

# Small Group Formulary

December 1, 2025



## Understanding your formulary

### What is a formulary?

A formulary is a list of prescribed medications chosen by your plan for their safety, cost and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. The formulary includes both brand-name and generic prescription medications approved by the U.S. Food and Drug Administration (FDA).

### How do I use my formulary?

You and your doctor can consult the formulary to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or brand name, and if special rules apply. Bring this list with you when you see your doctor. If you have questions on how your medication is covered, call the Customer Service number on the back of your ID card or visit [firstcarolinacare.com](http://firstcarolinacare.com).

### What are tiers?

Tiers are the different cost levels you pay for a medication. Generally, the higher your medication's tier, the more you'll pay out of pocket for it.

### When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equivalent becomes available.
- Medications may move to a higher tier or be excluded from coverage during the year as other formulary alternatives become available.

When a medication changes tiers, you may have to pay a different amount for that medication.

### Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or similar to another prescription or over-the-counter (OTC) medication.

### What if I don't agree with a decision about an excluded medication?

You (or your authorized representative) and your doctor can ask for a coverage request by calling the Customer Service number on the back of your ID card.

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### About this formulary

Where differences exist between this formulary and your benefit plan documents, the benefit plan documents rule. This may not be a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan documents provided by your employer or plan sponsor for full details.

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### **What is the difference between brand-name and generic medications?**

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent for a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. Except where prohibited by law, if you choose a brand-name medication after a generic version is available, you may pay the brand-name copayment plus the cost difference between the brand-name and generic medication.

### **What if my doctor writes a brand-name prescription?**

If your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent or lower-cost option is available and could be right for you. Generic medications are usually your lowest-cost option.

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### **Over-the-counter (OTC) medications**

An OTC medication may be the right treatment option for some conditions. Talk to your doctor about available OTC options. Even though these medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

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## Reading your formulary

The formulary gives you choices so you and your doctor can determine your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX) and generic medications in lowercase (for example, clobetasol).

### Tier Information

Using lower tier or preferred medications can help you pay your lowest out-of-pocket cost. Your plan may have multiple or no tiers. Your plan may have less than 6 drug tiers with some of the tiers listed below combined and available at the same copayment. For closed-formulary or restrictive formularies select medications may be excluded unless an exception is requested and approved. Details of your pharmacy benefits can be found in your plan documents. Please note: If you have a high-deductible plan, the tier cost levels will apply once you hit your deductible.

| Drug Tier                   | Drug Tier Description                               | Helpful Tips                                                                                       |
|-----------------------------|-----------------------------------------------------|----------------------------------------------------------------------------------------------------|
| <b>Preventive</b>           | <b>Brands and generics used for preventive care</b> | No out-of-pocket cost. Deductible does not apply                                                   |
| <b>Tier 1</b>               | <b>Preferred generics</b>                           | Low out-of-pocket cost                                                                             |
| <b>Tier 2</b>               | <b>Non-preferred generics</b>                       | Most generic drugs                                                                                 |
| <b>Tier 3</b>               | <b>Preferred brands</b>                             | Many brands have lower-cost generic options                                                        |
| <b>Tier 4</b>               | <b>Non-preferred brands</b>                         | Many brands have lower-cost generic options                                                        |
| <b>Tier 5</b>               | <b>Preferred specialty</b>                          | May be limited to a specialty pharmacy                                                             |
| <b>Tier 6</b>               | <b>Non-preferred specialty</b>                      | May be limited to a specialty pharmacy                                                             |
| <b>General Medical (GM)</b> | <b>Medical benefit</b>                              | Provided and administered in a doctor's office or hospital and not covered by the pharmacy benefit |

### Drug list Information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan determines how these medications may be covered for you.

|            |                                                                                                                                                                          |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>AL</b>  | <b>Age Limit</b> – Based on government or manufacturer guidelines, these medications are only covered for certain age groups.                                            |
| <b>PA</b>  | <b>Prior Authorization</b> – Your doctor is required to provide additional information to determine coverage.                                                            |
| <b>PV</b>  | <b>Preventive</b> – These medications are covered at \$0 under preventive benefit.                                                                                       |
| <b>PV*</b> | <b>Preventive*</b> – These medications may be covered as preventive care if you meet the guidelines based on your plan.                                                  |
| <b>QL</b>  | <b>Quantity Limit</b> – Medication may be limited to a certain quantity.                                                                                                 |
| <b>ST</b>  | <b>Step Therapy</b> – Trial of lower-cost medication(s) is required before a higher-cost medication can be covered.                                                      |
| <b>WL</b>  | <b>Weight Loss Medications</b> – These medications may be covered under your specific plan, may be limited to a 30 day supply. Please check your benefit plan documents. |

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| Drug Name                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------|-----------|-----------------------|
| <b>Analgesics - Drugs for Pain and Inflammation</b>          |           |                       |
| ANAPROX DS ORAL TABLET 550 MG                                | 4         | Brand penalty applies |
| ARTHROTEC ORAL TABLET DELAYED RELEASE 50-0.2 MG, 75-0.2 MG   | 4         | Brand penalty applies |
| aspirin 81 oral tablet delayed release 81 mg                 | PV        |                       |
| aspirin adult low dose oral tablet delayed release 81 mg     | PV        |                       |
| aspirin adult low strength oral tablet delayed release 81 mg | PV        |                       |
| aspirin childrens oral tablet chewable 81 mg                 | PV        |                       |
| aspirin ec adult low dose oral tablet delayed release 81 mg  | PV        |                       |
| aspirin ec low dose oral tablet delayed release 81 mg        | PV        |                       |
| aspirin ec low strength oral tablet delayed release 81 mg    | PV        |                       |
| aspirin low dose oral tablet chewable 81 mg                  | PV        |                       |
| aspirin low dose oral tablet delayed release 81 mg           | PV        |                       |
| aspirin oral tablet chewable 81 mg                           | PV        |                       |
| aspirin oral tablet delayed release 81 mg                    | PV        |                       |
| aspirin regimen oral tablet delayed release 81 mg            | PV        |                       |

|                                                                         |    |                       |
|-------------------------------------------------------------------------|----|-----------------------|
| CALDOLOR INTRAVENOUS SOLUTION 800 MG/8ML                                | GM |                       |
| CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG                     | 4  | Brand penalty applies |
| celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg                    | 2  |                       |
| DAYPRO ORAL TABLET 600 MG                                               | 4  | Brand penalty applies |
| DICLOFENAC PATCH EXTERNAL PATCH 1.3 %                                   | 4  | ST                    |
| diclofenac potassium oral tablet 50 mg                                  | 2  |                       |
| diclofenac sodium er oral tablet extended release 24 hour 100 mg        | 2  |                       |
| diclofenac sodium external gel 1 %                                      | 2  |                       |
| diclofenac sodium oral tablet delayed release 25 mg                     | 2  |                       |
| diclofenac sodium oral tablet delayed release 50 mg, 75 mg              | 1  |                       |
| diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg | 2  |                       |
| DICLOSTREAM EXTERNAL THERAPY PACK 1.5-10 %                              | 4  |                       |
| DICLOVIX EXTERNAL KIT 1.5 & 2-2.5-4 %                                   | 4  |                       |
| diflunisal oral tablet 500 mg                                           | 2  |                       |
| DIMENTHO EXTERNAL THERAPY PACK 1.5 & 10 %                               | 4  |                       |

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| Drug Name                                                               | Drug Tier | Notes                     |
|-------------------------------------------------------------------------|-----------|---------------------------|
| DUEXIS ORAL TABLET 800-26.6 MG                                          | 4         | PA; Brand penalty applies |
| EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG, 500 MG                  | 4         | Brand penalty applies     |
| ec-naproxen oral tablet delayed release 375 mg, 500 mg                  | 2         |                           |
| ENOVARX-IBUPROFEN EXTERNAL CREAM 10 %                                   | 4         |                           |
| etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg | 2         |                           |
| etodolac oral capsule 200 mg, 300 mg                                    | 2         |                           |
| etodolac oral tablet 400 mg, 500 mg                                     | 2         |                           |
| FBL KIT EXTERNAL CREAM 15-4-5 %                                         | 4         |                           |
| fenoprofen calcium oral capsule 200 mg, 400 mg                          | 2         |                           |
| fenoprofen calcium oral tablet 600 mg                                   | 2         |                           |
| FENOPRON ORAL CAPSULE 300 MG                                            | 3         |                           |
| FLECTOR EXTERNAL PATCH 1.3 %                                            | 4         | ST                        |
| flurbiprofen oral tablet 100 mg, 50 mg                                  | 2         |                           |
| ft aspirin low dose oral tablet delayed release 81 mg                   | PV        |                           |
| ft aspirin oral tablet chewable 81 mg                                   | PV        |                           |
| goodsense aspirin low dose oral tablet delayed release 81 mg            | PV        |                           |

| Drug Name                                                   | Drug Tier | Notes                 |
|-------------------------------------------------------------|-----------|-----------------------|
| ibuprofen lysine intravenous solution 10 mg/ml              | GM        |                       |
| ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml           | 2         |                       |
| ibuprofen oral tablet 400 mg, 600 mg, 800 mg                | 2         |                       |
| ibuprofen-famotidine oral tablet 800-26.6 mg                | 2         | PA                    |
| INDOCIN ORAL SUSPENSION 25 MG/5ML                           | 4         | Brand penalty applies |
| INDOCIN RECTAL SUPPOSITORY 50 MG                            | 3         | Brand penalty applies |
| indomethacin er oral capsule extended release 75 mg         | 2         |                       |
| indomethacin oral capsule 25 mg, 50 mg                      | 2         |                       |
| indomethacin oral suspension 25 mg/5ml                      | 2         |                       |
| indomethacin rectal suppository 50 mg                       | 2         |                       |
| indomethacin sodium intravenous solution reconstituted 1 mg | GM        |                       |
| ketoprofen er oral capsule extended release 24 hour 200 mg  | 2         |                       |
| ketoprofen oral capsule 25 mg, 50 mg                        | 2         |                       |
| ketorolac tromethamine +rfd injection solution 30 mg/ml     | GM        |                       |
| ketorolac tromethamine injection solution 15 mg/ml          | GM        |                       |

