN D5W	564	ampicillin & sulbactam sodium	598,599
AMINO ACID-HEPARIN-D10W	564	ampicillin sodium	597
AMINOAMRMS	565	AMPICILLIN SODIUM	597
aminocaproic acid	428	AMPICILLIN-SULBACTAM SODIUM	598
AMINOPHYLLINE	87	AMTAGVI	162
AMINOPMRMS	334	AMVISC	579
AMINOPROTECT	564	AMVISC PLUS	579
AMINORELIEFRMS	565	AMYVID	323
AMINOSYN II	564,565	AMZEEQ	278
AMINOSYN-PF	565	ANA-LEX	65
AMINOSYN-PF 7%	565	anagrelide hcl	415
amiodarone hcl	80	ANALPRAM HC	65
AMIODARONE HCL IN DEXTROSE	80	ANALPRAM HC SINGLES	65
amitriptyline hcl	106	ANALPRAM-HC	65
AMLODIPINE BES+SYRSPEND SF	232	ANASCORP	584
amlodipine besylate	232	anastrozole	187
amlodipine besylate-atorvastatin calcium	238,239	ANAVIP	584

ANDEXXA	121	APONVIE	124
ANECTINE	551	APP SLIM RMS	337
ANESTHESIA S/I-40A	381	APPLE (DIAGNOSTIC)	317
ANESTHESIA S/I-40H	381	APRACLONIDINE HCL	576
ANESTHESIA S/I-40S	381	apraclonidine hcl	576
ANGEL WING BLOOD COLLECT SET	468	aprepitant	124
ANGEL WING LUER ADAPTER/HOLDER	468	APRETUDE	223
ANGEL WING TRANSFER DEVICE	468	APRISO	374
ANGEL WING TUBE HOLDER	468	APTENSIO XR	11
ANGIOMAX	91	APTIVUS	224
ANJESO	36	AQ INSULIN SYRINGE	482
ANKTIVA	185	AQUASTAT	519
ANNOVERA	262	AQUASTAT SFR	519
ANORO ELLIPTA	82	ARALAST NP	611
ANTICOAGULANT SODIUM CITRATE	90	ARANELLE	264
ANTIVENIN LATRODECTUS MACTANS	584	ARANESP (ALBUMIN FREE)	418,419
ANTIVENIN MICRURUS FULVIUS	584	ARAZLO	283
ANUCORT-HC	65	ARCALYST	33
ANUSOL-HC	65,66	AREXVY	633
ANZEMET	123	arformoterol tartrate	83
APADAZ	60	ARGATROBAN	91,92
APHEXDA	417	argatroban	91,92
APIDRA	112	ARGATROBAN IN SODIUM CHLORIDE	92
APIDRA SOLOSTAR	112	ARGYLE EXTENSION TUBE 20"	467
APLIGRAF	314	ARGYLE SARATOGA SUMP DRAIN	469
APLISOL	321	ARGYLE TRACHEOSTOMY CARE TRAY	507
APNEASTRIP	468	ARIDOL	322
APO-VARENICLINE	609	ARIKAYCE	27
APOGEE HC CATHETER 10FR/10"	445	aripiprazole	219
APOGEE HC CATHETER 10FR/6"	445	ARISTADA	219
APOGEE HC CATHETER 12FR/16"	445	ARISTADA INITIO	219
APOGEE HC CATHETER 12FR/6"	445	ARIZONA CYPRESS	13
APOGEE HC CATHETER 14FR/16"	445	armodafinil	9
APOGEE HC CATHETER 14FR/6"	445	ARMOUR THYROID	620
APOGEE HC CATHETER 16FR/16"	445	ARNUITY ELLIPTA	85
APOGEE HC CATHETER 18FR/16"	445	ARRANON	152
APOGEE HC CATHETER 8FR/10"	445	arsenic trioxide	186
APOGEE IC CATHETER 14FR/16"	445	ARTESUNATE	142
APOGEE IC CATHETER 14FR/6"	445	articaine-epinephrine	436
APOGEE PLUS INTERMITTENT CATH	445	ARTISS	427
apomorphine hydrochloride	209	ARZERRA	156

ARZOL SILVER NIT APPLICATORS	292	atracurium besylate	559
ASACOL HD	374	ATROPEN	622,623
ASCENIV	592	ATROPINE SULFATE	569,622,623
ASCLERA	533	atropine sulfate	623
ASCOR	641	atropine sulfate (ophthalmic)	569
ASCORBIC ACID	641	ATROPINE SULFATE (PF)	623
ascorbic acid	641	ATROVENT HFA . . . . .	.84
asenapine maleate	215	AUCATZYL	162
ASILNASALRMS	334	AUDENZ	632,633
ASMANEX (120 METERED DOSES) . . . . .	.86	AUGTYRO	179
ASMANEX (14 METERED DOSES) . . . . .	.86	AURA PORTANEB	479
ASMANEX (30 METERED DOSES) . . . . .	.86	AURANOFIN	33
ASMANEX (60 METERED DOSES) . . . . .	.86	AUREOBASIDIUM PULLULANS	14,318
ASMANEX (7 METERED DOSES) . . . . .	.86	AURLUMYN	243
ASMANEX HFA . . . . .	.86	AURYXIA	378
ASPARLAS	185	AUSTEDO	603
ASPEN POLLEN	14	AUSTEDO PATIENT TITRATION KIT	604
ASPERGILLUS FUMIGAT (DIAGNOST)	317	AUSTEDO XR	604
ASPERGILLUS FUMIGATUS	14,317	AUSTEDO XR PATIENT TITRATION	604
ASTAGRAF XL	528,529	AUSTRALIAN PINE	14
ASTAMED MYO	332	AUTOCLAVE AIR FILTER	469
ASTRAZENECA COVID-19 VACCINE	631	AUTOCLAVE PAPER 36" X 36"	469
ASTRINGYN	428	AUTOCLAVE PRINTER PAPER	469
ATABEX EC	539	AUTOSOFT 30 INFUSION SET	465
ATABEX OB	539	AUTOSOFT 90 INFUSION SET	465
atazanavir sulfate	223	AUTOSOFT XC INFUSION SET	465
atenolol	230	AUVELITY	101
atenolol & chlorthalidone	140	AUVI-Q	635
ATENOLOL+SYRSPEND SF	230	AVAILNEX	334
ATGAM	525	avanafil	248,249
ATIVAN	78	AVAR CLEANSER	279
ATLANTIC COD (DIAGNOSTIC)	318	AVAR LS CLEANSER	279
ATLANTIC SALMON (DIAGNOSTIC)	318	AVAR-E EMOLLIENT	279
ATLANTIC/EASTERN OYSTER(DIAGN)	318	AVAR-E LS	279
atomoxetine hcl	2	AVASTIN	206
ATOPADERM	303	AVITENE	429
ATOPICLAIR	303	AVITENE FLOUR	429
ATORVALIQ	131	AVMAPKI FAKZYNJA CO-PACK	183
atorvastatin calcium	131	AVOCADO (DIAGNOSTIC)	318
atovaquone	67	AVONEX PEN	606
atovaquone-proguanil hcl	142	AVONEX PREFILLED	606

AVOSTARTGRIP.....	469	BACLOFEN REFILL KIT-SYNCHROMED.....	545
AVSOLA.....	379	BACTERIOSTATIC WATER(BENZ ALC).....	600
AVYCAZ.....	251	BAFIERTAM.....	607
AXONA.....	332	BAHIA.....	14
AXTLE.....	153	BAL IN OIL.....	121
AXUMIN.....	325	BALCOLTRA.....	258
AYVAKIT.....	176,177	BALD CYPRESS.....	14
azacitidine.....	148	BALFAXAR.....	403
AZACTAM.....	72	balsalazide disodium.....	374
AZALGIA.....	529	BALSAM PERU-CASTOR OIL.....	316
AZASITE.....	571	BALVERSA.....	169
azathioprine.....	533	BAMLANIVIMAB.....	584
AZEDRA DOSIMETRIC.....	185	BANANA (DIAGNOSTIC).....	318
AZEDRA THERAPEUTIC.....	185	BAQSIMI ONE PACK.....	109
azelaic acid.....	305	BAQSIMI TWO PACK.....	109
azelastine hcl.....	549	BARACLUDE.....	226
azelastine hcl (ophth).....	571	BARD CLEAN-CATH.....	445
azelastine hcl-fluticasone propionate.....	549	BARD IRRIGATION SYRINGE/BULB.....	508
AZESCHEW PRENATAL/POSTNATAL.....	542	BARD PISTON ENT IRRIGATION SYR.....	452
AZESCO.....	541	BARD URETHRAL CATHETER 16".....	445
azithromycin.....	443	BARD URINARY DRAINAGE BAG.....	461
AZOPT.....	572	BARDEX I.C. FOLEY CATH 14FR.....	445
AZSTARYS.....	9	BARDIA LEG BAG.....	461
aztreonam.....	72	BARHEMSYS.....	124
B		BARIUM SULFATE.....	329,330
B & C.....	316	BARRIGEL.....	65
B-COMPLEX.....	536	BAVENCIO.....	161
b-complex vitamins.....	536	BAXDELA.....	371
b-complex w/ c & folic acid.....	537	BAYBERRY (WAX MYRTLE).....	14
B-PLEX.....	536	BCG VACCINE.....	629
B-PLEX PLUS.....	537	BD ECLIPSE NEEDLE.....	485,486
BABYBIG.....	585	BD HEPARIN POSIFLUSH.....	89
BACITRA-NEOMYCIN-POLYMYXIN-HC.....	576	BD HYDROPHILIC CATHETER 14FR.....	445
BACITRACIN.....	66,571	BD INSULIN SYRINGE U-500.....	483
bacitracin.....	66	BD LUER-LOK SYRINGE.....	489
bacitracin-poly-neomycin-hc.....	576	BD MICROTAINER LANCETS.....	461
BACITRACIN-POLYMYXIN B.....	570	BD NEXIVA 22GX1".....	496
bacitracin-polymyxin b (ophth).....	570	BD NEXIVA 24GX0.75".....	496
baclofen.....	545	BD POSIFLUSH.....	519
BACLOFEN.....	545,546	BD POSIFLUSH SAFESCRUB.....	519
		BD SAF-T-INTIMA 24G X 0.75".....	496

BD SAFETYGLIDE INSULIN SYRINGE	482	BEQVEZ	407,408
BD SAFETYGLIDE SHIELDED NEEDLE	484	BERINERT	409
BD SYRINGE LUER SLIP TIP	487	BERMUDA GRASS	14
BD SYRINGE LUER-LOK	487	BESPONSA	157
BD SYRINGE SLIP TIP	487	BESREMI	187
BD VERITOR SARS-COV-2/FLU A+B	323	BETA 1 KIT	273
BD VERITOR SYSTEM GROUP A STRP	327	BETADINE OPHTHALMIC PREP	572
BD VERITOR SYSTEM SARS-COV-2	326	betaine	353
BEAU RX	306	BETALIDO	274
BEBTELOVIMAB	584	BETALOAN SUIK	274
BECONASE AQ	550	BETAMETHASONE COMBO	273
BEEF (DIAGNOSTIC)	318	betamethasone dipropionate (topical)	293
BELBUCA	61	BETAMETHASONE DIPROPIONATE AUG	293
BELLADONNA ALKALOIDS-OPIUM	622	betamethasone dipropionate augmented	293
BELRAPZO	144	BETAMETHASONE SOD PHOS & ACET	273
BELSOMRA	434	betamethasone sod phosphate & acetate	273
benazepril & hydrochlorothiazide	135	BETAMETHASONE SODIUM PHOSPHATE	265
benazepril hcl	133	betamethasone valerate	293
BENDAMUSTINE HCL	144,145	BETAMETHASONE VALERATE	293
bendamustine hcl	144	betaxolol hcl	230
BENDEKA	145	BETAXOLOL HCL	567
BENEFIX	399	betaxolol hcl (ophth)	567
BENLYSTA	521,522	bethanechol chloride	629
BENTIVITE	425	BETHKIS	27
BENTLEY THE BEAR PED NEBULIZER	479	BETIMOL	567
BENZALKONIUM CHLORIDE	220	BEVACIZUMAB	581
BENZAMYCIN	279	bexarotene	204
BENZEPRO FOAMING CLOTHS	280	bexarotene (topical)	316
BENZHYDROCODONE-ACETAMINOPHEN	60	BEXSERO	630
BENZNIDAZOLE	66	BEYAZ	257
benzoin compound	307	BEYFORTUS	585
benzonatate	276	BHI URI-CONTROL	524
BENZONATATE	276	BI-MIX	240
BENZOYL PEROX-HYDROCORTISONE	279	bicalutamide	148
BENZOYL PEROXIDE	280,281	BICILLIN C-R	599
benzoyl peroxide	281	BICILLIN C-R 900/300	599
benzoyl peroxide-erythromycin	279	BICILLIN L-A	597
benzphetamine hcl	6	BICNU	200
benztropine mesylate	207	BIDIL	241
BEOVU	581	BIGFOOT UNITY PEN CAP/ADMELOG	462
bepotastine besilate	571	BIGFOOT UNITY PEN CAP/APIDRA	462

BIGFOOT UNITY PEN CAP/ASPART.....	462	BL-C.....	329
BIGFOOT UNITY PEN CAP/BASAGLAR.....	462	BL-CONTRAST.....	329
BIGFOOT UNITY PEN CAP/FIASP.....	462	BLACK WALNUT (DIAGNOSTIC).....	318
BIGFOOT UNITY PEN CAP/HUMALOG.....	462	BLACK WALNUT POLLEN.....	14,15
BIGFOOT UNITY PEN CAP/LANTUS.....	462	BLACK WALNUT POLLEN (1:10).....	14
BIGFOOT UNITY PEN CAP/LISPRO.....	462	BLACK WALNUT POLLEN (1:20).....	14
BIGFOOT UNITY PEN CAP/LYUMJEV.....	462	BLACK WILLOW.....	15
BIGFOOT UNITY PEN CAP/NOVOLOG.....	462	BLACK WILLOW (DIAGNOSTIC).....	318
BIGFOOT UNITY PEN CAP/TOUJEO.....	462	BLACK/SWEET BIRCH POLLEN.....	14
BIGFOOT UNITY PEN CAP/TOUJEO M.....	462	BLANCHE.....	296
BIGFOOT UNITY PEN CAP/TRESIBA.....	462	BLENREP.....	155
BIGFOOT UNITY PROGRAM.....	459	bleomycin sulfate.....	179,180
BIJUVA.....	368	BLEPHAMIDE S.O.P.....	577
BIKTARVY.....	221	BLINCYTO.....	165
bimatoprost.....	580	BLOXIVERZ.....	143
bimatoprost (topical).....	305	BLT-25.....	276
BIMATOPROST-TIMOLOL MALEATE.....	568	BLUDIGO.....	322
BINAXNOW COVID-19 AG CARD.....	326	BLUE CRAB (DIAGNOSTIC).....	318
BIO GLO.....	573	BLUESTAR.....	459
BIOCEL.....	537	BOOSTRIX.....	622
BIOFREQUENCY INSOLES.....	458	BORIC ACID.....	305
BIOGUARD GAUZE SPONGES.....	458	BORTEZOMIB.....	177
BIOGUARD ISLAND DRESSINGS.....	458	bortezomib.....	177
BIOGUARD NON-ADHERENT DRESSING.....	458	BORUZU.....	177
BIOPAR DELTA-FORTE.....	417	bosentan.....	246,247
BIORPHEN.....	639	BOSULIF.....	163
BIOTHRAX.....	629	BOTOX.....	559
BIOVANCE.....	309	BOTOX COSMETIC.....	299
BIPOLARIS SOROKIN (DIAGNOSTIC).....	318	BOTRYTIS CINEREA.....	15,318
BIPOLARIS SOROKINIANA.....	14	BOTTLE 120ML/SPRAY/CLR PLASTIC.....	469
bismuth subcitrate potassium-metronidazole- tetracycline.....	627	BOTTLE 2OZ/BLUE GLASS/DROPPER.....	469
bisoprolol & hydrochlorothiazide.....	140	BOTTLE 500ML/BOSTON ROUND/CAP.....	469
bisoprolol fumarate.....	230	BOTTLE 8OZ/BOSTON ROUND/CAP.....	469
BISOPROLOL FUMARATE.....	230	BOTTLE AMBER GLASS 33OZ.....	469
BIVALIRUDIN RTU.....	91	BOTTLE AMBER GRADUATED 16OZ.....	469
BIVALIRUDIN TRIFLUOROACETATE.....	91	BOTTLE AMBER GRADUATED 8OZ.....	469
bivalirudin trifluoroacetate.....	91	BOTTLE/WHITE 6OZ W/TWIST TOP.....	469
BIVIGAM.....	587	BOTTLETOP DISPENSER.....	469
BIZENGR (750 MG DOSE).....	176	BOTTLETOP DISPENSER ADAPTER.....	469
BKEMV.....	410	BOX ELDER.....	15
		BOX ELDER POLLEN.....	15