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| Drug Name                                                                       | Drug Tier | Notes                  |
|---------------------------------------------------------------------------------|-----------|------------------------|
| KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML                          | 4         |                        |
| ketorolac tromethamine intramuscular solution 60 mg/2ml                         | GM        |                        |
| ketorolac tromethamine oral tablet 10 mg                                        | 2         | QL (20 EA per 30 days) |
| ketorolac tromethamine solution 30 mg/ml injection                              | GM        |                        |
| KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION                              | GM        |                        |
| KETOROLAC-BUPIV-KETAMINE INJECTION SOLUTION PREFILLED SYRINGE 60-150-60 MG/50ML | GM        |                        |
| KETOROLAC-ROPIV-KETAMINE INJECTION SOLUTION PREFILLED SYRINGE 15-100-30 MG/50ML | GM        |                        |
| KIPROFEN ORAL CAPSULE 25 MG                                                     | 4         |                        |
| LODINE ORAL TABLET 400 MG                                                       | 4         | Brand penalty applies  |
| LURBIPR ORAL TABLET 100 MG                                                      | 4         | Brand penalty applies  |
| LURBIRO ORAL TABLET 100 MG                                                      | 4         | Brand penalty applies  |
| meclofenamate sodium oral capsule 100 mg, 50 mg                                 | 2         |                        |
| mefenamic acid oral capsule 250 mg                                              | 2         |                        |

| Drug Name                                                                      | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------|-----------|-----------------------|
| MELOXICAM ORAL SUSPENSION 7.5 MG/5ML                                           | 4         |                       |
| meloxicam oral tablet 15 mg, 7.5 mg                                            | 1         |                       |
| mm aspirin oral tablet delayed release 81 mg                                   | PV        |                       |
| nabumetone oral tablet 500 mg, 750 mg                                          | 2         |                       |
| NALFON ORAL CAPSULE 400 MG                                                     | 4         | Brand penalty applies |
| NALFON ORAL TABLET 600 MG                                                      | 4         | Brand penalty applies |
| NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG           | 4         | Brand penalty applies |
| NAPROSYN ORAL SUSPENSION 125 MG/5ML                                            | 4         | Brand penalty applies |
| NAPROSYN ORAL TABLET 500 MG                                                    | 4         | Brand penalty applies |
| naproxen dr oral tablet delayed release 500 mg                                 | 2         |                       |
| naproxen oral suspension 125 mg/5ml                                            | 2         |                       |
| naproxen oral tablet 250 mg, 375 mg, 500 mg                                    | 2         |                       |
| naproxen oral tablet delayed release 375 mg, 500 mg                            | 2         |                       |
| naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg, 750 mg | 2         |                       |
| naproxen sodium oral tablet 275 mg, 550 mg                                     | 2         |                       |

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| Drug Name                                                                 | Drug Tier | Notes                     |
|---------------------------------------------------------------------------|-----------|---------------------------|
| naproxen-esomeprazole mg oral tablet delayed release 375-20 mg, 500-20 mg | 2         | PA                        |
| NEOPROFEN INTRAVENOUS SOLUTION 10 MG/ML                                   | GM        |                           |
| oxaprozin oral tablet 600 mg                                              | 2         |                           |
| piroxicam oral capsule 10 mg, 20 mg                                       | 2         |                           |
| salsalate oral tablet 500 mg, 750 mg                                      | 2         |                           |
| ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE 81 MG                             | PV        |                           |
| ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG                      | PV        |                           |
| sulindac oral tablet 150 mg, 200 mg                                       | 2         |                           |
| TOLECTIN 600 ORAL TABLET 600 MG                                           | 4         |                           |
| tolmetin sodium oral capsule 400 mg                                       | 2         |                           |
| tolmetin sodium oral tablet 600 mg                                        | 2         |                           |
| VIMOVO ORAL TABLET DELAYED RELEASE 375-20 MG, 500-20 MG                   | 4         | PA; Brand penalty applies |
| XIFYRM INTRAVENOUS SOLUTION 30 MG/ML                                      | GM        |                           |
| ZYNRELEF INJECTION SOLUTION 200-6 MG/7ML, 400-12 MG/14ML                  | GM        |                           |
| <b>Analgesics - Drugs for Pain</b>                                        |           |                           |
| acetaminophen intravenous solution 10 mg/ml, 1000 mg/100ml                | GM        |                           |

| Drug Name                                                                                    | Drug Tier | Notes                  |
|----------------------------------------------------------------------------------------------|-----------|------------------------|
| ACETAMINOPHEN INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML                             | GM        |                        |
| acetaminophen-codeine oral solution 120-12 mg/5ml, 300-30 mg/12.5ml                          | 2         |                        |
| acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg                            | 2         |                        |
| apap-caff-dihydrocodeine oral capsule 320.5-30-16 mg                                         | 2         |                        |
| ascomp-codeine oral capsule 50-325-40-30 mg                                                  | 2         |                        |
| bac (butalbital-acetamin-caff) oral tablet 50-325-40 mg                                      | 2         |                        |
| BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG             | 4         | QL (60 EA per 30 days) |
| BUPAP ORAL TABLET 50-300 MG                                                                  | 4         | Brand penalty applies  |
| buprenorphine hcl injection solution 0.3 mg/ml                                               | GM        |                        |
| buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr | 2         |                        |
| butalbital-acetaminophen capsule 50-300 mg oral                                              | 2         |                        |
| BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL                                              | 2         |                        |

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| Drug Name                                                                              | Drug Tier | Notes                 | Drug Name                                                                                                     | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------|-----------|-----------------------|---------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| butalbital-acetaminophen oral tablet 50-300 mg, 50-325 mg                              | 2         |                       | DILAUDID INJECTION SOLUTION 1 MG/ML, 2 MG/ML                                                                  | GM        |                       |
| butalbital-apap-caff-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg                 | 2         |                       | DILAUDID ORAL LIQUID 1 MG/ML                                                                                  | 4         | Brand penalty applies |
| butalbital-apap-caffeine oral capsule 50-300-40 mg, 50-325-40 mg                       | 2         |                       | DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG                                                                         | 4         | Brand penalty applies |
| BUTALBITAL-APAP-CAFFEINE ORAL SOLUTION 50-325-40 MG/15ML                               | 4         |                       | DSUVIA SUBLINGUAL TABLET SUBLINGUAL 30 MCG                                                                    | 4         |                       |
| butalbital-apap-caffeine oral tablet 50-325-40 mg                                      | 2         |                       | DURACLON EPIDURAL SOLUTION 100 MCG/ML                                                                         | 6         | Specialty Medical     |
| butalbital-asa-caff-codeine oral capsule 50-325-40-30 mg                               | 2         |                       | DURAMORPH INJECTION SOLUTION 0.5 MG/ML, 1 MG/ML                                                               | GM        |                       |
| butalbital-aspirin-caffeine oral capsule 50-325-40 mg                                  | 2         |                       | endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg                                               | 2         |                       |
| butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml                               | GM        |                       | ESGIC ORAL CAPSULE 50-325-40 MG                                                                               | 4         | Brand penalty applies |
| butorphanol tartrate nasal solution 10 mg/ml                                           | 2         |                       | ESGIC ORAL TABLET 50-325-40 MG                                                                                | 4         | Brand penalty applies |
| BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR | 4         | Brand penalty applies | FENTANYL CIT-BUPIVACAINE HCL EPIDURAL SOLUTION 2-0.125 MCG/ML-%                                               | GM        |                       |
| clonidine hcl (analgesia) epidural solution 100 mcg/ml, 500 mcg/ml                     | 6         | Specialty Medical     | fentanyl citrate (pf) injection solution 100 mcg/2ml, 1000 mcg/20ml, 250 mcg/5ml, 2500 mcg/50ml, 500 mcg/10ml | GM        |                       |
| codeine sulfate oral tablet 15 mg, 30 mg, 60 mg                                        | 2         |                       | fentanyl citrate (pf) injection solution prefilled syringe 25 mcg/0.5ml, 50 mcg/ml                            | GM        |                       |
| DEMEROL INJECTION SOLUTION 100 MG/ML, 25 MG/ML, 50 MG/ML, 75 MG/ML                     | GM        |                       |                                                                                                               |           |                       |

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| Drug Name                                                                                                                                                                                                                             | Drug Tier | Notes | Drug Name                                                                                                                                                                                                          | Drug Tier | Notes |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg                                                                                                                                    | 2         | PA    | FENTANYL CITRATE-NACL INJECTION SOLUTION 1-0.9 MG/100ML-%, 2.5-0.9 MG/250ML-%                                                                                                                                      | GM        |       |
| FENTANYL CITRATE BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG                                                                                                                                                            | 4         | PA    | FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/100ML-%, 1-0.9 MG/50ML-%, 1.25-0.9 MG/250ML-%, 2-0.9 MG/100ML-%, 2.5-0.9 MG/100ML-%, 2.5-0.9 MG/250ML-%, 2.5-0.9 MG/50ML-%, 5-0.9 MG/100ML-%, 5-0.9 MG/250ML-% | GM        |       |
| FENTANYL CITRATE INJECTION SOLUTION 1500 MCG/30ML                                                                                                                                                                                     | GM        |       | FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 10-0.9 MCG/ML-%, 100-0.9 MCG/10ML-%, 1000-0.9 MCG/50ML-%, 2500-0.9 MCG/50ML-%, 5-0.9 MCG/ML-%, 550-0.9 MCG/55ML-%                   | GM        |       |
| FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE 250 MCG/5ML                                                                                                                                                                     | GM        |       | FENTANYL CIT-ROPIVACAINE-NACL EPIDURAL SOLUTION 0.2-0.1-0.9 MG/100ML-%, 0.3-0.2-0.9 MG/150ML-%, 0.4-0.1-0.9 MG/200ML-%, 0.4-0.2-0.9 MG/200ML-%, 0.5-0.1-0.9 MG/250ML-%, 0.5-0.2-0.9 MG/250ML-%                     | GM        |       |
| FENTANYL CITRATE INTRAVENOUS SOLUTION 1500 MCG/30ML, 2500 MCG/50ML, 5000 MCG/100ML                                                                                                                                                    | GM        |       | FENTANYL CIT-ROPIVACAINE-NACL EPIDURAL SOLUTION PREFILLED SYRINGE 0.1-0.1-0.9 MG/50ML-%                                                                                                                            | GM        |       |
| FENTANYL CITRATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 10 MCG/ML, 100 MCG/10ML, 100 MCG/2ML, 1000 MCG/20ML, 1250 MCG/25ML, 1500 MCG/30ML, 20 MCG/2ML, 250 MCG/5ML, 2500 MCG/50ML, 2750 MCG/55ML, 50 MCG/5ML, 50 MCG/ML, 500 MCG/50ML | GM        |       |                                                                                                                                                                                                                    |           |       |
| fentanyl citrate solution prefilled syringe 100 mcg/2ml injection                                                                                                                                                                     | GM        |       |                                                                                                                                                                                                                    |           |       |
| FENTANYL CITRATE SOLUTION PREFILLED SYRINGE 100 MCG/2ML INJECTION                                                                                                                                                                     | GM        |       |                                                                                                                                                                                                                    |           |       |