BP 10-1	279	BRUKINSA	167
BP VIT 3	421	BRUSELIX	529
BPCO	316	BSP 0820	273
BRAFTOVI	166	BSS	574
BRAZIL NUT (DIAGNOSTIC)	318	BSS PLUS	574
BREATHE EASE LARGE	504	BUBBLE POINT TESTER KIT/WIZARD	469
BREATHE EASE MEDIUM	504	budesonide	265
BREATHE EASE NEB MASK/CHILD	499	budesonide (inhalation)	85
BREATHE EASE NEB MASK/INFANT	499	budesonide (intrarectal)	64
BREATHE EASE SMALL	504	budesonide-formoterol fumarate dihydrate	80,81
BREATHERITE VALVED MDI CHAMBER	504	bumetanide	339
BREEZA FOR ORAL IODINATED CONT	323	BUP-LIDO	574
BREEZA NEUTRAL ABD/PELVIC IMAG	323	BUPHENYL	365
BRENZAVVY	115	BUPIVACAINE FISIOPHARMA	439
BREO ELLIPTA	81	BUPIVACAINE HCL	439,440
BREVIBLOC	230	bupivacaine hcl	439,440
BREVIBLOC IN NACL	230	BUPIVACAINE HCL-NACL	440
BREVIBLOC PREMIXED	230	bupivacaine in dextrose	440
BREVIBLOC PREMIXED DS	230	bupivacaine w/ epinephrine	436,437
BREVITAL SODIUM	382	BUPIVACAINE-EPINEPHRINE	436
BREXAFEMME	126	BUPIVILOG	275
BREYANZI	162	BUPRENEX	61
BREZTRI AEROSPHERE	81	buprenorphine	61
BRIDION	122	buprenorphine hcl	62
BRILINTA	411	buprenorphine hcl-naloxone hcl dihydrate	62
brimonidine tartrate	576	bupropion hcl	101,102
brimonidine tartrate (topical)	305	bupropion hcl (smoking deterrent)	609
brimonidine tartrate-timolol maleate	568	BUPROPION HCL ER (XL)	102
BRIMONIDINE-DORZOLAMIDE	567	buspirone hcl	75
brinzolamide	572	busulfan	145
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BRIVIACT	93	butalbital-acetaminophen	40
BRIXADI	60,61	butalbital-acetaminophen-caffeine	40
BRIXADI (WEEKLY)	61	butalbital-acetaminophen-caffeine w/ codeine	41
BROME	15	BUTALBITAL-APAP-CAFFEINE	40
bromfenac sodium (ophth)	575	butalbital-aspirin-caffeine	40
bromocriptine mesylate	208	butalbital-aspirin-caffeine w/cod	41
BROMSITE	575	butorphanol tartrate	62
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CAREPOINT SYRINGE CATHETER TIP	487	CEFAZOLIN SODIUM-DEXTROSE	252
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CAREPOINT SYRINGE LUER SLIP	487	CEFEPIME HCL	255
CARETOUCH 2 CPAP HOSE HANGER	499	cefepime hcl	255
CARETOUCH CPAP & BIPAP HOSE	499	CEFEPIME-DEXTROSE	255,256
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citalopram hydrobromide	102,103	clindamycin phosphate	71
CITALOPRAM HYDROBROMIDE	103	clindamycin phosphate (topical)	278
CITRANATAL 90 DHA	544	clindamycin phosphate in d5w	71
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CITRANATAL BLOOM	538	clindamycin phosphate-benzoyl peroxide	279
CITRANATAL BLOOM DHA	544	clindamycin phosphate-benzoyl peroxide (refrigerate)	279
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CLADOSPORIUM SPHAEROSPERMUM	16	CLINIMIX E/DEXTROSE (8/10)	564
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clarithromycin	443	CLINIMIX/DEXTROSE (5/15)	565
CLEANROOM TACKY MAT 18"X36"	469	CLINIMIX/DEXTROSE (5/20)	565
CLEAR GLASS VIAL 10ML	469	CLINIMIX/DEXTROSE (6/5)	565
CLEAR GLASS VIALS 2ML	469	CLINIMIX/DEXTROSE (8/10)	565
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CLEMASTINE FUMARATE	127,128	CLINOLIPID	566
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CLEMASZ	128	clobazam	92
CLEMSZA	128	CLOBETASOL PROPIONATE	293,577
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CLEOCIN	634	clobetasol propionate emollient base	293
CLEOCIN PHOSPHATE	71	clobetasol propionate emulsion	293
CLEVER CHOICE HOLDING CHAMBER	505	CLOCORTOLONE PIVALATE	293
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CLEVER CHOICE PULSE OXIMETER	469	clofarabine	149
CLEVER CHOICE TENS UNIT	492	CLOLAR	149
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clonazepam.....	92,93	colesevelam hcl.....	130
clonidine.....	139	colestipol hcl.....	130
clonidine hcl.....	139	colistimethate sodium.....	73
clonidine hcl (adhd).....	2	COLUMVI.....	165
clonidine hcl (analgesia).....	39,40	COLY-MYCIN M.....	73
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clopidogrel bisulfate.....	415	COMBIGAN.....	568
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CO-NATAL FA.....	540	COMPACT SPACE CHAMBER/MED MASK.....	505
COAGADEX.....	402	COMPACT SPACE CHAMBER/SM MASK.....	505
COAGUCHEK XS SYSTEM.....	445	COMPAT GASTROTUBE 14FR/5ML.....	456
COATAMAX PATCH.....	502	COMPAT GASTROTUBE 16FR/10ML.....	456
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COBAS LIAT SARS-COV-2 CONTROL.....	326	COMPAT GASTROTUBE 20FR/15ML.....	456
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CORN POLLEN.....	16	cromolyn sodium (ophth).....	571
CORN SMUT.....	16	CRYSVITA.....	367
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CORTROPHIN GEL.....	344	CUBICIN RF.....	68
CORTROSYN.....	321	CUPRIC CHLORIDE.....	520
CORVERT.....	80	cupric chloride.....	520
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COSOPT.....	568	CUVITRU.....	593
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cosyntropin.....	321	cyanocobalamin.....	417
COTELLIC.....	172	CYANOCOBALAMIN.....	417
COTTON SOCKS/CUSHIONED.....	450	CYANOKIT.....	121
COTTON THIGH-HIGH.....	450	cyclobenzaprine hcl.....	547
COVARYX.....	367	CYCLOGYL.....	569
COVARYX HS.....	367	CYCLOMYDRIL.....	568
COVERALL BOOTS/DISPOSABLE/UNIV.....	469	cyclopentolate hcl.....	569
COVERALL W/HOOD/3XL.....	469	CYCLOPHOSPHAMIDE.....	197,198,199
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COVERALL W/HOOD/XL.....	470	CYCLOSERINE.....	144
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COVERALLS ELAST BACK/WRST/ANKL.....	469	cyclosporine (ophth).....	574
COW MILK (DIAGNOSTIC).....	319	cyclosporine modified (for microemulsion).....	523,524
CRAB (DIAGNOSTIC).....	319	CYGNUS DUAL.....	309
CRENESSITY.....	344	CYKLOKAPRON.....	428
CREON.....	337	cyproheptadine hcl.....	129
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CYSTAGON	383	DARZALEX	157
CYSTARAN	580	DARZALEX FASPRO	183
CYSTO-CONRAY II	332	dasatinib	163,164
CYSTOGRAFIN	330	DATROWAY	205
CYSTOGRAFIN-DILUTE	330	DATSCAN	323
CYSVIEW	321	DAUNORUBICIN HCL	180
CYTALUX	322	daunorubicin hcl	180
CYTARABINE	149	DAURISMO	170
cytarabine	149	DAXXIFY	559
CYTOGAM	585	DAYBUE	560
CYTOMEL	619	DAYTRANA	10
CYTRA K CRYSTALS	383	DAYVIGO	434
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D-CARE GLUCOMETER	459	decitabine	149
D-XYLOSE	321	DEFENCATH	90
dabigatran etexilate mesylate	92	deferasirox	119,120
DACARBAZINE	186	deferiprone	120
dacarbazine	186	deferoxamine mesylate	121
DACOGEN	149	DEFINITY	329
dactinomycin	180	DEFINITY RT	329
dalfampridine	607	DEFITELIO	415
DALIRESP	85	deflazacort	266
DALVANCE	69	DEFLUX	385
danazol	63	DEFLUX METAL NEEDLE	485
DANDELION	16	dehydrated alcohol	250
DANTRIUM	548	DELESTROGEN	370
dantrolene sodium	548	DELFLX-LC/1.5% DEXTROSE	531
DANYELZA	158	DELFLX-LC/2.5% DEXTROSE	531
DANZITEN	164	DELFLX-LC/4.25% DEXTROSE	531
DAPAGLIFLOZIN PRO-METFORMIN ER	116	DELFLX-SM/1.5% DEXTROSE	531
DAPAGLIFLOZIN PROPANEDIOL	115	DELFLX-SM/2.5% DEXTROSE	531
dapsone	71	DELSTRIGO	221
dapsone (topical)	278	DELZICOL	374
DAPTACEL	621	demeclocycline hcl	615
DAPTOMYCIN	68	DEMSEER	136
daptomycin	68	DENGVAXIA	632
DAPTOMYCIN-SODIUM CHLORIDE	68,69	DENTA 5000 PLUS	535
darifenacin hydrobromide	628	DENTA 5000 PLUS SENSITIVE	534
DARTISLA ODT	627	DENTAGEL	535
		DENTAL NEEDLE	448,449

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DEPLIN 7.5	333	DEXAMETHASONE INTENSOL	267
DEPLIN FC	334	DEXAMETHASONE SOD PHOS +RFID	268
DEPO-ESTRADIOL	370	DEXAMETHASONE SOD PHOS-BUPIV	274
DEPO-MEDROL	269	DEXAMETHASONE SOD PHOS-NACL	268
DEPO-PROVERA	263	DEXAMETHASONE SOD PHOSPHATE PF	268
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DERMACINRX UREA	298	PHOSPHATE	267,268,577
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DERMASO PLUS	303	DEXCOM G6 RECEIVER	459
DERMELLE	306	DEXCOM G6 SENSOR	460
DERMOTIC	583	DEXCOM G6 TRANSMITTER	460
DESCOVY	221	DEXCOM G7 15 DAY SENSOR	461
DESFERAL	121	DEXCOM G7 RECEIVER	459
desflurane	382	DEXCOM G7 SENSOR	461
desipramine hcl	107	DEXERYL	303
DESLORATADINE	128	DEXIFOL	536
desloratadine	128	dexlansoprazole	625
desmopressin acetate	366	DEXLIDO	274
DESMOPRESSIN ACETATE	366	DEXLIDO-M	274
desmopressin acetate spray	366	dexmedetomidine hcl	434
DESMOPRESSIN ACETATE SPRAY	366	DEXMEDETOMIDINE HCL	434
desmopressin acetate spray refrigerated	366	DEXMEDETOMIDINE HCL IN NACL	434
desogestrel & ethinyl estradiol	256	dexmedetomidine hcl in sodium chloride	434,435
desogestrel-ethinyl estradiol (biphasic)	256	DEXMEDETOMIDINE HCL-DEXTROSE	434
desogestrel-ethinyl estradiol (triphasic)	264	dexmethylphenidate hcl	9,10
desonide	293,294	DEXONTO 0.4%	268
DESONIDE	294	DEXPANTHENOL	373
desoximetasone	294	dexrazoxane hcl	187,188
DESOXIMETASONE	294	DEXTENZA	577
DESVENLAFAXINE ER	105	DEXTER DRAGON PED COMP/NEB	499
desvenlafaxine succinate	105	dextroamphetamine sulfate	4
DETECTNET	324	DEXTROSE	566
DEX24	583	dextrose	566
DEXAMETH SOD PHOS (PF) +RFID	268	DEXTROSE 5%/ELECTROLYTE #48	513
DEXAMETH SOD PHOS-BUPIV-EPIN	274	dextrose in lactated ringers	513
dexamethasone	267	dextrose w/ sodium chloride	513
DEXAMETHASONE	267	DEXTROSE-NACL	513
DEXAMETHASONE (LA)	267	DEXTROSE-SODIUM CHLORIDE	513

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DIAL-A-DOSE SYRINGE 30ML.....	470	dihydroergotamine mesylate.....	509
DIAL-A-DOSE SYRINGE 60ML.....	470	DILAUDID.....	49
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doxorubicin hcl liposomal	181	DYURAL 80-LM	275
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DOXYCYCLINE HYCLATE	615	DYURAL-L	275
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FERRIPROX	120	flavoxate hcl	629
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ferrous fumarate w/ b12-vit c-fa-ifc	424	FLEXBUMIN	413
ferrous fumarate-fa-b complex-c-zn-mg-mn-cu	424	FLEXICHAMBER	505
ferrous fumarate-folic acid	425	FLEXICHAMBER ADULT MASK/SMALL	507
ferumoxylol	423	FLEXICHAMBER CHILD MASK/LARGE	507
fesoterodine fumarate	628	FLEXICHAMBER CHILD MASK/SMALL	507
FETROJA	256	FLOLAN	243
FETZIMA	105	FLOVENT DISKUS	86
FETZIMA TITRATION	105	FLOVENT HFA	85,86
FIBRYGA	402	FLOXURIDINE	149
fidaxomicin	444	FLUAD	633
FILSPARI	383,384	FLUARIX	633
FILTER 0.2 MICRON/25MM	471	FLUBLOK	633
FILTER 0.2 MICRON/32MM	471	FLUCAINE	573
FILTER 0.2 MICRON/47MM	471	FLUCELVAX	633
FILTER 0.22 MICRON/73MM/1000ML	471	fluconazole	126
FILTER AIR PP	500	fluconazole in nacl	127
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FILTER FLUORODYNE/0.22 MICRON	471	flucytosine	126
FILTER/MILLEX-GP/50MM/CLEAR	471	FLUDARABINE PHOSPHATE	149
FINACEA	305	fludarabine phosphate	149
FINAPID	300	FLUDEOXYGLUCOSE F 18	324
FINAPOD	300	fludrocortisone acetate	273
FINAPODTAR	300	FLULAVAL	633

flumazenil	122	FLUTICASONE PROPIONATE	295
FLUMIST	633	fluticasone propionate (nasal)	550
flunisolide (nasal)	550	FLUTICASONE PROPIONATE DISKUS	86
fluocinolone acetonide	294	FLUTICASONE PROPIONATE HFA	86
fluocinolone acetonide (otic)	583	fluticasone-salmeterol	81,82
fluocinonide	294	FLUTICASONE-SALMETEROL	81,82
fluocinonide emulsified base	294	fluvastatin sodium	131
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FLUORESCEIN SODIUM	573	FLUZONE	633
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FLUORESCEIN SODIUM/BENOXINATE	573	FLYPROGPIDTAR	300
FLUORESCEIN-BENOXINATE	573	FLYRCADO	323
FLUORESCITE	573	FML	578
FLUORIDEX	535	FML FORTE	578
FLUORIDEX DAILY RENEWAL	536	FML LIQUIFILM	578
FLUORIDEX ENHANCED WHITENING	535	FOAM RING 2"	471
FLUORIDEX SENSITIVITY RELIEF	534	FOCALIN	10
FLUORIMAX 5000	535	FOCALIN XR	10
FLUORIMAX 5000 SENSITIVE	534	FOCINVEZ	125
FLUORODOPA F 18	323	FOIL WRAPPER 3" X 3"	471
fluorometholone (ophth)	578	FOLBIC RF	333
fluorouracil	149,150	FOLEY CATHETER 2-WAY	447
FLUOROURACIL	287	FOLI-D	420
fluorouracil (topical)	287	folic acid	421
fluoxetine hcl	103	folic acid-vitamin b6-vitamin b12	421
FLUOXETINE HCL	103	FOLITE	421
FLUOXETINE HCL (PMDD)	608	FOLIVANE-F	425
fluphenazine decanoate	218	FOLIVANE-OB	542
fluphenazine hcl	218	FOLIVANE-PLUS	424
FLUPHENAZINE HCL	218	FOLLISTIM AQ	359
FLURA-SAFE	573	FOLOTYN	154
FLURANDRENOLIDE	294,295	FOLPLEX 2.2	421
flurandrenolide	294,295	FOLTANX	334
FLURAZEPAM HCL	431	FOLTANX RF	333
FLURBIPROFEN	35	FOLTRATE	417
flurbiprofen	35	FOLTRIN	424
FLURBIPROFEN SODIUM	575	FOLTX	334
FLUTAMIDE	148	FOLVITE-D	420
FLUTICASONE FUROATE-VILANTEROL	81	fomepizole	121
fluticasone propionate	295	fondaparinux sodium	91