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| Drug Name                                                                                                                                                                                                                                                                                                  | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr                                                                                                                                                                           | 2         | PA                    |
| FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION 0.2-0.0625-0.9 MG/100ML-%, 0.2-0.1-0.9 MG/100ML-%, 0.2-0.125-0.9 MG/100ML-%, 0.5-0.04-0.9 MG/100ML-%, 0.5-0.0625-0.9 MG/250ML-%, 0.5-0.075-0.9 MG/100ML-%, 0.5-0.1-0.9 MG/250ML-%, 0.5-0.125-0.9 MG/250ML-%, 0.8-0.1667-0.9 MG/200ML-%, 1-0.125-0.9 MG/250ML-% | GM        |                       |
| FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION PREFILLED SYRINGE 0.1-0.125-0.9 MG/50ML-%                                                                                                                                                                                                                      | GM        |                       |
| FENTANYL-BUPIVACAINE-NACL INJECTION SOLUTION 2-0.125-0.9 MCG/ML-%                                                                                                                                                                                                                                          | GM        |                       |
| FENTANYL-ROPIVACAINE-NACL EPIDURAL SOLUTION 0.2-0.1-0.9 MG/100ML-%                                                                                                                                                                                                                                         | GM        |                       |
| FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG                                                                                                                                                                                                                                          | 4         | PA                    |
| FIORICET ORAL CAPSULE 50-300-40 MG                                                                                                                                                                                                                                                                         | 4         | Brand penalty applies |

| Drug Name                                                                                                              | Drug Tier | Notes                      |
|------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG                                                                          | 4         | Brand penalty applies      |
| hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg               | 2         | PA; QL (60 EA per 30 days) |
| hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg     | 2         | PA                         |
| hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml | 2         |                            |
| hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 2.5-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg     | 2         |                            |
| hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg                                                      | 2         |                            |
| hydromorphone hcl er oral tablet extended release 24 hour 12 mg, 16 mg, 32 mg, 8 mg                                    | 2         | PA; QL (60 EA per 30 days) |
| hydromorphone hcl injection solution 0.25 mg/0.5ml, 2 mg/ml, 4 mg/ml                                                   | GM        |                            |
| HYDROMORPHONE HCL INJECTION SOLUTION 0.5 MG/ML                                                                         | GM        |                            |
| HYDROMORPHONE HCL INTRAVENOUS SOLUTION 0.2 MG/ML                                                                       | GM        |                            |
| hydromorphone hcl oral liquid 1 mg/ml                                                                                  | 2         |                            |

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| Drug Name                                                                                                 | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| methadone hcl intensol oral concentrate 10 mg/ml                                                          | 2         |                       |
| methadone hcl oral concentrate 10 mg/ml                                                                   | 2         |                       |
| methadone hcl oral solution 10 mg/5ml, 5 mg/5ml                                                           | 2         |                       |
| methadone hcl oral tablet 10 mg, 5 mg                                                                     | 2         |                       |
| methadone hcl oral tablet soluble 40 mg                                                                   | 2         |                       |
| METHADONE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/ML-%, 10-0.8 MG/ML-%        | GM        |                       |
| METHADOSE ORAL CONCENTRATE 10 MG/ML                                                                       | 4         | Brand penalty applies |
| methadose oral tablet soluble 40 mg                                                                       | 2         |                       |
| METHADOSE SUGAR-FREE ORAL CONCENTRATE 10 MG/ML                                                            | 4         | Brand penalty applies |
| mitigo injection solution 200 mg/20ml (10 mg/ml), 500 mg/20ml (25 mg/ml)                                  | GM        |                       |
| morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml                                         | 2         |                       |
| morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 5 mg/ml, 8 mg/ml | GM        |                       |
| morphine sulfate (pf) intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml                            | GM        |                       |

| Drug Name                                                                                                           | Drug Tier | Notes |
|---------------------------------------------------------------------------------------------------------------------|-----------|-------|
| morphine sulfate er beads oral capsule extended release 24 hour 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg           | 2         | PA    |
| morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg          | 2         | PA    |
| morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg                                | 2         | PA    |
| MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML                                                                         | GM        |       |
| morphine sulfate injection solution 2 mg/ml, 4 mg/ml                                                                | GM        |       |
| MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML                                                            | GM        |       |
| morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml                                                    | GM        |       |
| morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml                                                                 | 2         |       |
| morphine sulfate oral tablet 15 mg, 30 mg                                                                           | 2         |       |
| morphine sulfate rectal suppository 10 mg, 20 mg, 30 mg, 5 mg                                                       | 2         |       |
| MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 1-0.9 MG/ML-%, 100-0.9 MG/100ML-%, 250-0.9 MG/50ML-%, 500-0.9 MG/100ML-% | GM        |       |

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| Drug Name                                                                                                                                                       | Drug Tier | Notes                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------|
| MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/ML-%, 150-0.9 MG/30ML-%, 2-0.9 MG/ML-%, 30-0.9 MG/30ML-%, 4-0.9 MG/ML-%, 55-0.9 MG/55ML-% | GM        |                           |
| MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 200 MG, 30 MG, 60 MG                                                                                      | 4         | PA; Brand penalty applies |
| nalbuphine hcl injection solution 10 mg/ml, 20 mg/ml                                                                                                            | GM        |                           |
| NALOCET ORAL TABLET 2.5-300 MG                                                                                                                                  | 4         |                           |
| NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG                                                                           | 4         | PA                        |
| NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG                                                                                                                        | 4         | ST                        |
| OLINVYK INTRAVENOUS SOLUTION 1 MG/ML, 2 MG/2ML, 30 MG/30ML                                                                                                      | GM        |                           |
| OXAYDO ORAL TABLET 5 MG, 7.5 MG                                                                                                                                 | 4         | PA                        |
| OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG                                                                              | 4         | PA                        |
| oxycodone hcl oral capsule 5 mg                                                                                                                                 | 2         |                           |
| oxycodone hcl oral concentrate 100 mg/5ml                                                                                                                       | 2         |                           |
| oxycodone hcl oral solution 5 mg/5ml                                                                                                                            | 2         |                           |

| Drug Name                                                                                               | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg                                              | 2         |                       |
| OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT 10 MG, 15 MG, 30 MG, 5 MG                                     | 4         |                       |
| OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML                                                      | 4         |                       |
| OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG                         | 4         |                       |
| oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg                         | 2         |                       |
| OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG        | 4         | PA                    |
| oxymorphone hcl er oral tablet extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg | 2         | PA                    |
| oxymorphone hcl oral tablet 10 mg, 5 mg                                                                 | 2         |                       |
| pentazocine-naloxone hcl oral tablet 50-0.5 mg                                                          | 2         |                       |
| PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG                                        | 4         | Brand penalty applies |

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| Drug Name                                                                              | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------|-----------|-----------------------|
| PRIALT INTRATHECAL SOLUTION 100 MCG/ML, 500 MCG/20ML, 500 MCG/5ML                      | GM        |                       |
| PROLATE ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG                                    | 4         |                       |
| remifentanyl hcl intravenous solution reconstituted 1 mg, 2 mg, 5 mg                   | GM        |                       |
| ROXICODONE ORAL TABLET 15 MG, 30 MG                                                    | 4         | Brand penalty applies |
| ROXYBOND ORAL TABLET ABUSE-DETERRENT 10 MG, 15 MG, 30 MG, 5 MG                         | 4         |                       |
| sufentanil citrate intravenous solution 100 mcg/2ml, 250 mcg/5ml, 50 mcg/ml            | GM        |                       |
| TENCON ORAL TABLET 50-325 MG                                                           | 4         |                       |
| tramadol hcl (er biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg | 2         | ST                    |
| tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg            | 2         | ST                    |
| tramadol hcl oral tablet 100 mg, 50 mg, 75 mg                                          | 2         |                       |
| tramadol-acetaminophen oral tablet 37.5-325 mg                                         | 2         |                       |
| TREZIX ORAL CAPSULE 320.5-30-16 MG                                                     | 4         | Brand penalty applies |
| ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG                             | GM        |                       |

| Drug Name                                                                             | Drug Tier | Notes |
|---------------------------------------------------------------------------------------|-----------|-------|
| XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG | 4         | PA    |
| <b>Anesthetics</b>                                                                    |           |       |
| AGONEAZE EXTERNAL KIT 2.5-2.5 %                                                       | 4         |       |
| ANODYNE LPT EXTERNAL KIT 2.5-2.5 %                                                    | 4         |       |
| ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE 4 %-1:100000                           | GM        |       |
| bupivacaine fisiopharma injection solution 0.5 %, 2.5 mg/ml                           | GM        |       |
| bupivacaine hcl (pf) injection solution 0.25 %, 0.5 %, 0.75 %                         | GM        |       |
| BUPIVACAINE HCL INJECTION SOLUTION 0.125 %                                            | GM        |       |
| BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.125 % (50 ML), 0.25 % (10 ML)  | GM        |       |
| bupivacaine hcl solution 0.25 % injection                                             | GM        |       |
| BUPIVACAINE HCL SOLUTION 0.25 % INJECTION                                             | GM        |       |
| bupivacaine hcl solution 0.5 % injection                                              | GM        |       |
| BUPIVACAINE HCL SOLUTION 0.5 % INJECTION                                              | GM        |       |
| BUPIVACAINE HCL-NACL EPIDURAL SOLUTION 0.125-0.9 %                                    | GM        |       |

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| Drug Name                                                                       | Drug Tier | Notes |
|---------------------------------------------------------------------------------|-----------|-------|
| BUPIVACAINE HCL-NACL EPIDURAL SOLUTION PREFILLED SYRINGE 0.25-0.9 %             | GM        |       |
| bupivacaine in dextrose intrathecal solution 0.75-8.25 %                        | GM        |       |
| bupivacaine spinal intrathecal solution 0.75-8.25 %                             | GM        |       |
| bupivacaine-epinephrine (pf) injection solution 0.25% -1:200000, 0.5% -1:200000 | GM        |       |
| bupivacaine-epinephrine solution 0.25% -1:200000 injection                      | GM        |       |
| BUPIVACAINE-EPINEPHRINE SOLUTION 0.25% -1:200000 INJECTION                      | GM        |       |
| bupivacaine-epinephrine solution 0.5% -1:200000 injection                       | GM        |       |
| BUPIVACAINE-EPINEPHRINE SOLUTION 0.5% -1:200000 INJECTION                       | GM        |       |
| CETACAINE EXTERNAL AEROSOL 2-2-14 %                                             | GM        |       |
| chloroprocaine hcl (pf) injection solution 2 %, 3 %                             | GM        |       |
| CLOROTEKAL INTRATHECAL SOLUTION 50 MG/5ML                                       | GM        |       |
| COCAINE HCL NASAL SOLUTION 40 MG/ML                                             | GM        |       |
| DIABECIN HR EXTERNAL CREAM 4.12-0.13 %                                          | 4         |       |
| ethyl chloride external aerosol                                                 | 2         |       |

| Drug Name                                                                                                      | Drug Tier | Notes                  |
|----------------------------------------------------------------------------------------------------------------|-----------|------------------------|
| EXPAREL INJECTION SUSPENSION 1.3 %                                                                             | GM        |                        |
| glydo external prefilled syringe 2 %                                                                           | 2         |                        |
| GOPRELTO NASAL SOLUTION 40 MG/ML                                                                               | GM        |                        |
| HURRI-FREEZE MEDIUM STREAM EXTERNAL AEROSOL                                                                    | GM        |                        |
| HURRI-FREEZE MIST SPRAY EXTERNAL AEROSOL                                                                       | GM        |                        |
| L.E.T. (RACEPINEPHRINE) EXTERNAL SOLUTION 4-0.05-0.5 %                                                         | GM        |                        |
| LETS KIT                                                                                                       | 4         |                        |
| LEVATIO EXTERNAL PATCH 0.03-5 %                                                                                | 4         |                        |
| LIDO BDK EXTERNAL KIT 2.5-2.5 %                                                                                | 4         |                        |
| lidocaine external ointment 5 %                                                                                | 2         | QL (50 GM per 30 days) |
| lidocaine external patch 5 %                                                                                   | 2         |                        |
| LIDOCAINE HCL (BUFFERED) INJECTION SOLUTION PREFILLED SYRINGE 100 MG/10ML                                      | GM        |                        |
| LIDOCAINE HCL (CARDIAC) INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML, 100 MG/5ML, 200 MG/10ML, 60 MG/3ML | GM        |                        |
| lidocaine hcl (cardiac) intravenous solution prefilled syringe 50 mg/5ml                                       | GM        |                        |

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| Drug Name                                                                                      | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------|-----------|-------|
| lidocaine hcl (cardiac) pf intravenous solution 100 mg/5ml                                     | GM        |       |
| lidocaine hcl (cardiac) pf intravenous solution prefilled syringe 100 mg/5ml, 50 mg/5ml        | GM        |       |
| lidocaine hcl (pf) injection solution 0.5 %, 1 %, 1.5 %, 2 %, 4 %                              | GM        |       |
| lidocaine hcl external cream 3 %                                                               | 2         |       |
| lidocaine hcl external lotion 3 %                                                              | 2         |       |
| lidocaine hcl external solution 4 %                                                            | 2         |       |
| lidocaine hcl injection solution 0.5 %                                                         | GM        |       |
| LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/10ML, 200 MG/10ML, 9 MG/ML | GM        |       |
| lidocaine hcl solution 1 % injection                                                           | GM        |       |
| LIDOCAINE HCL SOLUTION 1 % INJECTION                                                           | GM        |       |
| lidocaine hcl solution 2 % injection                                                           | GM        |       |
| LIDOCAINE HCL SOLUTION 2 % INJECTION                                                           | GM        |       |
| lidocaine hcl urethral/mucosal external gel 2 %                                                | 2         |       |
| lidocaine hcl urethral/mucosal external prefilled syringe 2 %                                  | 2         |       |

| Drug Name                                                                                        | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------|-----------|-----------------------|
| LIDOCAINE HCL-TETRACAINE HCL INJECTION SOLUTION 0.4-0.2 %                                        | GM        |                       |
| lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-%                                   | GM        |                       |
| LIDOCAINE(BUFFERD)-EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.5 %-1:100000, 1 %-1:100000 | GM        |                       |
| LIDOCAINE-EPINEPHRINE (3 ML) INJECTION SOLUTION PREFILLED SYRINGE 0.5 %-1:100000                 | GM        |                       |
| lidocaine-epinephrine (pf) injection solution 1.5 %-1:200000, 2 %-1:200000                       | GM        |                       |
| lidocaine-epinephrine injection solution 0.5 %-1:200000, 2 %-1:100000                            | GM        |                       |
| LIDOCAINE-EPINEPHRINE INJECTION SOLUTION 2 %-1:200000                                            | GM        |                       |
| lidocaine-epinephrine solution 1 %-1:100000 injection                                            | GM        |                       |
| LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION                                            | GM        |                       |
| lidocaine-prilocaine external cream 2.5-2.5 %                                                    | 2         |                       |
| lidocaine-prilocaine external kit 2.5-2.5 %                                                      | 2         |                       |
| LIDOCAN EXTERNAL PATCH 5 %                                                                       | 4         | Brand penalty applies |

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| Drug Name                                                                                    | Drug Tier | Notes                 | Drug Name                                                       | Drug Tier | Notes                  |
|----------------------------------------------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------|-----------|------------------------|
| LIDODERM EXTERNAL PATCH 5 %                                                                  | 4         | Brand penalty applies | NESACAINE INJECTION SOLUTION 1 %, 2 %                           | GM        |                        |
| LIDOPIN EXTERNAL CREAM 3 %                                                                   | 4         |                       | NESACAINE-MPF INJECTION SOLUTION 2 %, 3 %                       | GM        |                        |
| LIDO-RACEPINEPHRINE-TETRACAINE EXTERNAL SOLUTION 4-0.05-0.5 %                                | GM        |                       | NUMBRINO NASAL SOLUTION 40 MG/ML                                | GM        |                        |
| LIDO-SORB EXTERNAL LOTION 3 %                                                                | 4         |                       | ORABLOC INJECTION SOLUTION CARTRIDGE 4 %-1:100000, 4 %-1:200000 | GM        |                        |
| LIDOTHOL EXTERNAL PATCH 4-1 %                                                                | 4         |                       | PAINGO KFT EXTERNAL KIT 2.5-2.5-10-30 %                         | GM        |                        |
| LIDOTRAL EXTERNAL LIQUID 2 %                                                                 | 4         |                       | PLIAGLIS EXTERNAL CREAM 7-7 %                                   | 4         |                        |
| LIVIXIL PAK EXTERNAL KIT 2.5-2.5 %                                                           | 4         |                       | POLOCAINE INJECTION SOLUTION 1 %, 2 %                           | GM        |                        |
| MARCAINE INJECTION SOLUTION 0.25 %, 0.5 %, 0.75 %                                            | GM        |                       | POLOCAINE-MPF INJECTION SOLUTION 1 %, 1.5 %, 2 %                | GM        |                        |
| MARCAINE PRESERVATIVE FREE INJECTION SOLUTION 0.25 %, 0.5 %, 0.75 %                          | GM        |                       | POSIMIR INJECTION SOLUTION 660 MG/5ML                           | GM        |                        |
| MARCAINE SPINAL INTRATHECAL SOLUTION 0.75-8.25 %                                             | GM        |                       | premium lidocaine external ointment 5 %                         | 2         | QL (50 GM per 30 days) |
| MARCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.25-1:200000 %, 0.5% -1:200000    | GM        |                       | RECK SOLUTION PREFILLED SYRINGE 123-0.25-0.04- 15 MG/50ML       | GM        |                        |
| MARCAINE/EPINEPHRINE PF INJECTION SOLUTION 0.25% - 1:200000, 0.25-1:200000 %, 0.5% -1:200000 | GM        |                       | RELADOR PAK EXTERNAL KIT 2.5-2.5 %                              | 4         |                        |
| NAROPIN INJECTION SOLUTION 10 MG/ML, 2 MG/ML, 5 MG/ML, 7.5 MG/ML                             | GM        |                       | RELADOR PAK PLUS EXTERNAL KIT 2.5-2.5 %                         | 4         |                        |
|                                                                                              |           |                       | ROPIVACAINE HCL EPIDURAL SOLUTION 0.2 %                         | GM        |                        |