FORANE	382	FUSION PLUS	424
formoterol fumarate	83	FUZEON	222
FORTAZ	254	FYARRO	174
fosamprenavir calcium	223	FYCOMPA	92
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fosaprepitant dimeglumine	125		
foscarnet sodium	225	G	
FOSCAVIR	225	gabapentin	94,95
fosfomycin tromethamine	73	gabapentin (once-daily)	608
fosinopril sodium	134	GABLOFEN	545,546
fosinopril sodium & hydrochlorothiazide	135	GADAVIST	328
fosphenytoin sodium	100	gadobutrol	328
FOSTEUM	333	gadoterate meglumine	328,329
FOSTEUM PLUS	332	gadoteridol	329
FOTIVDA	176	GALAFOLD	345
FRAGMIN	90,91	galantamine hydrobromide	602,603
FRAICHE 5000 DENTAL	535	GALANTAMINE HYDROBROMIDE	602,603
FRAICHE 5000 PREVI	534	GALAXTRA	334
FRAICHE 5000 SENSITIVE	534	GALLIUM CITRATE GA 67	325
FREAMINE III	565	GALLIUM GA 68 PSMA-11	325
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FREESTYLE LIBRE 14 DAY SENSOR	461	GAMIFANT	530
FREESTYLE LIBRE 2 PLUS SENSOR	461	GAMMACORE	492
FREESTYLE LIBRE 2 READER	460	GAMMACORE SAPPHIRE	492
FREESTYLE LIBRE 2 SENSOR	460	GAMMACORE SAPPHIRE 31-DAY	492
FREESTYLE LIBRE 3 PLUS SENSOR	461	GAMMACORE SAPPHIRE D	492
FREESTYLE LIBRE 3 READER	460	GAMMACORE SAPPHIRE REFILL KIT	492
FREESTYLE LIBRE 3 SENSOR	461	GAMMAGARD	590,591
FREESTYLE LIBRE READER	460	GAMMAGARD S/D LESS IGA	588
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FRINDOVYX	199	GAMMAPLEX	588,589
frovatriptan succinate	510	GAMUNEX-C	591,592
FRUZAQLA	206	GANCICLOVIR	225
FUL-GLO	573	GANCICLOVIR SODIUM	225
FULL KIT NEBULIZER SET	500	ganciclovir sodium	225
FULPHILA	422	ganirelix acetate	346
FULVESTRANT	189	GANIRELIX ACETATE	346
fulvestrant	189	GARDASIL 9	632
FUROSEMIDE	339	GASTROGRAFIN	330
furosemide	339	gatifloxacin (ophth)	571
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GAVRETO.....	178	GLASS SERUM BOTTLES 20ML.....	472
GAZYVA.....	156	GLASS SERUM BOTTLES 2ML.....	472
gefitinib.....	168	GLASS SERUM BOTTLES 30ML.....	472
GEL-FLOW.....	427	GLASS SERUM BOTTLES 5ML.....	472
GEL-FLOW NT.....	428	GLASS VIAL 2ML.....	472
GEL-ONE.....	548	GLASS VIAL AMBER 3ML.....	472
GELCLAIR.....	536	GLASSIA.....	611
GELFILM.....	428,579	glatiramer acetate.....	605
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GELFOAM COMPRESSED SIZE 100.....	428	GLEOSTINE.....	200,201
GELFOAM DENTAL PACK SIZE 4.....	428	GLIADEL WAFER.....	200
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GELFOAM SPONGE SIZE 100.....	429	GLIMEPIRIDE.....	117
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gemfibrozil.....	130	glucagon.....	109
GENADUR.....	303	glucagon (rdna).....	109
GENERESS FE.....	260	GLUCAGON EMERGENCY.....	109
GENICIN VITA-D.....	420	GLUCAGON HCL (DIAGNOSTIC).....	321
GENOTROPIN.....	349	GLUCOPRO SYR RES 3ML 22GX3/8".....	465
GENOTROPIN MINIQUICK.....	349,350	GLUCOSE (DEXTROSE).....	566
GENTAK.....	571	glutamine (sickle cell).....	417
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gentamicin sulfate.....	27	glyburide.....	118
gentamicin sulfate (ophth).....	571	GLYBURIDE MICRONIZED.....	118
gentamicin sulfate (topical).....	285	glyburide-metformin.....	117
GENVOYA.....	221	glycine diluent.....	600
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GIAPREZA.....	636	glycopyrrolate.....	627
GILENYA.....	609	GLYCOPYRROLATE.....	627
GILOTRIF.....	168	GLYCOPYRROLATE (PF).....	627
GLASS BOTTLE 15ML.....	471	GLYCOPYRROLATE PF.....	627
GLASS BOTTLE 30ML.....	471	GLYRX-PF.....	627
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GLASS BOTTLE 30ML/PHENOLIC CAP.....	472	GLYTACTIN BETTERMILK 15.....	335

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HAZELNUT (FILBERT)(DIAGNOSTIC)	319	HERZUMA	159
HCU EASY	335	HESMILLA	300
HCU EXPRESS 15 PLUS+	335	HESPAN	412
HCU EXPRESS 20 PLUS+	335	HETASTARCH-NACL	412
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HEALON DUET PRO	579	HEXATRIONE	273
HEALON GV PRO	579	HEXTEND	412
HEALON PRO	579	HIBERIX	629
HEALON5 PRO	579	HISTATROL	321,322
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HEMABATE	583	HOLIXIA	300
HEMANGEOL	231	HOLIZAR	300
HEMATINIC PLUS VIT/MINERALS	424	HOMACTIN AA PLUS	335
HEMATINIC/FOLIC ACID	425	HOMATROPAIRE	569
HEMATOGEN FA	424	HOME PAP KIT	326
HEMATRON-AF (WITH DOCUSATE)	425	HONEY BEE VENOM PROTEIN	17
HEMGENIX	403,404,405,406,407	HONISTA	300
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HEMTARA HP	299	HPR PLUS HYDROGEL	303
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HENTIS HP	300	HUMALOG	112
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heparin (porcine) in sodium chloride	88,89	HUMALOG MIX 50/50	113
HEPARIN NA (PORK) LOCK FLSH PF	90	HUMALOG MIX 50/50 KWIKPEN	113
HEPARIN SOD (PORCINE) IN D5W	90	HUMALOG MIX 75/25	113
HEPARIN SOD (PORK) LOCK FLUSH	90	HUMALOG MIX 75/25 KWIKPEN	113
heparin sodium (porcine)	89	HUMAN ALBUMIN GRIFOLS	413
HEPARIN SODIUM (PORCINE)	89	HUMATE-P	397
HEPARIN SODIUM (PORCINE) PF	89	HUMATROPE	350
HEPLISAV-B	632	HUMULIN R U-500 (CONCENTRATED)	113
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HEPZATO W/62MM CATHETER	200	HYCAMTIN	204
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HYDROCODONE BITARTRATE ER	49	HYMPAVZI	409
hydrocodone bitartrate-homatropine methylbromide	276	hyoscyamine sulfate	623,624
hydrocodone polistirex-chlorpheniramine polistirex .	277	HYOSCYAMINE SULFATE	623,624
hydrocodone-acetaminophen	44	HYOSCYAMINE SULFATE ER	624
HYDROCODONE-ACETAMINOPHEN	44	HYOSCYAMINE SULFATE SL	624
HYDROCODONE-IBUPROFEN	44	HYOSYNE	624
hydrocodone-ibuprofen	44	HYPERHEP B	585,586
HYDROCORT-PRAMOXINE (PERIANAL)	65	HYPERLYTE-CR	515
hydrocortisone	269	HYPERRAB	594
HYDROCORTISONE	295	HYPERRHO S/D	594
hydrocortisone (intrarectal)	64	HYPERSAL	277
HYDROCORTISONE (PERIANAL)	66	HYPERTET	595
hydrocortisone (rectal)	66	HYQVIA	596
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HYDROCORTISONE BUTYRATE	295	IBRANCE	188,189
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hydrocortisone butyrate hydrophilic lipo base	295	ibuprofen	35,36
hydrocortisone sod succinate	269	IBUPROFEN	36
hydrocortisone valerate	295,296	ibuprofen lysine	36
hydrocortisone w/acetic acid	583	ibuprofen-famotidine	34
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HYDROMORPHONE HCL PF	50	icatibant acetate	409
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IFEX.....	199	IN-CHECK INSPIRATORY FLOW MTR.....	500
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KANGAROO BALLOON 20FR/2.3CM	495
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KANGAROO BALLOON 24FR/1.7CM	455	KANGAROO GRAVITY FEEDING SET	456
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KANGAROO BALLOON 24FR/2.3CM	455	KANGAROO IRRIGATION SYRINGE	508
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KANGAROO BALLOON 24FR/2.7CM	455	KANGAROO JOEY ENTERAL PUMP	454
KANGAROO BALLOON 24FR/2CM	455	KANGAROO JOEY PUMP SET	454
KANGAROO BALLOON 24FR/3.5CM	455	KANGAROO JOEY PUMP SET/500ML	456
KANGAROO BALLOON 24FR/3CM	455	KANGAROO MULTI-FUNCTIONAL PORT	454
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KANGAROO EPUMP JOEY BURETTE	455	KANGAROO PED NG STYLET 20"	457
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KANGAROO EPUMP PUMP SET/1000ML	455	KANGAROO PROXIMAL SPIKE SET	456
KANGAROO EPUMP PUMP SET/100ML	455	KANGAROO PUMP SET 1600ML	456
KANGAROO EPUMP SET 1000ML	455	KANGAROO PUMP SET EXT TUBING	456
KANGAROO EPUMP SET 500ML	455	KANGAROO RIGID CONTAINER PUMP	456
KANGAROO EXTENSION SET	456	KANGAROO SAFETY PEG KIT 16FR	456
KANGAROO FEED/IRRIGATION KIT	455	KANGAROO SAFETY PEG KIT 20FR	456
KANGAROO FEEDING SET/ENFIT	455	KANGAROO STOMA MEASURING DEV	454
KANGAROO FEEDING TUBE 10FR/36"	456	KANGAROO Y-SITE EXTENSION	458
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KANGAROO FEEDING TUBE 12FR/36"	457	KANUMA	356
KANGAROO FEEDING TUBE 12FR/43"	457	KAPSPARGO SPRINKLE	230
KANGAROO FEEDING TUBE 14FR/36"	457	KAPVAY	2
KANGAROO FEEDING TUBE 6FR/20"	457	KARAYA GUM	493
KANGAROO FEEDING TUBE 6FR/36"	457	KARDIAMEMBRANE	310
KANGAROO FEEDING TUBE 8FR/36"	457	KATARAXAP	298
KANGAROO FEEDING TUBE 8FR/42"	457	KATARVIA	298
KANGAROO FEEDING TUBE 8FR/43"	457	KATARYA	297
KANGAROO FEEDING TUBE 8FR/55"	457	KATARYAXN	297
KANGAROO GASTROSTOMY TUBE	457	KATERZIA	232
KANGAROO GASTROSTOMY TUBE/12FR	457	KAXM	296
KANGAROO GASTROSTOMY TUBE/14FR	457	KCENTRA	403
KANGAROO GASTROSTOMY TUBE/16FR	457	KCL (0.149%) IN NACL	515
KANGAROO GASTROSTOMY TUBE/18FR	457	KCL (0.298%) IN NACL	515

KCL (IN NAACL 0.9%)	515	KEYA	297
KCL IN DEXTROSE-NAACL	514	KEYTRUDA	160
KCL-LACTATED RINGERS-D5W	514	KHAPZORY	190
KCL-LIDOCAINE-NAACL	515	KIMMTRAK	166
KEBILIDI	341	KIMYRSA	69
KEDBUMIN	413	KINERET	33
KEDRAB	594	KINEVAC	322
KEIDO	296	KINRIX	621
KELARX	306	KISQALI (200 MG DOSE)	189
KELOTOP	502	KISQALI (400 MG DOSE)	189
KEMOPLAT	146	KISQALI (600 MG DOSE)	189
KENALOG-10	272	KISQALI FEMARA (200 MG DOSE)	184
KENALOG-40	272	KISQALI FEMARA (400 MG DOSE)	184
KENALOG-80	272	KISQALI FEMARA (600 MG DOSE)	184
KENDALL SCD EXPRESS FOOT CUFF	445	KISUNLA	601
KENGREAL	411	KIVIK	304
KEPIVANCE	188	KLARITY-A	571
KEPPRA	96	KLARITY-C DROPS	574
KERALYT	301	KLARITY-L	578
KERENDIA	358	KLARON	278
KERLIX AMD ANTIMICROBIAL	459	KLISYRI (250 MG)	302
KERLIX AMD SUPER SPONGES	459	KLISYRI (350 MG)	302
KESIMPTA	607	KLOR-CON	518
KETALAR	380	KLOR-CON 10	518
KETAMINE HCL	380	KLOXXADO	122
ketamine hcl	380	KOATE	387
KETAMINE HCL-SODIUM CHLORIDE	380,381	KOATE-DVI	387
KETARYA	297	KOCHIA	18
ketoconazole	126	KOGENATE FS	393
ketoconazole (topical)	301	KORLYM	115
ketorolac tromethamine	36	KORSUVA	534
KETOROLAC TROMETHAMINE	36	KOSELUGO	172
ketorolac tromethamine (ophth)	575	KOSHER PRENATAL PLUS IRON	541
KETOVIE	336	KOTARAXAP	298
KETOVIE 3:1	336	KOVALTRY	391
KETOVIE 4:1	336	KRAZATI	172
KETOVIE PEPTIDE	336	KRYSTEXXA	385
KEVARAXAP	298	KUTAR	298
KEVARTIA	298	KUTARVIA	298
KEVARYA	297	KUTARYAXM	297
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KUVAN.....	361	lamivudine.....	224,225
KUVARYA.....	297	lamivudine (hbv).....	226
KUVARYE.....	297	lamivudine-zidovudine.....	222
KUXM.....	297	lamotrigine.....	95,96
KYBELLA.....	284	LAMZEDE.....	341
KYLEENA.....	263	LANOXIN.....	237
KYMRIAH.....	162	LANOXIN PEDIATRIC.....	237
KYNMOBI.....	209,210	LANREOTIDE ACETATE.....	363
KYPROLIS.....	177	lanreotide acetate.....	363
KYZATREX.....	64	lansoprazole.....	626
		lanthanum carbonate.....	378
L		LANTIDRA.....	108
L-METHYL-MC.....	333	LANTUS.....	112
L-METHYL-MC NAC.....	333	LANTUS SOLOSTAR.....	112
L-METHYLFOLATE.....	334	lapatinib ditosylate.....	175
L-METHYLFOLATE CA ME-CBL NAC.....	333	LATANOPROST.....	580
L-METHYLFOLATE CALCIUM.....	334	latanoprost.....	580
L-METHYLFOLATE FORTE.....	333	LATANOPROST-TIMOLOL MALEATE.....	568
L-METHYLFOLATE-ALGAE.....	333	LATEX GLOVES MEDIUM.....	449
L-METHYLFOLATE-ALGAE-B12-B6.....	333	LATISSE.....	305
L-METHYLFOLATE-B6-B12.....	334	LAZANDA.....	48
LAB COAT-DISPOSABLE LARGE.....	473	LAZCLUZE.....	168
LAB COAT-DISPOSABLE MEDIUM.....	473	LDL CARE.....	332
LAB COAT-DISPOSABLE SMALL.....	473	LEDIPASVIR-SOFOSBUVIR.....	227
LAB COAT-DISPOSABLE XL.....	473	LEFLUNICLO.....	38
LAB COAT-DISPOSABLE XXL.....	473	leflunomide.....	38
labetalol hcl.....	229	LEMTRADA.....	607
LABETALOL HCL.....	229	lenalidomide.....	526
LABETALOL HCL-DEXTROSE.....	229	LENMELDY.....	603
LABETALOL HCL-SODIUM CHLORIDE.....	229	LENSCALE.....	18
lacosamide.....	95	LENTOCILIN.....	597
LACRISERT.....	567	LENVIMA (10 MG DAILY DOSE).....	206
lactated ringer's.....	515	LENVIMA (12 MG DAILY DOSE).....	206
LACTATED RINGERS.....	515	LENVIMA (14 MG DAILY DOSE).....	206
LACTIC ACID.....	299	LENVIMA (18 MG DAILY DOSE).....	207
lactic acid (ammonium lactate).....	299	LENVIMA (20 MG DAILY DOSE).....	207
lactulose.....	435,436	LENVIMA (24 MG DAILY DOSE).....	207
lactulose (encephalopathy).....	377	LENVIMA (4 MG DAILY DOSE).....	207
LAGEVRIO.....	228	LENVIMA (8 MG DAILY DOSE).....	207
LAMBS QUARTERS.....	18	LEQEMBI.....	601

LEQVIO	133	LEVULAN KERASTICK	305
letrozole	187	LEXISCAN	322
LEU TECHNELITE	325	LEXIVA	223
LEUCOVORIN CALCIUM	189,190	LIALDA	374
leucovorin calcium	189,190	LIBERVANT	93
LEUKERAN	197	LIBTAYO	160
LEUKINE	422	LIDO BDK	315
leuprolide acetate	192	lidocaine	302
LEUPROLIDE ACETATE (3 MONTH)	193	LIDOCAINE HCL	302,440,534
levalbuterol hcl	83	lidocaine hcl	302
LEVALBUTEROL TARTRATE	83	LIDOCAINE HCL (BUFFERED)	440
LEVAMLODIPINE MALEATE	235	LIDOCAINE HCL (CARDIAC)	79
LEVATIO	315	LIDOCAINE HCL (CARDIAC) PF	79
LEVEMIR	112	lidocaine hcl (local anesth.)	440,441
LEVEMIR FLEXPEN	112	lidocaine hcl (mouth-throat)	534
LEVEMIR FLEXTOUCH	112	LIDOCAINE HCL-BUPIVACAINE HCL	574
levetiracetam	97	LIDOCAINE HCL-OXYMETAZOLINE	549
LEVETIRACETAM	97	LIDOCAINE HCL-TETRACAINE HCL	439
LEVETIRACETAM IN NAACL	97	LIDOCAINE IN D5W	79
levetiracetam in sodium chloride	97,98	lidocaine in d5w	79
LEVICYN	304	lidocaine w/ epinephrine	437,438
LEVOBUNOLOL HCL	567	LIDOCAINE(BUFFERD)-EPINEPHRINE	437
LEVOCARNITINE	343	LIDOCAINE-EPINEPHRINE	437,574
levocarnitine (metabolic modifiers)	343	LIDOCAINE-EPINEPHRINE (3 ML)	437
levocetirizine dihydrochloride	128	LIDOCAINE-HYDROCORT (PERIANAL)	65
levofloxacin	371	LIDOCAINE-HYDROCORTISONE ACE	65,307
LEVOFLOXACIN	371,571,572	lidocaine-hydrocortisone acetate (rectal)	65
levofloxacin (ophth)	571	LIDOCAINE-PHENYLEPHRINE	574
levofloxacin in d5w	371	LIDOCAINE-PHENYLEPHRINE-BSS	574
LEVOLEUCOVORIN CALCIUM	190	lidocaine-prilocaine	315
levoleucovorin calcium	190	LIDOCAINE-SODIUM BICARBONATE	438
LEVOLEUCOVORIN CALCIUM PF	190	lidocaine-transparent dressing	315,316
levonorgestrel & eth estradiol	257,258	LIDOCIDEX I	274
levonorgestrel-eth estradiol (triphasic)	264	LIDOCORT	65
levonorgestrel-ethinyl estradiol (91-day)	262,263	LIDOLOG	276
levonorgestrel-ethinyl estradiol (continuous)	262	LIDOMAR	438
levonorgestrel-ethinyl estradiol-ferrous bisglycinate	258	LIDOMARK 1/5	441
levonorgestrel-ethinyl estradiol-iron	258	LIDOMARK 2/5	441
LEVOPHED	638	LIDOPIN	302
levothyroxine sodium	617,618,619	LIDOTHOL	315
LEVOTHYROXINE SODIUM	617,618,619	LIDOTREX (ALOE VERA)	317

LIFEMS NALOXONE	122	LOCAMETZ	325
LILETTA (52 MG)	263	LOCOID LIPOCREAM	295
LIMBREL	334	lofexidine hcl	601
LIMBREL250	333	LOFRIC COUDE URINARY CATHETER	447
LIMBREL500	333	LOFRIC NELATON PAEDIATRIC CATH	447
LINCOCIN	72	LOFRIC NELATON URINARY CATH	447
lincomycin hcl	72	LOFRIC ORIGO NELATON CATHETER	447
linezolid	72	LOFRIC ORIGO PAED CATHETER	448
LINEZOLID IN SODIUM CHLORIDE	72	LOFRIC ORIGO URINARY CATHETER	448
LINZESS	373	LOFRIC PRIMO NELATON CATHETER	448
LIORESAL	546	LOKELMA	532,533
liothyronine sodium	619,620	LONSURF	184
LIOETHYRONINE SODIUM	620	LOOP	473
LIPIODOL	330	loperamide hcl	119
LIPO	567	lopinavir-ritonavir	222
LIPO-B	417	LOQTORZI	160
LIPO-C	567	lorazepam	78
LIQREV	247	LORBRENA	155
LIQUID E-Z-PAQUE	330	LORMATE	332
LIQUID POLIBAR PLUS	330	losartan potassium	138,139
liraglutide	114	losartan potassium & hydrochlorothiazide	138
liraglutide (weight management)	8	LOSEASONIQUE	262
lisdexamfetamine dimesylate	4	LOTEMAX	578
lisinopril	134	LOTEMAX SM	578
lisinopril & hydrochlorothiazide	135	loteprednol etabonate	578
LITETOUCH MASK LARGE	500	lovastatin	131
LITETOUCH MASK MEDIUM	500	loxapine succinate	217
LITETOUCH MASK SMALL	500	LOYON	304
LITFULO	285	lubiprostone	373
lithium	211	LUCENTIS	581
LITHIUM CARBONATE	211	LUCIRA COVID-19 & FLU TEST	323
lithium carbonate	211	LUCIRA COVID-19 ALL-IN-ONE	326
LITHOSTAT	385	LUER TIP CAP TRAY	473
LIVDELZI	377	LULICONAZOLE	301
LIVIXIL PAK	315	LUMAKRAS	172
LIVMARLI	374	LUMASON	329
LIVTENCITY	226	LUMIGAN	580
LMA MAD NASAL	473	LUMINEB II PISTON NEBULIZER	479
LMD IN D5W	412	LUMISIGHT	322
LMD IN NACL	412	LUMIZYME	345
LO LOESTRIN FE	256	LUMOXITI	157

LUNSUMIO	165,166	magnesium sulfate	516
LUPKYNIS	524	MAGNESIUM SULFATE IN D5W	516
LUPRON DEPOT (1-MONTH)	192,193	magnesium sulfate in dextrose	516
LUPRON DEPOT (3-MONTH)	193	MAGNESIUM SULFATE-NACL	516
LUPRON DEPOT (4-MONTH)	193	malathion	306
LUPRON DEPOT (6-MONTH)	194	MANGANESE CHLORIDE	516
LUPRON DEPOT-PED (1-MONTH)	355,356	MANNITOL	339
LUPRON DEPOT-PED (3-MONTH)	356	maraviroc	222
LUPRON DEPOT-PED (6-MONTH)	356	MARBETA-25	274
lurasidone hcl	212	MARBETA-L	273
LUTATHERA	185	MARCAINE	439
LUTRATE DEPOT	193	MARCAINE PRESERVATIVE FREE	439
LUXTURNA	574	MARCAINE SPINAL	440
LYBALVI	610	MARCAINE/EPINEPHRINE	436
LYFGENIA	416	MARCAINE/EPINEPHRINE PF	436
LYMPHOSEEK	324	MARDEX-25	274
LYNOZYFIC	165	MARGENZA	158
LYNPARZA	202	MARLIDO	438
LYRA DIRECT SARS-COV-2 ASSAY	327	MARLIDO-25	438
LYRA SARS-COV-2 ASSAY	327	MARQIBO	197
LYSIPLEX PLUS	537	MARVONA SUIK	438
LYSODREN	147	MAS CARE-PAK	268
LYTGOBI (12 MG DAILY DOSE)	169	MATERNACEL	539
LYTGOBI (16 MG DAILY DOSE)	169	MATERVIA	538
LYTGOBI (20 MG DAILY DOSE)	169	MATULANE	187
LYVISPAH	546	MAVENCLAD (10 TABS)	605
M			
M-M-R II	630	MAVENCLAD (4 TABS)	605
M-NATAL PLUS	540	MAVENCLAD (5 TABS)	606
MABIS COSMOCOMP NEBULIZER	480	MAVENCLAD (6 TABS)	606
MACI	545	MAVENCLAD (7 TABS)	606
MACRILEN	322	MAVENCLAD (8 TABS)	606
MAD NASAL	473	MAVENCLAD (9 TABS)	606
MAD NASAL ATOMIZATION DEVICE	473	MAVILO	298
MAFENIDE ACETATE	292	MAVILO HP	298
mafenide acetate	292	MAVILO LP	298
MAGELLAN INSULIN SAFETY SYR	483	MAVYRET	226
MAGELLAN SYRINGE-SAFETY NEEDLE	489	MAXIDEX	577
MAGELLAN TUBERCULIN SYRINGE	491	MAXITROL	576
MAGNESIUM SULFATE	516	MAYZENT	610
		MAYZENT STARTER PACK	610
		MAZERUSTAR MIXER/MIX CONTAINER	473

MB CAPS	73	MELONDIS	297
MC 300 W/UNIVERSAL TUBING	480	MELONDIS PLUS	298
MC 300-MOUTHPIECE	480	meloxicam	36,37
MEADOW FESCUE GRASS POLLEN	18	MELOXICAM	37
meclizine hcl	124	MELPHALAN	199
MECLOFENAMATE SODIUM	36	melphalan hcl	200
MECORIX	297	memantine hcl	608
MECORIX HP	297	MEMANTINE HCL	608
MECORIX PLUS	297	memantine hcl-donepezil hcl	602
MEDACTIV	332	MEMBRANEBLUE	579
MEDI-RDT BLISTER PACKS	473	MENACTRA	630
MEDICAL COMPRESSION PANTYHOSE	450	MENEST	368,369
MEDICAL COMPRESSION SOCKS	450	MENOPUR	359
MEDICAL COMPRESSION STOCKINGS	450	MENQUADFI	630
MEDICAL COMPRESSION THIGH HIGH	450	MENTAX	285
MEDICAL LEGWEAR/WAIST HIGH	450	MENVEO	630
MEDICAL THERAPY SOCKS	450	meprobamate	76
MEDICATED DNA COLLECTION	326	MEPSEVII	357
MEDICATED DNA COLLECTION 2	326	mercaptopurine	151
MEDNEB NEB-WITH DISPO NEB KIT	480	meropenem	68
MEDORFA	297	MEROPENEM	68
MEDORFA HP	297	MEROPENEM-SODIUM CHLORIDE	68
MEDORFA HP PLUS	297	mesalamine	374,375
MEDORFA LP	297	mesalamine w/ cleanser	375
MEDORFA PLUS	297	mesna	205
MEDROLOAN II SUIK	274	MESNEX	205
MEDROLOAN SUIK	274	MESQUITE	18
medroxyprogesterone acetate	600,601	METAFOLBIC	333
medroxyprogesterone acetate (contraceptive)	263	METAFOLBIC PLUS	333
mefenamic acid	36	METAFOLBIC PLUS RF	333
mefloquine hcl	142	METANX	333
megestrol acetate	203	METANX FC	334
MEGESTROL ACETATE	601	METANX PRO NERVE HEALTH	333
megestrol acetate (appetite)	601	METANX RR	333
MEKAM	297	metaxalone	547
MEKAM HP	297	METAXALONE	547
MEKINIST	172	METERED NASAL SPRAY PUMP 15ML	473
MEKTOVI	172	metformin hcl	108,109
MELALEUCA	18	METFORMIN HCL	108,109
melatonin	27	METHACHOLINE CHLORIDE	322
MELIDU	297	METHADONE HCL	51,52

methadone hcl	52	metoclopramide hcl	373
METHADONE HCL-SODIUM CHLORIDE	52	METOCLOPRAMIDE HCL	373
METHADOSE	52	metolazone	340
METHADOSE SUGAR-FREE	52	METOPIRONE	322
methamphetamine hcl	5	metoprolol & hydrochlorothiazide	140,141
METHAVER	332	metoprolol succinate	230,231
methazolamide	338	metoprolol tartrate	231
methenamine hippurate	73	METROCREAM	305
METHENAMINE MANDELATE	73	METROGEL	305
methenamine mandelate	73	METROLOTION	305
methenamine-hyosc-methylene blue-sod phos-phenyl sal	73,74	METRONIDAZOLE	66
methimazole	616,617	metronidazole	66
methocarbamol	547	metronidazole (topical)	306
METHOHEXITAL SODIUM	382	METRONIDAZOLE BENZO+SYRSPEND	66
methohexital sodium	382	metronidazole vaginal	634
METHOTREXATE	151	metyrosine	136
methotrexate sodium	151,152	mexiletine hcl	79
METHOTREXATE SODIUM	152	MI PASTE	449
METHOTREXATE SODIUM (PF)	152	MI PASTE PLUS	449
METHOXSALEN RAPID	288	MI-VITE RX	537
methscopolamine bromide	627	MICAFUNGIN SODIUM	125
methsuximide	100	micafungin sodium	125
METHYLDOPA	139,140	MICAFUNGIN SODIUM-NACL	125
methyl dopa	140	MICONAZOLE 3	634
METHYLENE BLUE	121	MICRHOGAM ULTRA-FILTERED PLUS	595
methylene blue (antidote)	121	MICROAIR VIBRATING MESH NEBUL	480
METHYLENE BLUE (ANTIDOTE)	121	MICROCHAMBER	506
methylergonovine maleate	583	MICRONEB	480
METHYLFOL-ALGAE-B12-ACETYLCYST	333	MICROPLEGIA MSA-MSG	240
METHYLIN	11	MICROSPACER	506
methylphenidate	10	MIDAZOLAM	431
methylphenidate hcl	11,12,13	midazolam hcl	431,432
METHYLPHENIDATE HCL ER	11,12	MIDAZOLAM HCL	431,432
METHYLPHENIDATE HCL ER (OSM)	12	MIDAZOLAM HCL-SODIUM CHLORIDE	432
methylprednisolone	269	MIDAZOLAM+SYRSPEND SF	431
METHYLPREDNISOLONE ACE-LIDO	275	midazolam-sodium chloride	432
METHYLPREDNISOLONE ACETATE	269,270	MIDAZOLAM-SODIUM CHLORIDE	432,433
methylprednisolone acetate	269,270	MIDAZOLAM-SODIUM CHLORIDE (PF)	433
methylprednisolone sod succ	270	midodrine hcl	638
METHYLPREDNISOLONE-BUPIVACAINE	274	MIEBO	580
		mifepristone	341

mifepristone (hyperglycemia)	115	MITE (D. PTERONYSSINUS)	18
MIGLITOL	108	MITOMYCIN	181,182
miglitol	108	mitomycin	181,182
miglustat	416	MITOSOL	572
MILLIPRED	270	mitoxantrone hcl	182
milrinone lactate	238	MIUDELLA INTRAUTERINE COPPER	262
milrinone lactate in dextrose	238	MIXED FEATHERS	26
MIMORA	297	MIXED RAGWEED	18
MIMYX	304	MIXED VESPID VENOM PROTEIN	19
MINASTRIN 24 FE	259	MIXER/MAZERUSTAR EMP JAR ADP	473
MINERAL OIL HEAVY	436	MIXER/MAZERUSTAR KK-250S,300SS	473
MINI COMPRESSOR	480	MIXER/MAZERUSTAR KK-300SS	473
MINI Mallet 3/4" PLASTIC	473	MIXER/MAZERUSTAR KK-400W	473
MINIMED 630G INSULIN PUMP	464	MIXER/MAZERUSTAR MD PUMP ADP	474
MINIMED 670G INSULIN PUMP	464	MIXER/MAZERUSTAR/JAR ADP SET	473
MINIMED 770G INSULIN PUMP SYS	464	MIXER/MAZERUSTAR/JAR MXING ADP	473
MINIMED 780G INSULIN PUMP	464	MIXER/MAZERUSTAR/UNODOSE ADAPT	474
MINIMED MIO ADVANCE INFUSE SET	465	MLK F1	276
MINIMED PUMP RESERVOIR 3ML	465	MLK F2	276
MINIMED QUICK SET INF SET 18"	465	MLK F3	276
MINIMED QUICK SET INF SET 23"	466	MLK F4	276
MINIMED QUICK SET INF SET 32"	466	MNEXSPIKE	631
MINIMED QUICK SET INF SET 43"	466	MOBI 2ML CARTRIDGE	466
MINIMED RESERVOIR 1.8ML	466	modafinil	13
MINIMED RESERVOIR 3ML	466	MODD1 PATIENT WELCOME KIT	462
MINIMED SILHOUETTE INF SET 32"	466	MODD1 SUPPLY KIT	462
MINIMED SILHOUETTE INF SET 43"	466	MODERNA COVID-19 BIVAL 6M-5Y	630
MINOCIN	616	MODERNA COVID-19 BIVAL BOOSTER	630
minocycline hcl	616	MODERNA COVID-19 BIVALENT	631
minoxidil	141	MODERNA COVID-19 VAC (BOOSTER)	631
MIO INFUSION SET 18" 6MM	466	MODERNA COVID-19 VAC 6M-11Y	631
MIO INFUSION SET 23" 6MM	466	MODERNA COVID-19 VACC 6-11Y	631
MIO INFUSION SET 32" 6MM	466	MODERNA COVID-19 VACC 6M-5Y	631
MIO INFUSION SET 32" 9MM	466	MODERNA COVID-19 VACCINE	631
mirabegron	629	moexipril hcl	134
MIRCERA	420	MOKURA	298
MIRENA (52 MG)	263	MOKURA LP	298
mirtazapine	101	MOKURA MOD	298
MIRVASO	305	MOKURA PLUS	298
misoprostol	628	MOLEXI	298
MITE (D. FARINAE)	18	MOLINDONE HCL	217