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| Drug Name                                                                                        | Drug Tier | Notes                 | Drug Name                                                                               | Drug Tier | Notes |
|--------------------------------------------------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------------------------------|-----------|-------|
| ropivacaine hcl injection solution 10 mg/ml, 2 mg/ml, 5 mg/ml, 7.5 mg/ml                         | GM        |                       | XARACOLL IMPLANT IMPLANT 3 X 100 MG                                                     | GM        |       |
| ROPIVACAINE HCL-NACL EPIDURAL SOLUTION 0.2-0.9 %                                                 | GM        |                       | XYLOCAINE INJECTION SOLUTION 0.5 %, 1 %, 2 %                                            | GM        |       |
| ROPIVACAINE HCL-NACL INJECTION SOLUTION 0.2-0.9 %                                                | GM        |                       | XYLOCAINE MPF +RFID INJECTION SOLUTION 1 %                                              | GM        |       |
| ROPIVACAINE HCL-NACL INJECTION SOLUTION PREFILLED SYRINGE 0.2-0.9 %, 0.5-0.9 %                   | GM        |                       | XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 0.5 %-1:200000, 1 %-1:100000, 2 %-1:100000     | GM        |       |
| ROPIV-CLONIDINE-KETOROLAC SOLUTION PREFILLED SYRINGE 123-0.04-15 MG/50ML                         | GM        |                       | XYLOCAINE-MPF +RFID INJECTION SOLUTION 2 %                                              | GM        |       |
| SENSORCAINE INJECTION SOLUTION 0.25 %, 0.5 %                                                     | GM        |                       | XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 %                                 | GM        |       |
| SENSORCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.5% - 1:200000                     | GM        |                       | XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 1 %-1:200000, 1.5 %-1:200000, 2 %-1:200000 | GM        |       |
| SENSORCAINE-MPF INJECTION SOLUTION 0.25 %, 0.5 %, 0.75 %                                         | GM        |                       | ZERUVIA EXTERNAL PATCH 4-1 %                                                            | 4         |       |
| SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.25% -1:200000, 0.5% - 1:200000, 0.75-1:200000 % | GM        |                       | ZINGO INTRADERMAL JET-INJECTOR 0.5 MG                                                   | 4         |       |
| TRIDACAINE II EXTERNAL PATCH 5 %                                                                 | 4         | Brand penalty applies | ZIONODIL 100 EXTERNAL LOTION 3 %                                                        | 4         |       |
| TRIDACAINE III EXTERNAL PATCH 5 %                                                                | 4         | Brand penalty applies | ZIONODIL EXTERNAL LOTION 3 %                                                            | 4         |       |
|                                                                                                  |           |                       | <b>Anti-Addiction / Substance Abuse Treatment Agents</b>                                |           |       |
|                                                                                                  |           |                       | acamprosate calcium oral tablet delayed release 333 mg                                  | 1         |       |
|                                                                                                  |           |                       | APO-VARENICLINE ORAL TABLET 0.5 MG, 1 MG                                                | PV        |       |

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| Drug Name                                                                                                      | Drug Tier | Notes | Drug Name                                                               | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------------------------------|-----------|-------|-------------------------------------------------------------------------|-----------|-----------------------|
| BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 16 MG/0.32ML, 24 MG/0.48ML, 32 MG/0.64ML, 8 MG/0.16ML | 3         |       | ft nicotine mini mouth/throat lozenge 2 mg, 4 mg                        | PV        |                       |
| BRIXADI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.36ML, 64 MG/0.18ML, 96 MG/0.27ML                      | 3         |       | ft nicotine mouth/throat gum 2 mg, 4 mg                                 | PV        |                       |
| buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg                                                      | 1         |       | ft nicotine mouth/throat lozenge 2 mg, 4 mg                             | PV        |                       |
| buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg                               | 1         |       | ft nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr | PV        |                       |
| buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg                                   | 1         |       | goodsense nicotine mouth/throat gum 2 mg, 4 mg                          | PV        |                       |
| bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg                                     | PV        |       | goodsense nicotine mouth/throat lozenge 4 mg                            | PV        |                       |
| CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG                                                                  | PV        |       | goodsense nicotine polacrilex mouth/throat gum 4 mg                     | PV        |                       |
| CHANTIX ORAL TABLET 0.5 MG, 1 MG                                                                               | PV        |       | habitrol transdermal patch 24 hour 21 mg/24hr                           | PV        |                       |
| CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK 0.5 MG X 11 & 1 MG X 42                                    | PV        |       | KLOXXADO NASAL LIQUID 8 MG/0.1ML                                        | 3         |                       |
| disulfiram oral tablet 250 mg, 500 mg                                                                          | 1         |       | lofexidine hcl oral tablet 0.18 mg                                      | 1         |                       |
| ft naloxone hcl nasal liquid 4 mg/0.1ml                                                                        | 1         |       | LUCEMYRA ORAL TABLET 0.18 MG                                            | 3         | Brand penalty applies |
|                                                                                                                |           |       | NALMEFENE HCL INJECTION SOLUTION 1 MG/ML                                | 3         |                       |
|                                                                                                                |           |       | naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml                    | 1         |                       |
|                                                                                                                |           |       | naloxone hcl injection solution cartridge 0.4 mg/ml                     | 1         |                       |
|                                                                                                                |           |       | naloxone hcl injection solution prefilled syringe 0.4 mg/ml             | 1         |                       |

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| Drug Name                                                  | Drug Tier | Notes |
|------------------------------------------------------------|-----------|-------|
| naloxone hcl nasal liquid 4 mg/0.1ml                       | 1         |       |
| naloxone hcl solution prefilled syringe 2 mg/2ml injection | 1         |       |
| naloxone hcl solution prefilled syringe 2 mg/2ml injection | 1         | PV*   |
| naltrexone hcl oral tablet 50 mg                           | 1         |       |
| NARCAN NASAL LIQUID 4 MG/0.1ML                             | 3         |       |
| NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG             | PV        |       |
| NICORETTE MOUTH/THROAT GUM 2 MG                            | PV        |       |
| NICORETTE MOUTH/THROAT LOZENGE 2 MG, 4 MG                  | PV        |       |
| nicotine mini mouth/throat lozenge 2 mg, 4 mg              | PV        |       |
| nicotine polacrilex mini mouth/throat lozenge 2 mg         | PV        |       |
| nicotine polacrilex mouth/throat gum 2 mg, 4 mg            | PV        |       |
| nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg        | PV        |       |
| nicotine step 1 transdermal patch 24 hour 21 mg/24hr       | PV        |       |
| nicotine step 2 transdermal patch 24 hour 14 mg/24hr       | PV        |       |
| nicotine step 3 transdermal patch 24 hour 7 mg/24hr        | PV        |       |

| Drug Name                                                                       | Drug Tier | Notes |
|---------------------------------------------------------------------------------|-----------|-------|
| nicotine transdermal patch 24 hour 21 mg/24hr                                   | PV        |       |
| NICOTROL NS NASAL SOLUTION 10 MG/ML                                             | PV        |       |
| OPVEE NASAL SOLUTION 2.7 MG/0.1ML                                               | 3         |       |
| REXTOVY NASAL LIQUID 4 MG/0.25ML                                                | 3         |       |
| RIVIVE NASAL LIQUID 3 MG/0.1ML                                                  | 3         |       |
| SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML    | 3         |       |
| SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG                      | 3         |       |
| varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42 | PV        |       |
| varenicline tartrate oral tablet 0.5 mg, 1 mg                                   | PV        |       |
| varenicline tartrate(continue) oral tablet 1 mg                                 | PV        |       |
| VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG                          | 3         |       |
| ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML                           | 3         |       |

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| Drug Name                                                                                                                        | Drug Tier | Notes                  |
|----------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------|
| ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG                  | 3         |                        |
| ZURNAI INJECTION SOLUTION AUTO-INJECTOR 1.5 MG/0.5ML                                                                             | 3         |                        |
| <b>Antibacterials</b>                                                                                                            |           |                        |
| AEMCOLO ORAL TABLET DELAYED RELEASE 194 MG                                                                                       | 4         | QL (12 EA per 30 days) |
| amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml                                                                         | GM        |                        |
| amoxicillin oral capsule 250 mg, 500 mg                                                                                          | 2         |                        |
| amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml                                         | 1         |                        |
| amoxicillin oral tablet 500 mg                                                                                                   | 2         |                        |
| amoxicillin oral tablet 875 mg                                                                                                   | 1         |                        |
| amoxicillin oral tablet chewable 125 mg, 250 mg                                                                                  | 2         |                        |
| amoxicillin-potassium clavulanate er oral tablet extended release 12 hour 1000-62.5 mg                                           | 2         |                        |
| amoxicillin-potassium clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml | 2         |                        |

| Drug Name                                                                               | Drug Tier | Notes                       |
|-----------------------------------------------------------------------------------------|-----------|-----------------------------|
| amoxicillin-potassium clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg        | 2         |                             |
| amoxicillin-potassium clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg           | 2         |                             |
| ampicillin oral capsule 500 mg                                                          | 1         |                             |
| ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 2 gm, 250 mg, 500 mg   | GM        |                             |
| ampicillin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm                  | GM        |                             |
| ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm | GM        |                             |
| ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm             | GM        |                             |
| ARIKAYCE INHALATION SUSPENSION 590 MG/8.4ML                                             | 6         | PA; QL (252 ML per 30 days) |
| AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED 600-42.9 MG/5ML                          | 4         | Brand penalty applies       |
| AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML                                | 4         |                             |
| AVIDOXY ORAL TABLET 100 MG                                                              | 4         | Brand penalty applies       |