mometasone furoate	296	MONOJECT SYRINGE ECCENTRIC TIP	488
mometasone furoate (nasal)	550	MONOJECT SYRINGE LUER LOCK	488
MONARCH ETNS SYSTEM	492	MONOJECT SYRINGE LUER-LOCK TIP	488
MONJUVI	156	MONOJECT SYRINGE PHARMACY TRAY	488
MONOFERRIC	423	MONOJECT SYRINGE REG LUER	488
MONOJECT ALLERGIST TRAY	491	MONOJECT SYRINGE REGULAR TIP	488,489
MONOJECT BLOOD COLLECTION SET	474	MONOJECT SYRINGE TOOMEY TYPE	489
MONOJECT BLOOD TUBE HOLDER	474	MONOJECT TB SAFETY SYRINGE	491
MONOJECT BLUNTIP CANNULA	484,485	MONOJECT TB SYRINGE	489,491,492
MONOJECT BLUNTIP SYR/CANNULA	487	MONOJECT VIAL ACCESS CANNULA	496
MONOJECT BONE MARROW BIOPSY	441	MONONINE	398
MONOJECT CONTROL SYRINGE	487	MONSELS FERRIC SUBSULFATE	428
MONOJECT ENTERAL SYRINGE CAP	454	montelukast sodium	85
MONOJECT ENTERAL SYRINGE/12ML	454	MORCIN	524
MONOJECT ENTERAL SYRINGE/1ML	454	MORPHINE SULFATE	52,53,54,55
MONOJECT ENTERAL SYRINGE/35ML	454	morphine sulfate	53,54
MONOJECT ENTERAL SYRINGE/60ML	454	MORPHINE SULFATE (CONCENTRATE)	53
MONOJECT ENTERAL SYRINGE/6ML	454	MORPHINE SULFATE (PF)	54,55
MONOJECT FILTER ASPIRATOR	487	MORPHINE SULFATE ER	54
MONOJECT FILTER NEEDLE	481	MORPHINE SULFATE ER BEADS	55
MONOJECT FLUSH SYRINGE	520	morphine sulfate for continuous microinfusion	55
MONOJECT HYPODERMIC NEEDLE 484,485,486,487		MORPHINE SULFATE-NACL	55,56
MONOJECT HYPODERMIC NEEDLE TIP	496	MOSQUITO (DIAGNOSTIC)	319
MONOJECT INSULIN SYRINGE	483,484	MOTEGRITY	372
MONOJECT INTRODUCER NEEDLE	487	MOTPOLY XR	95
MONOJECT LIFESHIELD CANNULA	496	MOUNJARO	113
MONOJECT LIFESHIELD SYRINGE	489,490	MOUNTAIN CEDAR	19
MONOJECT LUER ADAPTER	474	MOUNTAIN CEDAR (DIAGNOSTIC)	319
MONOJECT MAGELLAN SAFETY NDL	484,485,486	MOUNTAIN CEDAR POLLEN	19
MONOJECT MAGELLAN SYRINGE	489,490,491	MOUSE EPITHELIUM	19
MONOJECT MED PREP CANNULA	496	MOUSE EPITHELIUM (DIAGNOSTIC)	319
MONOJECT MONODOSE ORAL MED SYR	493	MOVANTIK	377
MONOJECT MULT-SAMP COLLECT SET	474	MOXIFLOXACIN HCL	371,572
MONOJECT PHARMACY TRAY	487,488	moxifloxacin hcl	371
MONOJECT PISTON SYRINGE	488	MOXIFLOXACIN HCL (2X DAY)	572
MONOJECT SHARPS CONTAINER	468	moxifloxacin hcl (ophth)	572
MONOJECT SMARTIP SYR/CANNULA	496	MOXIFLOXACIN HCL IN NAACL	371
MONOJECT SODIUM CHLORIDE FLUSH	520	MOXIFLOXACIN HCL-BSS	570
MONOJECT SYRINGE	488,489,490,491	MOXIFLOXACIN-BROMFENAC	570
MONOJECT SYRINGE CATH TIP	488	MOZOBIL	417
MONOJECT SYRINGE ECC LUER	488	MRESVIA	633

MSUD EASY	336	MYOVIEW 30ML	324
MUCOR	19	MYRBETRIQ	629
MUGWORT	19	MYTESI	118
MULPLETA	427	MYTHIUS	298
MULTAQ	80	MYVORI	298
MULTI-DRAW NEEDLE	481	MYXREDLIN	113
MULTI-MAC	541		
MULTI-SPECIALTY	275	N	
MULTI-VITAMIN/FLUORIDE/IRON	538	NABI-HB	586
MULTIGEN	424	nabumetone	37
MULTIGEN FOLIC	424	nadolol	231
MULTIGEN PLUS	424	nafcillin sodium	599
MULTIHANCE	327	NAFCILLIN SODIUM	599
MULTIPLE ELECTRO TYPE 1 PH 5.5	514	NAFCILLIN SODIUM IN DEXTROSE	599,600
MULTIPRO	537	NAFRINSE DAILY ACIDULATED	534
MULTITRACE-4 NEONATAL	520	NAFRINSE DAILY/NEUTRAL	535
MULTITRACE-4 PEDIATRIC	520	NAFRINSE WEEKLY	535
MULTRYS	520	NAFTIFINE HCL	286
mupirocin	285	naftifine hcl	286
mupirocin calcium (topical)	285	NAFTIN	286
MUSCUSOLICE	285	NAGLAZYME	357
MUSE	242,243	NAIL POLISH BOTTLE/BRUSH 15ML	474
MVASI	206	nalbuphine hcl	62
MYALEPT	355	NALOXONE HCL	122
MYCAMINE	125	naloxone hcl	122
MYCAPSSA	363	naltrexone hcl	122
mycophenolate mofetil	527	naproxen	37
mycophenolate mofetil hcl	527	naproxen sodium	37
mycophenolate sodium	527	naproxen-esomeprazole magnesium	34
MYCOZYL AL	286	naratriptan hcl	510
MYDAYIS	3	NARCAN	122
MYDCOMBI	569	NAROPIN	442
MYDRIACYL	570	NASAL SPRAY METERED PUMP	474
MYFEMBREE	368	NASCOBAL	417
MYFORTIC	527	NATACHEW	539
MYHIBBIN	527	NATACYN	572
MYLERAN	145	NATAL PNV	541
MYLOTARG	157	NATALVIT	540
MYNEPHRON	537	NATAZIA	263
MYOBLOC	559	nateglinide	115
MYOVIEW	324	NATESTO	63

NATPARA.....	360	NEONATAL PLUS.....	540
NATROBA.....	306	NEONATAL PN STARTER (HEPARIN).....	564
NATURAL RUBBER PANTYHOSE.....	451	NEONATAL PN STARTER BAG.....	564
NATURAL RUBBER STOCKINGS.....	451	NEONATAL PN STARTER BAG(W HEP).....	564
NAVELBINE.....	197	NEOPROFEN.....	36
NEB 200 COMPRESSOR NEBULIZER.....	480	NEORAL.....	524
NEB-RITE4.....	480	NEOSALUS.....	304
nebivolol hcl.....	231	NEOSTIGMINE METHYLSULFATE.....	143
NEBULIZER.....	480	neostigmine methylsulfate.....	143
NEBULIZER AIR TUBE/PLUGS.....	500	NEOSTIGMINE METHYLSULFATE RFID.....	143
NEBULIZER MASK ADULT.....	500	NEOX 100.....	310
NEBULIZER MASK CHILD.....	500	NEOX CORD 1K.....	310
NEBULIZER PED FROG.....	480	NEPHPLEX RX.....	537
NEBULIZER PED FROG KIT.....	480	NEPHRON FA.....	424
NEBULIZER SYSTEM ALL-IN-ONE.....	480	NERIVIO.....	492
NEBULIZER/PEDIATRIC MASK.....	500	NERLYNX.....	175
NEBULIZER/TUBING/MOUTHPIECE.....	500	NESACAINE.....	442
NEBUSAL.....	277	NESACAINE-MPF.....	442,443
NEEDLELESS PRN CONNECTORS.....	496	NESTABS.....	541
NEEDLELESS PRN PORT CONVERTER.....	497	NESTABS DHA.....	541
NEEVO DHA.....	542	NESTABS ONE.....	543
NEFAZODONE HCL.....	104	NETSPOT.....	324
nelarabine.....	152	NETTLE.....	19
NEMBUTAL.....	430	NETTLE (DIAGNOSTIC).....	319
NEMLUVIO.....	301	NEULUMEX.....	330
NEO-VITAL RX.....	538	NEUPRO.....	211
NEOKE BHB.....	332	NEURACEQ.....	323
NEOKE RA LIPOIC.....	27	NEURAPTINE.....	285
NEOMATERNA.....	538	NEURIN-SL.....	417
neomycin sulfate.....	27	NEUROLITE.....	325
NEOMYCIN-BACITRACIN ZN-POLYMYX.....	571	NEURORUB.....	285
neomycin-bacitracin zn-polymyxin.....	570,571	NEVANAC.....	575
neomycin-polymy-dexameth.....	576	nevirapine.....	224
NEOMYCIN-POLYMYXIN B GU.....	382	NEVIRAPINE.....	224
NEOMYCIN-POLYMYXIN-GRAMICIDIN.....	571	NEVIRAPINE ER.....	224
NEOMYCIN-POLYMYXIN-HC.....	576	NEXIUM I.V.....	626
neomycin-polymyxin-hc (otic).....	582	NEXLETOL.....	129
NEONATAL + DHA.....	543	NEXLIZET.....	129
NEONATAL 19.....	544	NEXOBRID.....	299
NEONATAL COMPLETE.....	540	NEXPLANON.....	263
NEONATAL FE.....	538	NEXTERONE.....	80

NEXTSTELLIS	256	NITRILE GLOVES/SIZE 7.5	450
NEXVIAZYME	345	NITRILE GLOVES/SIZE 8	450
NGENLA	349	NITRILE GLOVES/SIZE 8.5	450
NIACIN (ANTIHYPERLIPIDEMIC)	132	NITRILE GLOVES/SIZE 9	450
niacin (antihyperlipidemic)	132	NITRILE GLOVES/SIZE 9.5 MEDIUM	450
NIACOR	132	NITRO-BID	75
NIASPAN	132	NITRO-TIME	75
NICAPRIN	332	nitrofurantoin	73
nicardipine hcl	235,236	nitrofurantoin macrocrystal	73
NICARDIPINE HCL	236	nitrofurantoin monohyd macro	73
NICARDIPINE HCL IN NAACL	236	nitroglycerin	74,75
nicardipine hcl in sodium chloride	236	NITROGLYCERIN	75
NICAZYME	332	nitroglycerin (intra-anal)	64
NICOMIDE	538	NITROGLYCERIN IN D5W	75
NICOTINAMIDE	538	nitroprusside sodium	141
NICOTROL	609	nitroprusside sodium-sodium chloride	142
NICOTROL NS	609	NITYR	353
nifedipine	236	NIVA THYROID	620
NIFEREX	425	NIVA-PLUS	540
NIKTIMVO	522	NIVATOPIC PLUS	304
nilotinib hcl	164	NIVESTYM	421
nilutamide	148	nizatidine	625
NIMBEX	559	NIZATIDINE	625
nimodipine	236	NOCDURNA	366
NIMODIPINE	236	NORDIPEN 5 INJECTION DEVICE	481
NINLARO	177,178	NORDITROPIN FLEXPPO	350,351
NIPENT	187	norelgestromin-ethinyl estradiol	261
NIPRIDE RTU	142	NOREPINEPHRINE BITARTRATE	638
nisoldipine	236,237	norepinephrine bitartrate	638
NISOLDIPINE ER	236,237	NOREPINEPHRINE-DEXTROSE	638
nitazoxanide	67	NOREPINEPHRINE-SODIUM CHLORIDE	638,639
NITHIODOTE	119	norethin acet & estrad-fe	258,259
nitisinone	352,353	norethindrone & eth estradiol	260
NITRILE GLOVES LARGE	449	norethindrone & ethinyl estradiol-fe	260,261
NITRILE GLOVES MEDIUM	449	norethindrone (contraceptive)	263,264
NITRILE GLOVES SMALL	450	norethindrone acet & eth estra	259,260
NITRILE GLOVES X-LARGE	450	norethindrone acetate	601
NITRILE GLOVES/SIZE 10	449	norethindrone acetate-ethinyl estradiol	368
NITRILE GLOVES/SIZE 6	450	norethindrone acetate-ethinyl estradiol-fe	264
NITRILE GLOVES/SIZE 6.5	449	norethindrone-eth estradiol (triphasic)	264,265
NITRILE GLOVES/SIZE 7	450	norgestimate-ethinyl estradiol	261

norgestimate-ethinyl estradiol (triphasic)	265	NUPLAZID	212
norgestrel & ethinyl estradiol	261	NURTEC	508
NORLIQVA	232	NUSHIELD	310,311
NORM-JECT LUER SLIP SYRINGE	489	NUTRIFAC ZX	537
NORMAL SALINE FLUSH	520	NUTRILIPID	566
NORMOSOL-M IN D5W	513	NUTRIPORT BALLOON 20FR/2.5CM	495
NORMOSOL-R	515	NUTRIPORT BALLOON 20FR/2.7CM	495
NORMOSOL-R IN D5W	514	NUTRIPORT BALLOON 20FR/3.5CM	495
NORMOSOL-R PH 7.4	515	NUTRIPORT BALLOON 20FR/4.5CM	495
NORTHERN QUAHOG CLAM(DIAGNOST)	319	NUTRIPORT BALLOON 20FR/4CM	495
nortriptyline hcl	107	NUTRIPORT BALLOON 20FR/5CM	495
NORVIR	223	NUTRIPORT BALLOON 24FR/0.8CM	495
NOVACHOR	313	NUTRIPORT BALLOON 24FR/1.2CM	495
NOVAREL	358	NUTRIPORT BALLOON 24FR/1.5CM	496
NOVAVAX COVID-19 VACCINE	632	NUTRIPORT BALLOON 24FR/1.7CM	496
NOVITE	538	NUTRIPORT BALLOON 24FR/1CM	496
NOVOEIGHT	387,388	NUTRIPORT BALLOON 24FR/2.3CM	496
NOVOLOG	111	NUTRIPORT BALLOON 24FR/2.5CM	496
NOVOLOG 70/30 FLEXPEN RELION	111	NUTRIPORT BALLOON 24FR/2.7CM	496
NOVOLOG FLEXPEN	111	NUTRIPORT BALLOON 24FR/2CM	496
NOVOLOG FLEXPEN RELION	111	NUTRIPORT BALLOON 24FR/3.5CM	496
NOVOLOG MIX 70/30	112	NUTRIPORT BALLOON 24FR/3CM	496
NOVOLOG MIX 70/30 FLEXPEN	112	NUTRIPORT BALLOON 24FR/4.5CM	496
NOVOLOG MIX 70/30 RELION	112	NUTRIPORT BALLOON 24FR/4CM	496
NOVOLOG PENFILL	111	NUTROPIN AQ NUSPIN 10	351
NOVOLOG RELION	111	NUTROPIN AQ NUSPIN 20	351
NOVOPEN ECHO	482	NUTROPIN AQ NUSPIN 5	351
NOVOSEVEN RT	401	NUVA III	502
NOXAFIL	127	NUVAGEL	502
NP THYROID	621	NUVAIL	304
NPLATE	427	NUVARING	262
NS-2 ELECTRIC PATCH POUCH	492	NUVAXOVID COVID-19 VACCINE	632
NUBEQA	148	NUVAZIL	502
NUCALA	84	NUVAZIL II	502
NUCEL	313	NUVISC	579
NUDEXTA	609	NUWIQ	391,392,393
NUFERA	425	NUZYRA	614
NUFOL	421	NYPOZI	422
NULEV	624	nystatin	126
NULIBRY	357	NYSTATIN	534
NULOJIX	533	nystatin (mouth-throat)	534

nystatin (topical)	286	OINTMENT TUBE/PLASTIC 1OZ	474
nystatin-triamcinolone	286	OINTMENT TUBE/PLASTIC 2OZ	474
NYVEPRIA	422	OINTMENT TUBE/PLASTIC 4OZ	474
O			
OAT (DIAGNOSTIC)	319	OINTMENT TUBE/PLASTIC 6OZ	474
OAT GRAIN (DIAGNOSTIC)	319	OINTMENT TUBE/PLASTIC 8OZ	474
OB COMPLETE	541	OJEMDA	166
OB COMPLETE ONE	542	OJJAARA	191
OB COMPLETE PETITE	542	olanzapine	220
OB COMPLETE PREMIER	541	olanzapine-fluoxetine hcl	611
OB COMPLETE/DHA	542	OLINVYK	56
OBIZUR	395	OLIVE TREE	19
OBSTETRIX EC (WITH DOCUSATE)	539	olmesartan medoxomil	139
OBSTETRIX ONE (WITH DOCUSATE)	544	olmesartan medoxomil-amlodipine- hydrochlorothiazide	136,137
OALIVA	372	olmesartan medoxomil-hydrochlorothiazide	138
OCREVUS	607	olopatadine hcl	571
OCREVUS ZUNOVO	606	olopatadine hcl (nasal)	549
OCTAGAM	589,590	OLPRUVA (2 GM DOSE)	365
OCTAPLAS BLOOD GROUP A	414	OLPRUVA (3 GM DOSE)	365
OCTAPLAS BLOOD GROUP AB	414	OLPRUVA (4 GM DOSE)	365
OCTAPLAS BLOOD GROUP B	414	OLPRUVA (5 GM DOSE)	365
OCTAPLAS BLOOD GROUP O	414	OLPRUVA (6 GM DOSE)	365
octreotide acetate	363,364	OLPRUVA (6.67 GM DOSE)	365
OCTREOTIDE ACETATE	363,364	OLUMIANT	30
ODACTRA	26	OMBRA COMPRESSOR ADULT	500
ODEFSEY	221	OMBRA COMPRESSOR CHILD	500
ODOMZO	170	OMBRA TABLE TOP COMPRESSOR	500
OFEV	614	omega-3-acid ethyl esters	129
OFIRMEV	39	OMEGAVEN	566
OFLOXACIN	371	omeprazole	626
ofloxacin	371	OMEPRAZOLE+SYRSPEND SF ALKA	626
ofloxacin (ophth)	572	omeprazole-sodium bicarbonate	625
ofloxacin (otic)	582	OMIDRIA	580
OGIVRI	159	OMISIRGE	155
OGSIVEO	170	OMNARIS	550
OHTUVAYRE	85	OMNIFLEX DIAPHRAGM	449
OINTMENT TUBE/METAL 1OZ	474	OMNIPAQUE	331
OINTMENT TUBE/METAL 2OZ	474	OMNIPOD 5 DEXG7G6 PODS GEN 5	462
OINTMENT TUBE/METAL 4OZ	474	OMNIPOD 5 G6 INTRO (GEN 5)	463
OINTMENT TUBE/OPHTH TIP 1/8OZ	474	OMNIPOD 5 G6 PODS (GEN 5)	463
		OMNIPOD 5 G7 INTRO (GEN 5)	463

OMNIPOD 5 G7 PODS (GEN 5)	463	OPSUMIT	247
OMNIPOD 5 LIBRE2 G6 INTRO G5	463	OPSYNVI	241
OMNIPOD 5 LIBRE2 PLUS G6 PODS	463	OPTICHAMBER DIAMOND	506
OMNIPOD CLASSIC PDM (GEN 3)	463	OPTICHAMBER DIAMOND-LG MASK	506
OMNIPOD CLASSIC PODS (GEN 3)	463	OPTICHAMBER DIAMOND-MD MASK	506
OMNIPOD DASH INTRO (GEN 4)	463	OPTICHAMBER DIAMOND-SM MASK	506
OMNIPOD DASH PDM (GEN 4)	463	OPTISON	329
OMNIPOD DASH PODS (GEN 4)	463	OPTUNE	508
OMNIPOD GO	463	OPTUNE LUA	508
OMNISCAN	328	OPVEE	122
OMNITROPE	351	ORABLOC	436
OMNITROPE PEN 10 INJ DEVICE	482	ORACIT	383
OMNITROPE PEN 5 INJ DEVICE	482	ORAFATE	536
OMNIVEX	332	ORAL CITRATE	383
OMVOH	376	ORALAIR	26
ONCASPAR	185	ORALAIR ADULT STARTER PACK	26
ONCOZENE 100 MICROMETER (2 ML)	452	ORALAIR CHILDRENS STARTER PACK	26
ONCOZENE 100 MICROMETER (3 ML)	452	ORANGE (DIAGNOSTIC)	319
ONCOZENE 40 MICROMETER (2 ML)	452	ORAPRED ODT	270
ONCOZENE 40 MICROMETER (3 ML)	452	ORAVIG	534
ONCOZENE 75 MICROMETER (2 ML)	452	ORBACTIV	69
ONCOZENE 75 MICROMETER (3 ML)	452	ORCHARD GRASS POLLEN	19
ONDANSETRON	123	OREGON ASH POLLEN	19
ondansetron	123	ORENCIA	38
ONDANSETRON HCL	123	ORENCIA CLICKJECT	39
ondansetron hcl	123	ORENITRAM	245
ONE FLOW SPIROMETER	500	ORENITRAM MONTH 1	245
ONE VITE WOMENS PLUS	540	ORENITRAM MONTH 2	245
ONEXTON	279	ORENITRAM MONTH 3	245
ONIVYDE	204	ORFADIN	353
ONPATTRO	609	ORGOVYX	190
ONTRUZANT	159	ORIAHNN	368
ONUREG	148	ORILISSA	346
ONYDA XR	2	ORKAMBI	612,613
ONZETRA XSAIL	510	ORLADEYO	412
OPDIVO	160	orphenadrine citrate	547
OPDIVO QVANTIG	183	orphenadrine w/ aspirin & caff	548
OPDUALAG	161	ORPHENADRINE-ASPIRIN-CAFFEINE	548
OPFOLDA	345	ORPHENGESIC FORTE	548
ophthalmic irrigation solution - intraocular	574	ORSERDU	203
OPIUM	119	ORTIKOS	265

OSCIMIN	624	oxymorphone hcl	58
oseltamivir phosphate	228	oxytocin	583
OSMITROL	339	OXYTOCIN-LACTATED RINGERS	583
OSMOLEX ER	208	OXYTOCIN-SODIUM CHLORIDE	583
OSPHENA	361	OZEMPIC (0.25 OR 0.5 MG/DOSE)	114
OSTACHOL	420	OZEMPIC (1 MG/DOSE)	114
OSTEOCONDUCTIVE MATRIX PLUS	313	OZEMPIC (2 MG/DOSE)	114
OTEZLA	38	OZOBAX	546
OTOVEL	582	OZOBAX DS	546
OTREXUP	31	OZURDEX	577
OTULFI	289,290,376		
OVACE PLUS	290	P	
OVACE PLUS WASH	290	P-CARE K40	272
OVACE WASH	290	P-CARE K40G	275
OVEEZA	421	P-CARE K40MX	276
OVIDE	306	P-CARE K80	272
OVIDREL	358	P-CARE K80G	275
oxacillin sodium	600	P-CARE K80MX	276
OXACILLIN SODIUM IN DEXTROSE	600	paclitaxel	196
oxaliplatin	146	PACLITAXEL	196
OXALIPLATIN	146	PACLITAXEL PROTEIN-BOUND PART	196
OXANDROLONE	63	paclitaxel protein-bound particles	196
oxandrolone	63	PADCEV	160
OXAPROZIN	37	PAIN RELIEF WITH TENS S2000	492
oxaprozin	37	PALFORZIA (1 MG DAILY DOSE)	20
oxazepam	78	PALFORZIA (12 MG DAILY DOSE)	20
oxcarbazepine	98	PALFORZIA (120 MG DAILY DOSE)	19
OXERVATE	575	PALFORZIA (160 MG DAILY DOSE)	20
oxiconazole nitrate	301	PALFORZIA (20 MG DAILY DOSE)	20
OXLUMO	384	PALFORZIA (200 MG DAILY DOSE)	20
OXOPID	300	PALFORZIA (240 MG DAILY DOSE)	20
OXOPIDAXIAQUP	300	PALFORZIA (3 MG DAILY DOSE)	20
OXOPOD	300	PALFORZIA (300 MG MAINTENANCE)	20
OXYBUTYNIN CHLORIDE	628,629	PALFORZIA (300 MG TITRATION)	20
oxybutynin chloride	628,629	PALFORZIA (40 MG DAILY DOSE)	20
oxycodone hcl	56,57	PALFORZIA (6 MG DAILY DOSE)	21
OXYCODONE HCL	56,57,58	PALFORZIA (80 MG DAILY DOSE)	21
OXYCODONE HCL ER	57	PALFORZIA INITIAL DOSE 1-3YRS	21
oxycodone w/ acetaminophen	60	PALFORZIA INITIAL DOSE 4-17YRS	21
OXYCODONE-ACETAMINOPHEN	60	PALFORZIA INITIAL ESCALATION	21
OXYCONTIN	57,58	PALINGEN FLOW	313

PALINGEN HYDROMEMBRANE.....	311	PARI PRONEB MAX LC PLUS.....	480
PALINGEN INOVOFLO.....	307	PARI PRONEB MAX LC SPRINT.....	480
PALINGEN MEMBRANE.....	311,312	PARI SINUS AEROSOL SYSTEM.....	481
PALINGEN XPLUS HYDROMEMBRANE.....	312	PARI SINUSTAR DELIVERY SYSTEM.....	479
PALINGEN XPLUS MEMBRANE.....	312,313	PARI SINUSTAR NASAL NEBULIZER.....	479
paliperidone.....	213	PARI SOFT PLASTIC ADULT MASK.....	501
PALONOSETRON HCL.....	123	PARI SOFT PLASTIC PED MASK.....	501
palonosetron hcl.....	123	PARI TREK S COMBO PACK.....	501
PALYNYIQ.....	360	PARI TREK S PORTABLE POWER.....	501
pamidronate disodium.....	342	PARI TREK S W/12V DC ADAPTOR.....	481
PAMIDRONATE DISODIUM.....	342	PARI VIOS PRO LC PLUS SYSTEM.....	481
PANCREAZE.....	337	PARI VIOS PRO LC SPRINT SYSTEM.....	481
PANHEMATIN.....	412	paricalcitol.....	354
PANRETIN.....	287	paromomycin sulfate.....	27
pantoprazole sodium.....	626	PAROXETINE HCL.....	103,104
PANTOPRAZOLE SODIUM.....	626	paroxetine hcl.....	104
PANTOPRAZOLE SODIUM-NACL.....	626	paroxetine mesylate (vasomotor).....	611
PANZYGA.....	586,587	PARSABIV.....	343
PAPAVERINE HCL.....	242	PATROL PUMP SET/40MM SCREW CAP.....	456
PARADIGM SILHOUETTE COMBO 23".....	466	PAVBLU.....	580,581
PARADIGM SILHOUETTE COMBO 43".....	466	PAXLOVID.....	225
PARAGARD INTRAUTERINE COPPER.....	262	PAXLOVID (150/100).....	225
PARAPLATIN.....	145	PAXLOVID (300/100 & 150/100).....	225
PAREMYD.....	573	PAXLOVID (300/100).....	225
PARI ALTERA NEBULIZER HANDSET.....	500	PAXLYTE.....	537
PARI ALTERA NEBULIZER SYSTEM.....	480	pazopanib hcl.....	175
PARI BABY.....	480	PAZOPANIB HCL.....	175
PARI BABY CONVERSION KIT.....	500	PB-HYOSCY-ATROPINE-SCOPOLAMINE.....	622
PARI BABY NEBULIZER SET.....	480	PEANUT (DIAGNOSTIC).....	319,320
PARI ERAPID NEBULIZER HANDSET.....	500	PECAN NUT (DIAGNOSTIC).....	320
PARI ERAPID NEBULIZER SYSTEM.....	480	PECAN POLLEN.....	21
PARI EXPIRATORY FILTER SET.....	500	PEDIAPRED.....	271
PARI LC PLUS.....	480	PEDIARIX.....	621
PARI LC PLUS NEB SET PED MASK.....	480	PEDIATRIC COMPRESSOR NEBULIZER.....	481
PARI LC PLUS NEBULIZER.....	480	PEDIATRIC COMPRESSOR/NEBULIZER.....	501
PARI LC PLUS PEDIATRIC.....	500	PEDMARK.....	201
PARI LC PLUS VIOS PRO NEB.....	480	PEDVAX HIB.....	630
PARI LC SPRINT NEBULIZER SET.....	480	peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid.....	435
PARI LC STAR.....	480	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate.....	435
PARI MANUAL INTERRUPTER.....	500		
PARI MASK SET.....	501		

peg 3350-potassium chloride-sod bicarbonate-sod chloride	435	PERINDOPRIL ERBUMINE	134
PEG-PREP	435	perindopril erbumine	134
PEGASYS	227	PERJETA	158
PELVIC MUSCLE TRAINER	474	permethrin	306
PEMAZYRE	170	perphenazine	218
PEMETREXED	152	PERPHENAZINE-AMITRIPTYLINE	608
PEMETREXED DIPOTASSIUM	153	PERSERIS	213
pemetrexed disodium	153	PERTZYE	337
PEMETREXED DISODIUM	153,154	PFIZER COVID-19 BIVAL 6MO-4YR	631
PEMETREXED DITROMETHAMINE	154	PFIZER COVID-19 VAC BIVAL 5-11	631
PEMFEXY	152	PFIZER COVID-19 VAC BIVALENT	631
PEMGARDA	585	PFIZER COVID-19 VAC-TRIS 5-11Y	631
PEMRYDI RTU	153,154	PFIZER COVID-19 VAC-TRIS 6M-4Y	631,632
PEN NEEDLES	482	PFIZER-BIONT COVID-19 VAC-TRIS	631
PENBRAYA	630	PFIZER-BIONTECH COVID-19 VACC	631
penciclovir	291	PFLEX	501
penicillamine	522	PH ACCESSORIES STORAGE SOL	474
PENICILLIN G POT IN DEXTROSE	598	PH STRIPS	326
penicillin g potassium	598	PHASEAL ASSEMBLY FIXTURE	497
PENICILLIN G PROCAINE	598	PHASEAL CAP FOR INJECTOR	497
PENICILLIN G SODIUM	598	PHASEAL CONNECTOR LUER LOCK	497
PENICILLIN V POTASSIUM	598	PHASEAL INFUSION ADAPTER	497
penicillin v potassium	598	PHASEAL INFUSION CLAMP	497
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PENICILLIUM NOTATUM (DIAGNOST)	320	PHASEAL IV BAG HANGER	497
PENLEN	304	PHASEAL PROTECTOR 14	497
PENMENVY	630	PHASEAL PROTECTOR 21	497
PENNSAID	285	PHASEAL PROTECTOR 28	497
PENTACEL	621	PHASEAL PROTECTOR 50	497
PENTAM	67	PHASEAL SECONDARY SET	497
pentamidine isethionate	67	PHASEAL SYRINGE TRAY	497
PENTASA	375	PHASEAL Y-SITE CONNECTOR	497
pentobarbital sodium	430	PHEBURANE	366
PENTOSAN POLYSULFATE SODIUM	384	phenazopyridine hcl	384
pentoxifylline	412	PHENAZOPYRIDINE HCL	384
PEPAXTO	200	phendimetrazine tartrate	6
perampanel	92	PHENDIMETRAZINE TARTRATE ER	6
PERENNIAL RYE GRASS POLLEN	21	PHENELZINE SULFATE	102
PERFORMANCE SOCKS	451	phenelzine sulfate	102
PERIKABIVEN	567	PHENERGAN	128
		PHENOBARBITAL	430

phenobarbital	430	PILLOW MASK/CHILD	501
PHENOBARBITAL SODIUM	431	PILLOW MASK/PEDIATRIC	501
phenobarbital-hyoscyamine-atropine-scopolamine .	622	pilocarpine hcl	570
PHENOHYTRO	622	pilocarpine hcl (oral)	536
phenoxybenzamine hcl	136	pimecrolimus	302
phentermine hcl	6	PIMOZIDE	609
phentermine hcl-topiramate	5,6	pindolol	231
phentolamine mesylate	136	PINEAPPLE (DIAGNOSTIC)	320
PHENYLADE GMP MIX DHA/FIBER	336	pioglitazone hcl	118
PHENYLEPHRINE HCL	241,570,639	pioglitazone hcl-glimepiride	117
phenylephrine hcl (mydriatic)	570	pioglitazone hcl-metformin hcl	118
phenylephrine hcl (pressors)	639	piperacillin sodium-tazobactam sodium	599
PHENYLEPHRINE HCL (PRESSORS)	639	PIQRAY (200 MG DAILY DOSE)	201
PHENYLEPHRINE HCL-NACL	639,640	PIQRAY (250 MG DAILY DOSE)	201
phenytoin	100	PIQRAY (300 MG DAILY DOSE)	201
phenytoin sodium	100	pirfenidone	613,614
phenytoin sodium extended	100	PIRFENIDONE	614
PHESGO	184	piroxicam	37
PHEXXI	634	PISTACHIO NUT (DIAGNOSTIC)	320
PHLAG SPRAY	304	PISTON IRRIGATION SYRINGE	454
PHOSLYRA	378	pitavastatin calcium	131
PHOSPHA 250 NEUTRAL	517	PITOCIN	583
PHOSPHO-TRIN 250 NEUTRAL	517	PKU EASY	336
PHOSPHO-TRIN K500	517	PKU EASY MICROTABS	336
PHOSPHOLINE IODIDE	570	PKU EASY MICROTABS PLUS	336
PHOSPHOROUS	517	PKU EXPRESS 15 PLUS+	336
PHOTOFRIN	186	PKU EXPRESS 20 PLUS+	336
PHOTREXA-PHOTREXA VISCOUS KIT	575	PKU GO	336
PHOXILLUM B22K4/0	523	PLAQUENIL	142
PHOXILLUM BK4/2.5	522	PLASBUMIN-25	413
PHYSICIANS EZ USE J/T/T KIT II	276	PLASBUMIN-5	414
PHYSICIANS EZ USE JOINT/TUNNEL	276	PLASMA-LYTE 148	514
PHYSICIANS EZ USE M-PRED	275	PLASMA-LYTE A	515
PHYSOSTIGMINE SALICYLATE	121	PLASMANATE	414
phytonadione	641	PLASTIC BOTTLES 30ML	474
PIASKY	410	PLASTIC BOTTLES 90ML	474
PIDPROGTAR	300	PLASTIC ENEMA BOTTLE	474
PIFELTRO	224	PLASTIC JAR 6OZ	474
PILLGUARD DISPENSER	474	PLASTIC SCOOP 1ML	475
PILLGUARD REFILL CARTRIDGE	474	PLEGISOL	240
PILLOW MASK/ADULT	501	PLEGRIDY	606