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| Drug Name                                                                      | Drug Tier | Notes                       |
|--------------------------------------------------------------------------------|-----------|-----------------------------|
| AVYCAZ<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 2.5<br>(2-0.5) GM           | GM        |                             |
| AZACTAM INJECTION<br>SOLUTION<br>RECONSTITUTED 1<br>GM, 2 GM                   | GM        |                             |
| azithromycin intravenous<br>solution reconstituted<br>500 mg                   | GM        |                             |
| azithromycin oral packet<br>1 gm                                               | 2         |                             |
| azithromycin oral<br>suspension reconstituted<br>100 mg/5ml, 200 mg/5ml        | 2         |                             |
| azithromycin oral tablet<br>250 mg, 500 mg, 600 mg                             | 2         |                             |
| aztreonam injection<br>solution reconstituted 1<br>gm, 2 gm                    | GM        |                             |
| BACTRIM DS ORAL<br>TABLET 800-160 MG                                           | 4         | Brand<br>penalty<br>applies |
| BACTRIM ORAL<br>TABLET 400-80 MG                                               | 4         | Brand<br>penalty<br>applies |
| BAXDELA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 300<br>MG                  | 5         | Specialty<br>Medical        |
| BAXDELA ORAL<br>TABLET 450 MG                                                  | 5         |                             |
| benzalkonium chloride<br>external solution                                     | 2         |                             |
| BICILLIN C-R 900/300<br>INTRAMUSCULAR<br>SUSPENSION 900000-<br>300000 UNIT/2ML | GM        |                             |

| Drug Name                                                                                                                    | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| BICILLIN C-R<br>INTRAMUSCULAR<br>SUSPENSION 1200000<br>UNIT/2ML                                                              | GM        |       |
| BICILLIN L-A<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>1200000 UNIT/2ML,<br>2400000 UNIT/4ML,<br>600000 UNIT/ML | GM        |       |
| cefaclor er oral tablet<br>extended release 12 hour<br>500 mg                                                                | 2         |       |
| cefaclor oral capsule 250<br>mg, 500 mg                                                                                      | 2         |       |
| cefaclor oral suspension<br>reconstituted 250 mg/5ml                                                                         | 2         |       |
| cefadroxil oral capsule<br>500 mg                                                                                            | 2         |       |
| cefadroxil oral<br>suspension reconstituted<br>250 mg/5ml, 500 mg/5ml                                                        | 2         |       |
| cefadroxil oral tablet 1<br>gm                                                                                               | 2         |       |
| CEFAZOLIN IN SODIUM<br>CHLORIDE<br>INTRAVENOUS<br>SOLUTION 2-0.9<br>GM/100ML-%, 3-0.9<br>GM/100ML-%                          | GM        |       |
| CEFAZOLIN SODIUM<br>INJECTION SOLUTION<br>PREFILLED SYRINGE 3<br>GM/30ML                                                     | GM        |       |
| cefazolin sodium<br>injection solution<br>reconstituted 1 gm, 10<br>gm, 100 gm, 2 gm, 3 gm,<br>300 gm, 500 mg                | GM        |       |

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| Drug Name                                                                                                   | Drug Tier | Notes | Drug Name                                                                                     | Drug Tier | Notes |
|-------------------------------------------------------------------------------------------------------------|-----------|-------|-----------------------------------------------------------------------------------------------|-----------|-------|
| CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 GM/10ML, 2 GM/10ML, 2 GM/20ML                     | GM        |       | cefixime oral capsule 400 mg                                                                  | 2         |       |
| cefazolin sodium intravenous solution reconstituted 1 gm, 2 gm, 3 gm                                        | GM        |       | cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml                                 | 2         |       |
| cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%, 3-4 gm/150ml-%                | GM        |       | CEFOTAN INJECTION SOLUTION RECONSTITUTED 1 GM, 2 GM                                           | GM        |       |
| CEFAZOLIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION 2-5 GM/100ML-%                                               | GM        |       | CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED 1 GM, 2 GM                                 | GM        |       |
| cefazolin sodium-dextrose intravenous solution reconstituted 1-4 gm-%(50ml), 2-3 gm-%(50ml), 3-2 gm-%(50ml) | GM        |       | cefotetan disodium injection solution reconstituted 1 gm, 2 gm                                | GM        |       |
| cefdinir oral capsule 300 mg                                                                                | 2         |       | cefoxitin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm                         | GM        |       |
| cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml                                               | 2         |       | CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-4 GM-%(50ML), 2-2.2 GM-%(50ML) | GM        |       |
| cefepime hcl injection solution reconstituted 1 gm                                                          | GM        |       | cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml                      | 2         |       |
| cefepime hcl intravenous solution 1 gm/50ml, 2 gm/100ml                                                     | GM        |       | cefpodoxime proxetil oral tablet 100 mg, 200 mg                                               | 2         |       |
| cefepime hcl intravenous solution reconstituted 100 gm, 2 gm                                                | GM        |       | cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml                                | 2         |       |
| cefepime-dextrose intravenous solution reconstituted 1-5 gm-%(50ml), 2-5 gm-%(50ml)                         | GM        |       | cefprozil oral tablet 250 mg, 500 mg                                                          | 2         |       |
|                                                                                                             |           |       | ceftazidime injection solution reconstituted 1 gm, 6 gm                                       | GM        |       |
|                                                                                                             |           |       | ceftazidime intravenous solution reconstituted 2 gm                                           | GM        |       |

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| Drug Name                                                                                           | Drug Tier | Notes | Drug Name                                                                          | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------|-----------|-------|------------------------------------------------------------------------------------|-----------|-----------------------|
| ceftriaxone sodium in dextrose intravenous solution 20 mg/ml, 40 mg/ml                              | GM        |       | CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%), 500 MG/5ML (10%)              | 3         |                       |
| ceftriaxone sodium injection solution reconstituted 1 gm, 100 gm, 2 gm, 250 mg, 500 mg              | GM        |       | CIPRO ORAL TABLET 250 MG, 500 MG                                                   | 4         | Brand penalty applies |
| ceftriaxone sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm                             | GM        |       | ciprofloxacin hcl oral tablet 100 mg, 750 mg                                       | 2         |                       |
| ceftriaxone sodium-dextrose intravenous solution reconstituted 1-3.74 gm-%(50ml), 2-2.22 gm-%(50ml) | GM        |       | ciprofloxacin hcl oral tablet 250 mg, 500 mg                                       | 1         |                       |
| cefuroxime axetil oral tablet 250 mg, 500 mg                                                        | 2         |       | ciprofloxacin in d5w intravenous solution 200 mg/100ml, 400 mg/200ml               | GM        |                       |
| cefuroxime sodium injection solution reconstituted 750 mg                                           | GM        |       | clarithromycin er oral tablet extended release 24 hour 500 mg                      | 2         |                       |
| cefuroxime sodium intravenous solution reconstituted 1.5 gm                                         | GM        |       | clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml                | 2         |                       |
| cephalexin oral capsule 250 mg, 500 mg                                                              | 1         |       | clarithromycin oral tablet 250 mg, 500 mg                                          | 2         |                       |
| cephalexin oral capsule 750 mg                                                                      | 2         |       | CLEOCIN ORAL CAPSULE 150 MG, 300 MG, 75 MG                                         | 4         | Brand penalty applies |
| cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml                                     | 2         |       | CLEOCIN ORAL SOLUTION RECONSTITUTED 75 MG/5ML                                      | 4         | Brand penalty applies |
| cephalexin oral tablet 250 mg, 500 mg                                                               | 2         |       | CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML, 600 MG/4ML, 9 GM/60ML, 900 MG/6ML | GM        |                       |
| chloramphenicol sod succinate intravenous solution reconstituted 1 gm                               | GM        |       | CLEOCIN VAGINAL CREAM 2 %                                                          | 4         | Brand penalty applies |
|                                                                                                     |           |       | CLEOCIN VAGINAL SUPPOSITORY 100 MG                                                 | 3         |                       |
|                                                                                                     |           |       | clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg                                 | 2         |                       |

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| Drug Name                                                                                            | Drug Tier | Notes             |
|------------------------------------------------------------------------------------------------------|-----------|-------------------|
| clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml                                      | 2         |                   |
| clindamycin phosphate in d5w intravenous solution 300 mg/50ml, 600 mg/50ml, 900 mg/50ml              | GM        |                   |
| clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 9 gm/60ml, 900 mg/6ml, 9000 mg/60ml | GM        |                   |
| clindamycin phosphate vaginal cream 2 %                                                              | 2         |                   |
| CLINDESSE VAGINAL CREAM 2 %                                                                          | 4         |                   |
| colistimethate sodium (cba) injection solution reconstituted 150 mg                                  | GM        |                   |
| COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED 150 MG                                                 | GM        |                   |
| CUBICIN RF INTRAVENOUS SOLUTION RECONSTITUTED 500 MG                                                 | GM        |                   |
| dalbavancin hcl intravenous solution reconstituted 500 mg                                            | 6         | Specialty Medical |
| DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG                                                   | 6         | Specialty Medical |
| daptomycin intravenous solution reconstituted 350 mg, 500 mg                                         | GM        |                   |

| Drug Name                                                                                                                     | Drug Tier | Notes |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| DAPTOMYCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 1000-0.9 MG/100ML-%, 350-0.9 MG/50ML-%, 500-0.9 MG/50ML-%, 700-0.9 MG/100ML-% | GM        |       |
| demeclocycline hcl oral tablet 150 mg, 300 mg                                                                                 | 2         |       |
| dicloxacillin sodium oral capsule 250 mg, 500 mg                                                                              | 2         |       |
| DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML                                                                                | 5         |       |
| DIFICID ORAL TABLET 200 MG                                                                                                    | 5         |       |
| doxy 100 intravenous solution reconstituted 100 mg                                                                            | GM        |       |
| doxycycline hyclate intravenous solution reconstituted 100 mg                                                                 | GM        |       |
| doxycycline hyclate oral capsule 100 mg, 50 mg                                                                                | 2         |       |
| doxycycline hyclate oral tablet 100 mg, 20 mg                                                                                 | 2         |       |
| doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 75 mg                                                         | 2         |       |
| doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg, 75 mg                                                             | 2         |       |
| doxycycline monohydrate oral suspension reconstituted 25 mg/5ml                                                               | 2         |       |
| doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg                                                              | 2         |       |
| E.E.S. 400 ORAL TABLET 400 MG                                                                                                 | 4         |       |