PLEGRIDY STARTER PACK.....	606	POLOCAINE.....	441
PLENITY.....	5	POLOCAINE-MPF.....	441
PLENITY WELCOME KIT.....	5	POLY-IRON 150 FORTE.....	425
plerixafor.....	417	polymyxin b sulfate.....	73
PLEXION.....	279	polymyxin b-trimethoprim.....	571
PLEXION CLEANSER.....	279	POLYPROPYLENE CAP-LINER.....	475
PLEXION NS.....	290	POLYSACCHARIDE IRON FORTE.....	425
PLUVICTO.....	185	POLYTOZA PATCH.....	502
PNEUMOVAX 23.....	630	POMALYST.....	171
PNV 27-CA/FE/FA.....	540	POMBILITI.....	345
PNV PRENATAL PLUS MULTIVIT+DHA.....	539	PONS MOUTHPIECE.....	492
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PNV-DHA.....	543	PONVORY STARTER PACK.....	610
PNV-DHA+DOCUSATE.....	544	POP-ON INTERMEDIATE MALE CATH.....	448
PNV-OMEGA.....	542	PORK (DIAGNOSTIC).....	320
PNV-SELECT.....	541	PORTRAZZA.....	169
POCKET CHAMBER.....	506	posaconazole.....	127
POCKET PRO+ REPLACEMENT SENSOR.....	475	POSFREA.....	123
POCKET SPACER.....	506	POSIDYNE ELD FILTER/0.2UM.....	475
POD-CARE 100C.....	273	POSIMIR.....	439
POD-CARE 100CG.....	274	POSLUMA.....	325
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POD-CARE 100KMX.....	276	POTASSIUM ACETATE.....	518
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podofilox.....	301	potassium bicarbonate.....	518
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PODPROG.....	300	POTASSIUM CHLORIDE ER.....	519
PODPROGTAR.....	300	POTASSIUM CHLORIDE IN DEXTROSE.....	514
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POWDER FREE NITRILE GLOVES SM.....	450	PREDNISONE INTENSOL.....	272
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PRAKETAMIDE.....	285	PREGEN DHA.....	543
PRALATREXATE.....	154	PREGENNA.....	539
PRALUENT.....	132	PREGNYL.....	358
pramipexole dihydrochloride.....	210	PREHEVBRIO.....	632
PRAMOSONE.....	307	PREMARIN.....	370,635
PRAMOTIC.....	582	PREMASOL.....	565
PRAMOXINE-HC.....	307	PREMESISRX.....	544
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PRENATVITE COMPLETE.....	538	PRIVIGEN.....	590
PRENATVITE PLUS.....	538	PRO COMFORT LUMB SPIN ORTHOSIS.....	451
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PROMETHEGAN	129	PULMICORT FLEXHALER	85
PROOXIA	298	PULMONEB LT	481
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proparacaine hcl	575	PULMOZYME	613
PROPARACAINE-FLUORESCEIN	573	PUREVIT DUALFE PLUS	424
PROPECIA	316	PYLARIFY	325
PROPEL	550	pyrazinamide	144
PROPEL CONTOUR	550	PYRIDOSTIGMINE BROMIDE	143,144
PROPEL MINI	550	pyridostigmine bromide	143
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PROSILK	502	Q	
PROSOL	565	QALSODY	550
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PROTEOLIN	332	QELBREE	2
PROTEXT	314	QFITLIA	403
PROTHELIAL	536	QINLOCK	175
PROTONIX	626	QLOSI	570
PROTOPAM CHLORIDE	121	QSYMIA	6
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PROVATE 73MM	475	QUADRAMET	185
PROVATE 79MM	475	QUAKE	501
PROVATE 85MM	475	QUARTETTE	263
PROVATE 91MM	475	QUAZEPAM	433
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PROVENGE	162	QUELICIN	551
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PROVISC	579	QUETIAPINE FUMARATE	216
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R

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REXASIL PATCH & VITAMIN E LIQ	317	rivaroxaban	88
REXTOVY	122	rivastigmine	603
REXULTI	219,220	rivastigmine tartrate	603
REYVOW	511	RIVER BIRCH POLLEN	22
REZDIFFRA	373	RIVFLOZA	384
REZIPRES	636	RIXUBIS	400

rizatriptan benzoate	510	RYONCIL 12.5KG TO <25KG	525
ROBAXIN	547	RYONCIL 25KG TO <37.5KG	525
ROCKLATAN	574	RYONCIL 37.5KG TO <50KG	525
ROCTAVIAN	408	RYONCIL 50KG TO <62.5KG	525
ROCURONIUM BROMIDE	559	RYONCIL 62.5KG TO <75KG	525
rocuronium bromide	559	RYONCIL 75KG TO <87.5KG	525
ROCURONIUM BROMIDE +RFID	559	RYONCIL 87.5KG TO <100KG	526
roflumilast	85	RYONCIL <12.5KG	525
ROLVEDON	421	RYPLAZIM	414
romidepsin	171	RYSTIGGO	531
ROMIDEPSIN	171	RYTARY	209
ROMVIMZA	167	RYTELO	201
ROPIDEX	274		
ropinirole hydrochloride	210,211	S	
ROPIV-CLONIDINE-KETOROLAC	438	S.T. GENESIS NERVE STIMULATOR	492
ROPIVACAINE HCL	442	SACCHAROMYCES CEREVISIAE	22,320
ropivacaine hcl	442	sacubitril-valsartan	241
ROPIVACAINE HCL-NACL	442	SAFE-SENSE COVERALL BOOTS	475
rosuvastatin calcium	131	SAFE-SENSE COVERALL/HOOD/L	475
ROTARIX	633	SAFE-SENSE COVERALL/HOOD/M	475
ROTATEQ	633	SAFE-SENSE COVERALL/HOOD/S	475
ROUGH MARSH ELDER	22	SAFE-SENSE COVERALL/HOOD/XL	475
ROUGH PIGWEED	22	SAFE-SENSE EARLOOP FACE MASK	468
ROWASA	375	SAFE-SENSE GLOVE-BLUE-NITRL-L	450
ROZLYTREK	178	SAFE-SENSE GLOVE-BLUE-NITRL-M	450
RUBRACA	202,203	SAFE-SENSE GLOVE-BLUE-NITRL-S	450
RUCONEST	410	SAFE-SENSE GLOVE-BLUE-NITRL-XL	450
rufinamide	98	SAFE-SENSE HEAD COVER CIRC 21"	475
RUKOBIA	222	SAFE-SENSE LAB COAT-LARGE	475
RUSCH FLOCATH QUICK 16FR	448	SAFE-SENSE LAB COAT-MEDIUM	475
RUSCH MMG CATHETER SYSTEM	448	SAFE-SENSE LAB COAT-SMALL	475
RUSCH TIEMANN PVC CATHETER	448	SAFE-SENSE LAB COAT-XLARGE	475
RUSSIAN THISTLE	22	SAFYRAL	257
RUXIENCE	157	SAGEBRUSH	23
RYALTRIS	549	SAGEBRUSH (DIAGNOSTIC)	320
RYANODEX	548	SAIZEN	352
RYBELSUS	114,115	SAIZENPREP	352
RYBREVANT	176	SALEM SUMP SILICONE TUBE 10FR	458
RYDAPT	175	SALEM SUMP SILICONE TUBE 12FR	458
RYKINDO	214	SALEM SUMP SILICONE TUBE 14FR	458
RYLAZE	185	SALEM SUMP SILICONE TUBE 16FR	458

SALEM SUMP SILICONE TUBE 18FR.....	458	SCARSILK.....	307,502
SALEM SUMP TUBE 10FR.....	458	SCEMBLIX.....	163
SALEM SUMP TUBE 12FR.....	458	scopolamine.....	124
SALEM SUMP TUBE 14FR.....	458	SE-NATAL 19.....	539,540
SALEM SUMP TUBE 16FR.....	458	SE-TAN PLUS.....	424
SALEM SUMP TUBE 18FR.....	458	SEA SCALLOPS (DIAGNOSTIC).....	320
salicylic acid.....	301,302	SEASONIQUE.....	263
SALICYLIC ACID.....	301,302	SEBUDERM.....	304
SALICYLIC ACID ER.....	302	SECREFLO.....	322
salicylic acid w/ cleanser.....	302	SEGLUROMET.....	117
SALICYLIC ACID WART REMOVER.....	302	SELARSDI.....	376
SALICYLIC ACID-CLEANSER.....	302	SELECT COMFORT PANTYHOSE.....	451
SALINE BACTERIOSTATIC.....	600	SELECT COMFORT SOCKS.....	451
SALINE FLUSH.....	520	SELECT COMFORT THIGH HIGH.....	451
SALINE-PHENOL.....	600	SELECT-OB.....	541
SALSALATE.....	40	SELECT-OB+DHA.....	543
salsalate.....	40	selegiline hcl.....	208
SAMI THE SEAL NEBULIZER SYSTEM.....	501	SELENIOUS ACID.....	520
SAMSCA.....	362	selenious acid.....	520
SANCUSO.....	123	SELENIUM SULFIDE.....	290
SANDIMMUNE.....	523	selenium sulfide.....	290
SANDOSTATIN.....	364	SELZENTRY.....	222
SANDOSTATIN LAR DEPOT.....	364	SENSORCAINE-MPF/EPINEPHRINE.....	437
SANOFI COVID-19 VAC (BOOSTER).....	632	SEREVENT DISKUS.....	83
SANTYL.....	299	SEROSTIM.....	352
SAPHNELO.....	533	sertraline hcl.....	104
sapropterin dihydrochloride.....	360,361	SERTRALINE HCL.....	104
SARCLISA.....	157	SERUM BOTTLE.....	475
SAROCLADIUM STRICTUM.....	23	SERUM BOTTLE STOPPER 20MM.....	476
SAVAYSA.....	88	SERUM BOTTLES 30ML/AMBER GLASS.....	476
SAVELLA.....	603	SERUM BOTTLES 50ML/CLEAR GLASS.....	476
SAVELLA TITRATION PACK.....	603	SERUM BOTTLES/AMBER GLASS 20ML.....	476
SAVI.....	507	SESAME SEED (DIAGNOSTIC).....	320
SAVI DUAL.....	507	SETTLING PLATE SDA/29ML/100X15.....	476
saxagliptin hcl.....	109	SETTLING PLATE TSA/25ML/100X15.....	476
saxagliptin-metformin hcl.....	110	sevelamer carbonate.....	378
SCARCARE GEL-PAD KIT/LARGE.....	317	sevelamer hcl.....	378
SCARCIN.....	307	SEVENFACT.....	401,402
SCARCIN PAD PLUS.....	502	sevoflurane.....	382
SCARCINPAD.....	502	SEZABY.....	431
SCARHEAL.....	502	SF.....	535

SF 5000 PLUS	535	SIMBRINZA	567
SFROWASA	375	SIMLANDI (1 PEN)	29
SHAGBARK HICKORY	23	SIMLANDI (1 SYRINGE)	29
SHAPERS LAYERED BREAST SHAPER	476	SIMLANDI (2 PEN)	29
SHARPS CONTAINER	468	SIMLANDI (2 SYRINGE)	29
SHEEP SORREL	23	SIMPLERA SENSOR	461
SHEEP SORREL-DOCK (DIAGOSTIC)	329	SIMPLERA SYNC SENSOR	461
SHEEP SORREL-YELLOW DOCK	26	SIMPLERA SYSTEM	461
SHINGRIX	634	SIMPLIGRAFT	313
SHORT RAGWEED POLLEN EXT	23	SIMPONI	29,30
SHORT RAGWEED-GIANT RAGWEED	26	SIMPONI ARIA	30
SHORT-GIANT RAGWEED (DIAGNOST)	329	SIMULECT	530
SHRIMP (DIAGNOSTIC)	320	simvastatin	131
SIDESTREAM ADULT FACE MASK	501	SINCALIDE	322
SIDESTREAM NEBULIZER-DISP	481	SINUVA	550
SIDESTREAM NEBULIZER-REUSABLE	481	sirolimus	528
SIDESTREAM PEDIATRIC FACE MASK	501	SITAGLIPT BASE-METFORM HCL ER	110
SIDESTREAM PLUS NEBULIZER	481	SITAGLIPTIN	109,110
SIGNIFOR	364	SITAGLIPTIN BASE-METFORMIN HCL	110
SIGNIFOR LAR	364,365	SITZMARKS	330
SIKLOS	418	SITZMARKS COMBO PACKAGE	330
SILADERM	502	SITZMARKS FOR KIDS	330
SILADONE SCAR PATCH	502	SIVEXTRO	72
SILATRIX	536	SKARLITE	503
sildenafil citrate	249	SKINEEZ TED STOCKINGS	451
sildenafil citrate (pulmonary hypertension)	247	SKYCLARYS	552
SILHOUETTE 23" INFUSION SET	466	SKYLA	263
SILHOUETTE 43" INFUSION SET	466	SKYRIZI	289,376
SILHOUETTE INFUSION SET 18"	466	SKYRIZI (150 MG DOSE)	288
SILICONE MASK/ADULT	501	SKYRIZI PEN	289
SILICONE MASK/INFANT	501	SKYSONA	602
SILICONE MASK/PEDIATRIC	501	SKYTROFA	347,348
SILINOIN 8 DAY SUPPLY	502	SLYND	263
SILIPAC	307	SMOFLIPID	566
SILIQ	288	SNAP-ON CHLOROBUTYL STOPPER	476
SILIVEX	502	sod benzoate & sod phenylacetate	365
silodosin	382	SOD CITRATE-CITRIC ACID	383
SILTREX	503	SOD FLUORIDE-POTASSIUM NITRATE	534
SILVER NITRATE	292	SODIUM ACETATE	512
silver nitrate	292	sodium acetate	512
silver sulfadiazine	292	sodium bicarbonate	512