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| Drug Name                                                            | Drug Tier | Notes                 | Drug Name                                                                                                                 | Drug Tier | Notes                 |
|----------------------------------------------------------------------|-----------|-----------------------|---------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED 200 MG/5ML             | 4         | Brand penalty applies | erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml, 400 mg/5ml                                          | 2         |                       |
| EMBLAVEO INTRAVENOUS SOLUTION RECONSTITUTED 1.5-0.5 GM               | GM        |                       | erythromycin ethylsuccinate oral tablet 400 mg                                                                            | 2         |                       |
| ertapenem sodium injection solution reconstituted 1 gm               | GM        |                       | erythromycin lactobionate intravenous solution reconstituted 500 mg                                                       | GM        |                       |
| ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML                  | 4         | Brand penalty applies | erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg                                                           | 2         |                       |
| ERYPED 400 ORAL SUSPENSION RECONSTITUTED 400 MG/5ML                  | 4         | Brand penalty applies | EXTENCILLINE INTRAMUSCULAR SUSPENSION RECONSTITUTED 1200000 UNIT, 2400000 UNIT                                            | GM        |                       |
| ERY-TAB ORAL TABLET DELAYED RELEASE 250 MG, 333 MG, 500 MG           | 4         | Brand penalty applies | FETROJA INTRAVENOUS SOLUTION RECONSTITUTED 1 GM                                                                           | 6         | Specialty Medical     |
| ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG    | GM        |                       | fidaxomicin oral tablet 200 mg                                                                                            | 5         |                       |
| ERYTHROCIN STEARATE ORAL TABLET 250 MG                               | 4         |                       | FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML, 50 MG/ML                                                                    | 4         | Brand penalty applies |
| erythromycin base oral capsule delayed release particles 250 mg      | 2         |                       | FLAGYL ORAL CAPSULE 375 MG                                                                                                | 4         | Brand penalty applies |
| erythromycin base oral tablet 250 mg, 500 mg                         | 2         |                       | fosfomycin tromethamine oral packet 3 gm                                                                                  | 2         |                       |
| erythromycin base oral tablet delayed release 250 mg, 333 mg, 500 mg | 2         |                       | gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-% | GM        |                       |
|                                                                      |           |                       | gentamicin sulfate external cream 0.1 %                                                                                   | 2         |                       |

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| Drug Name                                                                        | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------|-----------|-----------------------|
| gentamicin sulfate external ointment 0.1 %                                       | 2         |                       |
| gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml                         | GM        |                       |
| HIPREX ORAL TABLET 1 GM                                                          | 4         | Brand penalty applies |
| HUMATIN ORAL CAPSULE 250 MG                                                      | 4         |                       |
| hydrogen peroxide solution 30 %                                                  | 2         |                       |
| imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg            | GM        |                       |
| iodine tincture external tincture 2 %                                            | 2         |                       |
| KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED 1200 MG                               | 6         | Specialty Medical     |
| LENTOCILIN INTRAMUSCULAR SUSPENSION RECONSTITUTED 1200000 UNIT                   | GM        |                       |
| levofloxacin in d5w intravenous solution 250 mg/50ml, 500 mg/100ml, 750 mg/150ml | GM        |                       |
| levofloxacin intravenous solution 25 mg/ml                                       | GM        |                       |
| levofloxacin oral solution 25 mg/ml                                              | 2         |                       |
| levofloxacin oral tablet 250 mg, 500 mg, 750 mg                                  | 2         |                       |
| LINCOCIN INJECTION SOLUTION 300 MG/ML                                            | GM        |                       |
| lincomycin hcl injection solution 300 mg/ml                                      | GM        |                       |

| Drug Name                                                                           | Drug Tier | Notes                   |
|-------------------------------------------------------------------------------------|-----------|-------------------------|
| linezolid in sodium chloride intravenous solution 600-0.9 mg/300ml-%                | 5         | Specialty Medical       |
| linezolid intravenous solution 600 mg/300ml                                         | 5         | Specialty Medical       |
| linezolid oral suspension reconstituted 100 mg/5ml                                  | 5         | QL (900 ML per 30 days) |
| linezolid oral tablet 600 mg                                                        | 5         | QL (60 EA per 30 days)  |
| LUGOLS STRONG IODINE EXTERNAL SOLUTION 5-10 %                                       | 4         |                         |
| MACROBID ORAL CAPSULE 100 MG                                                        | 4         | Brand penalty applies   |
| MACRODANTIN ORAL CAPSULE 100 MG, 25 MG, 50 MG                                       | 4         | Brand penalty applies   |
| mafenide acetate external packet 5 %                                                | 2         |                         |
| meropenem intravenous solution reconstituted 1 gm, 2 gm, 500 mg                     | GM        |                         |
| MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 500 MG/50ML | GM        |                         |
| methenamine hippurate oral tablet 1 gm                                              | 2         |                         |
| methenamine mandelate oral tablet 0.5 gm, 1 gm                                      | 2         |                         |
| metronidazole intravenous solution 500 mg/100ml                                     | GM        |                         |
| metronidazole oral capsule 375 mg                                                   | 2         |                         |
| metronidazole oral tablet 125 mg, 250 mg, 500 mg                                    | 2         |                         |

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| Drug Name                                                               | Drug Tier | Notes                 |
|-------------------------------------------------------------------------|-----------|-----------------------|
| metronidazole vaginal gel 0.75 %                                        | 2         |                       |
| MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                       | GM        |                       |
| minocycline hcl oral capsule 100 mg, 50 mg, 75 mg                       | 2         |                       |
| minocycline hcl oral tablet 100 mg, 50 mg, 75 mg                        | 2         |                       |
| MONDOXYNE NL ORAL CAPSULE 100 MG                                        | 4         | Brand penalty applies |
| moxifloxacin hcl in nacl intravenous solution 400 mg/250ml              | GM        |                       |
| MOXIFLOXACIN HCL INTRAVENOUS SOLUTION 400 MG/250ML                      | GM        |                       |
| moxifloxacin hcl oral tablet 400 mg                                     | 2         |                       |
| mupirocin external ointment 2 %                                         | 2         |                       |
| NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 1 GM/50ML, 2 GM/100ML | GM        |                       |
| nafcillin sodium injection solution reconstituted 1 gm, 2 gm            | GM        |                       |
| nafcillin sodium intravenous solution reconstituted 10 gm               | GM        |                       |
| neomycin sulfate oral tablet 500 mg                                     | 2         |                       |
| neomycin-polymyxin b gu irrigation solution 40-200000                   | 2         |                       |

| Drug Name                                                                      | Drug Tier | Notes                  |
|--------------------------------------------------------------------------------|-----------|------------------------|
| nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg                  | 2         |                        |
| nitrofurantoin monohydrate macrocrystals oral capsule 100 mg                   | 2         |                        |
| nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml                           | 2         |                        |
| NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                               | 6         | Specialty Medical      |
| NUZYRA ORAL TABLET 150 MG                                                      | 6         | QL (30 EA per 14 days) |
| ofloxacin oral tablet 300 mg, 400 mg                                           | 2         |                        |
| ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED 400 MG                             | 5         | Specialty Medical      |
| OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 2 GM/50ML                    | GM        |                        |
| oxacillin sodium injection solution reconstituted 1 gm, 2 gm                   | GM        |                        |
| oxacillin sodium intravenous solution reconstituted 10 gm                      | GM        |                        |
| PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION 40000 UNIT/ML, 60000 UNIT/ML | GM        |                        |

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| Drug Name                                                                                                                                                                        | Drug Tier | Notes             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------|
| penicillin g potassium injection solution reconstituted 20000000 unit, 5000000 unit                                                                                              | GM        |                   |
| penicillin g sodium injection solution reconstituted 5000000 unit                                                                                                                | GM        |                   |
| penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml                                                                                                        | 2         |                   |
| penicillin v potassium oral tablet 250 mg, 500 mg                                                                                                                                | 1         |                   |
| PFIZERPEN INJECTION SOLUTION RECONSTITUTED 20000000 UNIT, 5000000 UNIT                                                                                                           | GM        |                   |
| piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3-0.375 gm, 3.375 (3-0.375) gm, 4-0.5 gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm | GM        |                   |
| polymyxin b sulfate injection solution reconstituted 500000 unit                                                                                                                 | GM        |                   |
| PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED 500-500 MG                                                                                                                        | GM        |                   |
| RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED 1.25 GM                                                                                                                             | 6         | Specialty Medical |

| Drug Name                                                                    | Drug Tier | Notes                 |
|------------------------------------------------------------------------------|-----------|-----------------------|
| SILVADENE EXTERNAL CREAM 1 %                                                 | 4         | Brand penalty applies |
| silver nitrate external solution 0.5 %                                       | 2         |                       |
| silver sulfadiazine external cream 1 %                                       | 2         |                       |
| SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED 200 MG                           | 6         | Specialty Medical     |
| SIVEXTRO ORAL TABLET 200 MG                                                  | 6         | QL (6 EA per 30 days) |
| SOLOSEC ORAL PACKET 2 GM                                                     | 4         |                       |
| ssd external cream 1 %                                                       | 2         |                       |
| streptomycin sulfate intramuscular solution reconstituted 1 gm               | GM        |                       |
| sulfadiazine oral tablet 500 mg                                              | 2         |                       |
| sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml             | GM        |                       |
| sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml, 800-160 mg/20ml | 2         |                       |
| sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg              | 1         |                       |
| SULFAMYLON EXTERNAL CREAM 85 MG/GM                                           | 4         |                       |
| sulfatrim pediatric oral suspension 200-40 mg/5ml                            | 2         |                       |
| tazicef injection solution reconstituted 1 gm                                | GM        |                       |

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| Drug Name                                                                                  | Drug Tier | Notes | Drug Name                                                                                                                           | Drug Tier | Notes                       |
|--------------------------------------------------------------------------------------------|-----------|-------|-------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| TAZICEF<br>INTRAVENOUS<br>SOLUTION 1 GM/50ML                                               | GM        |       | UNASYN<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 15<br>(10-5) GM                                                                  | GM        |                             |
| tazicef intravenous<br>solution reconstituted 1<br>gm, 2 gm, 6 gm                          | GM        |       | VABOMERE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 2 (1-<br>1) GM                                                                 | GM        |                             |
| TEFLARO<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 400<br>MG, 600 MG                      | GM        |       | VANCOCIN ORAL<br>CAPSULE 125 MG, 250<br>MG                                                                                          | 4         | Brand<br>penalty<br>applies |
| tetracycline hcl oral<br>capsule 250 mg, 500 mg                                            | 2         |       | VANCOMYCIN HCL IN<br>DEXTROSE<br>INTRAVENOUS<br>SOLUTION 1.5-5<br>GM/250ML-%                                                        | GM        |                             |
| TETRACYCLINE HCL<br>ORAL TABLET 250 MG,<br>500 MG                                          | 4         |       | vancomycin hcl in<br>dextrose intravenous<br>solution 1-5 gm/200ml-%,<br>1.5-5 gm/300ml-%, 500-5<br>mg/100ml-%, 750-5<br>mg/150ml-% | GM        |                             |
| tigecycline intravenous<br>solution reconstituted 50<br>mg                                 | GM        |       | vancomycin hcl in<br>dextrose solution 1.25-5<br>gm/250ml-% intravenous                                                             | GM        |                             |
| tinidazole oral tablet 250<br>mg, 500 mg                                                   | 2         |       | VANCOMYCIN HCL IN<br>DEXTROSE SOLUTION<br>1.25-5 GM/250ML-%<br>INTRAVENOUS                                                          | GM        |                             |
| tobramycin sulfate<br>injection solution 1.2<br>gm/30ml, 10 mg/ml, 2<br>gm/50ml, 80 mg/2ml | GM        |       | vancomycin hcl in nacl<br>intravenous solution 1-<br>0.9 gm/200ml-%, 500-0.9<br>mg/100ml-%                                          | GM        |                             |
| tobramycin sulfate<br>injection solution<br>reconstituted 1.2 gm                           | GM        |       |                                                                                                                                     |           |                             |
| trimethoprim oral tablet<br>100 mg                                                         | 2         |       |                                                                                                                                     |           |                             |
| TYGACIL<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 50<br>MG                               | GM        |       |                                                                                                                                     |           |                             |
| TYZAVAN<br>INTRAVENOUS<br>SOLUTION 1000<br>MG/200ML                                        | GM        |       |                                                                                                                                     |           |                             |
| UNASYN INJECTION<br>SOLUTION<br>RECONSTITUTED 1.5<br>(1-0.5) GM, 3 (2-1) GM                | GM        |       |                                                                                                                                     |           |                             |