SODIUM BICARBONATE	512	SOFIA STREP A FIA	327
SODIUM BICARBONATE-DEXTROSE	512	SOFIA STREP A+ FIA	327
SODIUM CHLORIDE	277,519	SOFIA2 FLU+SARS ANTIGEN FIA	323
sodium chloride	519	SOFIA2 SARS ANTIGEN FIA	326
SODIUM CHLORIDE BACTERIOSTATIC	600	SOFOSBUVIR-VELPATASVIR	227
SODIUM CHLORIDE FLUSH	520	SOGROYA	348
sodium chloride flush	520	SOHONOS	548
SODIUM CITRATE	87	solifenacin succinate	629
sodium citrate & citric acid	383	SOLIRIS	410
SODIUM CITRATE LOCK FLUSH	87	SOLODYN	616
SODIUM CITRATE-CITRIC ACID	383	SOLU-CORTEF	269
SODIUM CITRATE-GENTAMICIN SULF	90	SOLU-MEDROL	270
SODIUM DIURIL	340	SOLU-MEDROL (PF)	270
SODIUM EDECRIN	339	SOMATULINE DEPOT	363
sodium ferric gluconate complex in sucrose	424	SOMAVERT	346,347
sodium fluoride	515,516	SOOLANTRA	305
SODIUM FLUORIDE	516,535	SOOTHE NEB MESH NEBULIZER	481
sodium fluoride (dental)	535,536	SOOTHENEB COMPRESSOR NEBULIZER	481
SODIUM FLUORIDE 5000 ENAMEL	534	sorafenib tosylate	175
SODIUM FLUORIDE 5000 PLUS	535	SORILUX	287
SODIUM FLUORIDE 5000 PPM	536	SORREL/DOCK MIX	26
SODIUM FLUORIDE 5000 SENSITIVE	534	sotalol hcl	232
SODIUM FLUORIDE F 18	325	SOTALOL HCL	232
SODIUM IODIDE I-123	324	sotalol hcl (afib/af)	232
SODIUM IODIDE I-131	617	SOTRADECOL	533
SODIUM NITRITE	122	SOTROVIMAB	585
SODIUM OXYBATE	601	SOTYKTU	288
sodium phenylbutyrate	366	SOTYLIZE	232
SODIUM PHOSPHATES	517	SOYBEAN (DIAGNOSTIC)	320
sodium phosphates (sodium phosphate dibasic & monobasic)	517	SPARKY THE DOG PED NEBULIZER	481
sodium polystyrene sulfonate	532	specialty vitamins products	544
SODIUM SACCHARIN	337	SPEEDGEL RX	524
SODIUM SULFACETAMIDE	290	SPEVIGO	289
SODIUM SULFACETAMIDE WASH	291	SPHERUSOL	319
sodium sulfate-potassium sulfate-magnesium sulfate	435	SPIKEVAX	632
sodium tetradecyl sulfate	533	SPIKEVAX COVID-19 VACCINE	632
SODIUM THIOSULFATE	122	SPILL KIT/CHEMOTHERAPY	476
SOFIA INFLUENZA A+B FIA	327	SPINOSAD	306
SOFIA SARS ANTIGEN FIA	326	SPINY PIGWEED	23
		SPIRIVA HANDHALER	84
		SPIRIVA RESPIMAT	84

SPIRO PD	501	STREPTOCOCCINUM 30C	524
SPIROMETER	501	STREPTOMYCIN SULFATE	27
spironolactone	340	STRIBILD	221
spironolactone & hydrochlorothiazide	338	STRIVE DUAL ZONE PEAK FLOW MTR	498
SPRAVATO (56 MG DOSE)	102	STRIVERDI RESPIMAT	83
SPRAVATO (84 MG DOSE)	102	STRONTIUM CHLORIDE SR-89	185
SPRAY APPLICATOR KIT	476	SUBLOCADE	61
SPRAY BOTTLE/PLASTIC 120ML	476	SUCCINYLCHOLINE CHLORIDE	551,552
SPRING BIRCH POLLEN	22	succinylcholine chloride	552
SPS (SODIUM POLYSTYRENE SULF)	532	SUCCINYLCHOLINE CL +RFID	552
SPY AGENT GREEN	322	SUCRAID	338
SPY- MIS KIT	322	sucrafate	625
SPY-PHI KIT	322	SUFENTANIL CITRATE	58,59
SSKI	277	sufentanil citrate	58,59
SSS 10-5	279	SUGAMMADEX SODIUM	122
STAMARIL	634	SULCONAZOLE NITRATE	301
STARJEMZA	290	SULFACETAMIDE SOD-SULFUR WASH	280
STATUS COVID-19/FLU A&B	323	sulfacetamide sodium	290,291
STEGLATRO	116	SULFACETAMIDE SODIUM	291,578
STEGLUJAN	115	sulfacetamide sodium (acne)	278
STELARA	376	SULFACETAMIDE SODIUM (CLEANS)	291
STENDRA	249	sulfacetamide sodium (ophth)	579
STEQEYMA	377	sulfacetamide sodium w/ sulfur	279,280
STERILE DILUENT FLOLAN PH 12	600	SULFACETAMIDE SODIUM-SULFUR	279,280
STERILE DILUENT FOR REMODULIN	600	SULFACETAMIDE-PREDNISOLONE	577
STERILE WATER FOR INJECTION	600	SULFACLEANSE 8/4	280
STERITALC	613	sulfadiazine	614
STIMATE	366	sulfamethoxazole-trimethoprim	67
STIMUFEND	422	SULFAMEZ WASH	280
STIOLTO RESPIMAT	82	SULFAMILYLON	292
STIRRING ROD/GLASS 12X1/4"	476	sulfasalazine	375
STIVARGA	175	SULFURATED LIME	306
STRAINER/STAINLESS STEEL/2.5"	476	sulindac	37
STRATA CTX	304	sumatriptan	510
STRATA MARK	304	sumatriptan succinate	510,511
STRATA TRIZ	307	SUMATRIPTAN SUCCINATE REFILL	510,511
STRATA XRT	304	sunitinib malate	176
STRATAGRAFT	307	SUNLENCA	222
STRAVIX	313	SUNOSI	9
STRAWBERRY (DIAGNOSTIC)	320	SUPER BI-MIX	240
STRENSIQ	355	SUPER QUAD-MIX	241

T.E.D. KNEE LENGTH/L-LONG	451	TAGRISSO	169
T.E.D. KNEE LENGTH/L-REGULAR	451	TAKHZYRO	413
T.E.D. KNEE LENGTH/LARGE	451	TALICIA	628
T.E.D. KNEE LENGTH/M-LONG	451	TALIVA	421
T.E.D. KNEE LENGTH/M-REGULAR	451	TALL RAGWEED	23
T.E.D. KNEE LENGTH/S-LONG	451	TALTZ	288
T.E.D. KNEE LENGTH/S-REGULAR	451	TALVEY	166
T.E.D. KNEE LENGTH/XL-LONG	451	TALZENNA	203
T.E.D. KNEE LENGTH/XL-REGULAR	451	tamoxifen citrate	148
T.E.D. THIGH LENGTH/L-LONG	452	tamsulosin hcl	382
T.E.D. THIGH LENGTH/L-REGULAR	452	TANDEM MOBI AUTOSOFT 30 KIT	467
T.E.D. THIGH LENGTH/L-SHORT	452	TANDEM MOBI AUTOSOFT XC KIT	467
T.E.D. THIGH LENGTH/M-LONG	452	TANDEM MOBI AUTOSOFT30 14PK23"	466
T.E.D. THIGH LENGTH/M-REGULAR	452	TANDEM MOBI AUTOSOFTXC 14PK23"	467
T.E.D. THIGH LENGTH/M-SHORT	452	TANDEM MOBI AUTOSOFTXC 14PK5"	467
T.E.D. THIGH LENGTH/S-LONG	452	TANDEM MOBI CARTRIDGE 2ML	467
T.E.D. THIGH LENGTH/S-REGULAR	452	TANDEM MOBI SYSTEM STARTER	464
T.E.D. THIGH LENGTH/S-SHORT	452	TANDEM MOBI TRUSTEEL SUPP KIT	467
T.R.U.E. TEST	329	TANDEM PLUS	424
T: SLIM X2 INS PMP/CONTROL 7.4	464	TANDEM T:SLIM ASFT 30 PK10 23"	467
T:FLEX T:LOCK CARTRIDGE 4.8ML	467	TANDEM T:SLIM ASFT 30 PK14 23"	467
T:SLIM X2 3ML CARTRIDGE	467	TANDEM T:SLIM ASFT XC PK10 23"	467
T:SLIM X2 BASAL-IQ PUMP	464	TANDEM T:SLIM ASFT XC PK14 23"	467
T:SLIM X2 CONTROL-IQ 7.7 PUMP	464	TANDEM T:SLIM TRUSTL PK10 23"	467
T:SLIM X2 CONTROL-IQ 7.8 PUMP	464	TAP-N-CLICK SILICONE PAD	476
T:SLIM X2 CONTROL-IQ PUMP	464	TARGRETIN	316
T:SLIM X2 INSULIN PMP BASAL6.4	464	TARON FORTE	424
T:SLIM X2 INSULIN PUMP	464	TARON-C DHA	539
T:SLIM X2/BASAL-IQ/ACC/INSTR	467	TARON-PREX	544
T:SLIM X2/CONTROL-IQ/ACC/INSTR	467	TARPEYO	265
TABLOID	154	TASIGNA	164
TABRECTA	173	tasimelteon	435
TACHOSIL	428	TAUVID	323
tacrolimus	529	tavaborole	305
tacrolimus (topical)	302	TAVALISSE	415
tadalafil	247,249,250	TAVNEOS	411
tadalafil (pulmonary hypertension)	247	TAYTULLA	259
TADLIQ	248	TAZAROTENE	283,287
TAFINLAR	166	tazarotene	287
tafluprost	580	TAZICEF	254
TAGITOL V	330	TAZVERIK	173

TB SYRINGE 1 ML	487	teriflunomide	605
TDVAX	621	TERIPARATIDE	360
TECARTUS	162	teriparatide	360
TECELRA	161	TERLIVAZ	366
TECENTRIQ	161	TESTOSTERONE	63,64
TECENTRIQ HYBREZA	183	testosterone	63,64
TECHNELITE	325	testosterone cypionate	64
TECHNET TC 99M SULFUR COLLOID	325	TESTOSTERONE CYPIONATE	64
TECHNETIUM TC 99M MEBROFENIN	324	TESTOSTERONE ENANTHATE	64
TECHNETIUM TC 99M MEDRONATE	325	TETANUS-DIPHThERIA TOXOIDS TD	621
TECHNETIUM TC 99M PYROPHOS	325	TETPIDTAR	300
TECHNETIUM TC 99M SESTAMIBI	324	tetrabenazine	604
TECVAYLI	166	TETRACAINE HCL	443,575
TEFLARO	256	tetracaine hcl	443
TEGLUTIK	551	tetracaine hcl (ophth)	575
TELFA AMD ISLAND DRESSING	459	tetracycline hcl	616
TELFA AMD NON-ADHERENT	459	TETRACYCLINE HCL	616
telmisartan	139	TETRIX	304
TELMISARTAN-AMLODIPINE	137	TEVIMBRA	160
telmisartan-amlodipine	137	TEZRULY	140
telmisartan-hydrochlorothiazide	138	TEZSPIRE	86
temazepam	433	THALLOUS CHLORIDE TL 201	324
TEMBEXA	228	THALOMID	521
TEMIXYS	221	THAM	512
TEMODAR	190	THE LIQUILIFT TRACE	520
temozolomide	190,191	THEO-24	87
TEMPO SMART BUTTON	459	theophylline	87
TEMPO WELCOME	459	THEOPHYLLINE ER	87
temsirolimus	174	thiamine hcl	640
TENCON	40	THIAMINE HCL-NACL	640
TENIPOSIDE	196	thioridazine hcl	218
TENIVAC	621	thiotepa	147
tenofovir disoproxil fumarate	225	thiothixene	220
TEPADINA	146,147	THRESHOLD IMT	501
TEPEZZA	355	THRESHOLD PEP	501
TEPMETKO	173	THRIVACIN 30	336
TEPYLUTE	147	THRIVACIN DETOX	336
terazosin hcl	140	THRIVITE RX	541
terbinafine hcl	126	THROMBATE III	414
terbutaline sulfate	83,84	THROMBI-GEL 10	427
terconazole vaginal	634	THROMBI-GEL 100	427

THROMBI-GEL 40	428	TOBRADEX ST	577
THROMBI-PAD	427	tobramycin	28
THROMBIN-JMI	429	TOBRAMYCIN	28
THROMBIN-JMI EPISTAXIS	429	tobramycin (ophth)	572
THROMBOGEN	429,430	TOBRAMYCIN SULFATE	28
THYMOGLOBULIN	525	tobramycin sulfate	28
THYROGEN	322	tobramycin-dexamethasone	577
THYROID	621	TOBRAMYCIN-VANCOMYCIN HCL	571
tiagabine hcl	100	TOFIDENCE	34
TIBSOVO	191	tolcapone	208
ticagrelor	411	TOLSURA	127
TICE BCG	186	tolterodine tartrate	629
TICOVAC	633	TOLVAPTAN	362,363
TIGECYCLINE	615	tolvaptan	362,363
tigecycline	615	TOMATO (DIAGNOSTIC)	321
TIGLUTIK	551	TOOMEY SYRINGE	489
timolol	567	TOPI-CLICK APPLICATOR	476
timolol maleate	232	TOPI-CLICK APPLICATOR MICRO	476
TIMOLOL MALEATE	232	TOPI-CLICK NOZZLE	476
timolol maleate (ophth)	567,568	TOPI-CLICK PERL APPLICATOR 4ML	476
TIMOLOL-BRIMON-DORZOL-BIMATOPR	568	TOPI-CLICK PERL DOSE LOAD 35ML	477
TIMOLOL-BRIMON-DORZOL-LATANOPR	568	TOPI-CLICK PERL VAGINAL DOSING	477
TIMOLOL-BRIMONIDINE-DORZOLAMID	568	TOPIDEX	268
TIMOLOL-DORZOLAMID-BIMATOPROST	568	topiramate	99
TIMOLOL-DORZOLAMID-LATANOPROST	568	TOPOTECAN HCL	205
TIMOTHY GRASS POLLEN ALLERGEN	23	topotecan hcl	205
tinidazole	67	TOPROL XL	231
tiopronin	385	toremifene citrate	148
tiotropium bromide monohydrate	84	TORISEL	174
TIP RECTAL/VAG W/PERFORATIONS	476	toremide	339
tirofiban hcl in sodium chloride	412	TOTALVISC	579
TISSEEL	427	TOTECT	188
TISSUEBLUE	579	TOXICOLOGY MED COLLECTION SYS	326
TIVDAK	161	TPN ELECTROLYTES	515
TIVICAY	223	TPOXX	228
TIVICAY PD	223	TRACE ELEMENTS 4/PEDIATRIC	520
tizanidine hcl	547	TRACLEER	247
TM-VITE RX	537	TRADJENTA	109
TNKASE	416	TRALEMENT	520
TOBAKIENT	332	tramadol hcl	59,60
TOBRADEX	577	TRAMADOL HCL	59,60

TRAMADOL HCL (ER BIPHASIC)	59	TRIAMCINOLONE-BUPIVACAINE	276
TRAMADOL HCL ER	59	triamterene	340
tramadol-acetaminophen	62	triamterene & hydrochlorothiazide	338
trandolapril	135	triazolam	433
TRANDOLAPRIL-VERAPAMIL HCL ER	133	TRICARE	540
tranexamic acid	428	TRICHOPHYTON MENTAG (DIAGNOST)	321
TRANEXAMIC ACID-NACL	428	TRICHOPHYTON MENTAGROPHYTES	24
tranexamic acid-sodium chloride	428	TRICITRASOL	90
TRANSCYTE	314	TRICITRATES	383
tranylcypromine sulfate	102	TRICON	424
TRANZGEL	524	trientine hcl	522
TRAUMEEL	525	TRIENTINE HCL	522
TRAVASOL	565	TRIESENCE	578
travoprost	580	TRIFERIC	423
TRAZIMERA	159	TRIFERIC AVNU	423
trazodone hcl	104	trifluoperazine hcl	218,219
TREANDA	145	TRIFLURIDINE	572
TREE MIX 9	24	TRIGELS-F FORTE	424
TRELEGY ELLIPTA	82	TRIHEXYPHENIDYL HCL	207,208
TRELSTAR MIXJECT	194	trihexyphenidyl hcl	207,208
TREMFYA	288,375	TRIJARDY XR	115
TREMFYA CROHNS INDUCTION	375	TRIKAFTA	612
TREMFYA ONE-PRESS	288	TRILOAN II SUIK	275
TREMFYA PEN	288,376	TRILOAN SUIK	275
treprostinil	244	trimethobenzamide hcl	124
TRESNI	35	TRIMETHOPRIM	67
tretinoin	283,284	trimethoprim	67
tretinoin (chemotherapy)	203	trimipramine maleate	107,108
TRETINOIN (EMOLLIENT)	284	TRIMO-SAN	634
TRETINOIN MICROSPHERE	284	TRINATAL RX 1	540
tretinoin microsphere	284	TRINATE	541
TRETINOIN MICROSPHERE PUMP	284	TRINAZ	541
TRETTEN	402	TRINTELLIX	105
TREXALL	152	TRIOSTAT	620
TRI-LUMA	297	TRIPHROCAPS	537
TRI-MIX	240	TRIPLE PMB	577
triamcinolone acetonide	272	TRIPLE PMK	577
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