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| Drug Name                                                                                                                                                                                                 | Drug Tier | Notes | Drug Name                                                      | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|----------------------------------------------------------------|-----------|-----------------------|
| VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1-0.9 GM/250ML-%, 1.25-0.9 GM/250ML-%, 1.5-0.9 GM/250ML-%, 1.5-0.9 GM/500ML-%, 1.75-0.9 GM/250ML-%, 1.75-0.9 GM/500ML-%, 2-0.9 GM/500ML-%, 750-0.9 MG/250ML-% | GM        |       | VIBRAMYCIN ORAL CAPSULE 100 MG                                 | 4         | Brand penalty applies |
| VANCOMYCIN HCL IN NACL SOLUTION 750-0.9 MG/150ML-% INTRAVENOUS                                                                                                                                            | GM        |       | VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML             | 4         | Brand penalty applies |
| vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous                                                                                                                                            | GM        |       | XACDURO INTRAVENOUS SOLUTION RECONSTITUTED 1-1 GM              | GM        |                       |
| vancomycin hcl intravenous solution 1000 mg/200ml, 1250 mg/250ml, 1500 mg/300ml, 1750 mg/350ml, 2000 mg/400ml, 500 mg/100ml, 750 mg/150ml                                                                 | GM        |       | XERAVA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG        | 5         | Specialty Medical     |
| vancomycin hcl intravenous solution reconstituted 1 gm, 1.25 gm, 1.5 gm, 1.75 gm, 10 gm, 2 gm, 5 gm, 500 mg, 750 mg                                                                                       | GM        |       | XIFAXAN ORAL TABLET 200 MG, 550 MG                             | 5         | PA                    |
| vancomycin hcl oral capsule 125 mg, 250 mg                                                                                                                                                                | 2         |       | ZEMDRI INTRAVENOUS SOLUTION 500 MG/10ML                        | 6         | Specialty Medical     |
| vancomycin hcl oral solution reconstituted 25 mg/ml, 250 mg/5ml, 50 mg/ml                                                                                                                                 | 2         |       | ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED 1.5 (1-0.5) GM      | GM        |                       |
| VANDAZOLE VAGINAL GEL 0.75 %                                                                                                                                                                              | 4         |       | ZEVTERA INTRAVENOUS SOLUTION RECONSTITUTED 500 MG              | GM        |                       |
| VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED 750 MG                                                                                                                                                         | GM        |       | ZITHROMAX INTRAVENOUS SOLUTION RECONSTITUTED 500 MG            | GM        |                       |
|                                                                                                                                                                                                           |           |       | ZITHROMAX ORAL PACKET 1 GM                                     | 4         |                       |
|                                                                                                                                                                                                           |           |       | ZITHROMAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML | 4         | Brand penalty applies |

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| Drug Name                                                                  | Drug Tier | Notes                   |
|----------------------------------------------------------------------------|-----------|-------------------------|
| ZITHROMAX ORAL TABLET 250 MG, 500 MG                                       | 4         | Brand penalty applies   |
| ZITHROMAX TRI-PAK ORAL TABLET 500 MG                                       | 4         | Brand penalty applies   |
| ZITHROMAX Z-PAK ORAL TABLET 250 MG                                         | 4         | Brand penalty applies   |
| ZOSYN INTRAVENOUS SOLUTION 2-0.25 GM/50ML, 3-0.375 GM/50ML, 4-0.5 GM/100ML | GM        |                         |
| ZYVOX INTRAVENOUS SOLUTION 600 MG/300ML                                    | 5         | Specialty Medical       |
| ZYVOX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML                             | 5         | QL (900 ML per 30 days) |
| ZYVOX ORAL TABLET 600 MG                                                   | 5         | QL (60 EA per 30 days)  |
| <b>Anticoagulants</b>                                                      |           |                         |
| ACD FORMULA A IN VITRO SOLUTION 0.73-2.45-2.2 GM/100ML                     | 4         |                         |
| ACD-A NOCLOT-50 IN VITRO SOLUTION 0.73-2.45-2.2 GM/100ML                   | 4         |                         |
| ACTIVASE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG                  | GM        |                         |
| ANGIOMAX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG                         | GM        |                         |

| Drug Name                                                                         | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------|-----------|-----------------------|
| ANTICOAGULANT SODIUM CITRATE IN VITRO SOLUTION 4 %, 4 GM/100ML                    | 4         |                       |
| argatroban in sodium chloride intravenous solution 50-0.9 mg/50ml-%               | GM        |                       |
| argatroban intravenous solution 250 mg/2.5ml, 50 mg/50ml                          | GM        |                       |
| ARIXTRA SUBCUTANEOUS SOLUTION 10 MG/0.8ML, 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML | 4         | Brand penalty applies |
| bd heparin posiflush intravenous solution 10 unit/ml, 100 unit/ml                 | GM        |                       |
| BIVALIRUDIN TRIFLUOROACETATE INTRAVENOUS SOLUTION 250 MG/50ML                     | GM        |                       |
| bivalirudin trifluoroacetate intravenous solution reconstituted 250 mg            | GM        |                       |
| CATHFLO ACTIVASE INJECTION SOLUTION RECONSTITUTED 2 MG                            | GM        |                       |
| dabigatran etexilate mesylate oral capsule 110 mg, 150 mg, 75 mg                  | 2         |                       |
| DEFENCATH IN VITRO SOLUTION 1000-13.5 UNIT-MG/ML                                  | GM        |                       |
| ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE 3 X 0.5 MG                              | 3         |                       |
| ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE 4 X 0.5 MG                                | 3         |                       |

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| Drug Name                                                                                                                                                              | Drug Tier | Notes | Drug Name                                                                                                                                                             | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG                                                                                                              | 3         |       | heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%, 12500-0.45 ut/250ml-%, 2000-0.9 unit/l-%, 25000-0.45 ut/250ml-%, 25000-0.45 ut/500ml-%            | GM        |       |
| ELIQUIS ORAL CAPSULE SPRINKLE 0.15 MG                                                                                                                                  | 3         |       | HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 2500-0.9 UT/500ML-%, 30000-0.9 UNIT/L-%, 4000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%, 5000-0.9 UT/500ML-% | GM        |       |
| ELIQUIS ORAL TABLET 2.5 MG, 5 MG                                                                                                                                       | 3         |       | HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 20-0.9 UNT/20ML-%, 50-0.9 UNT/50ML-%                                                                 | GM        |       |
| ELIQUIS ORAL TABLET SOLUBLE 0.5 MG                                                                                                                                     | 3         |       | heparin na (pork) lock flush pf intravenous solution 1 unit/ml, 10 unit/ml, 100 unit/ml                                                                               | GM        |       |
| enoxaparin sodium injection solution 300 mg/3ml                                                                                                                        | 2         |       | heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 25000-5 ut/500ml-%, 40-5 unit/ml-%                                                                     | GM        |       |
| enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml                          | 2         |       | heparin sod (pork) lock flush intravenous solution 10 unit/ml, 100 unit/ml                                                                                            | GM        |       |
| fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml                                                                          | 2         |       | heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml                                                                  | 2         |       |
| FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML                                                                                                         | 3         |       | heparin sodium (porcine) injection solution prefilled syringe 5000 unit/0.5ml                                                                                         | GM        |       |
| FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML | 3         |       | heparin sodium (porcine) pf injection solution 1000 unit/ml, 5000 unit/0.5ml                                                                                          | 2         |       |

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| Drug Name                                                                                                                           | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| heparin sodium (porcine) pf injection solution 5000 unit/ml                                                                         | GM        |                       |
| jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg                                                      | 1         |                       |
| LOVENOX INJECTION SOLUTION 300 MG/3ML                                                                                               | 4         | Brand penalty applies |
| LOVENOX INJECTION SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/0.8ML, 150 MG/ML, 30 MG/0.3ML, 40 MG/0.4ML, 60 MG/0.6ML, 80 MG/0.8ML | 4         | Brand penalty applies |
| PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG                                                                                          | 3         | Brand penalty applies |
| REGIOCIT EXTRACORPOREAL SOLUTION 0.529 %                                                                                            | GM        |                       |
| rivaroxaban oral suspension reconstituted 1 mg/ml                                                                                   | 2         | AL (Max 17 Years)     |
| rivaroxaban oral tablet 2.5 mg                                                                                                      | 2         |                       |
| SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG                                                                                             | 4         | ST                    |
| SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE 4 %                                                                              | GM        |                       |
| SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION 4 %                                                                                  | GM        |                       |
| SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE 120 MG/3ML                                                         | GM        |                       |

| Drug Name                                                                             | Drug Tier | Notes                                    |
|---------------------------------------------------------------------------------------|-----------|------------------------------------------|
| SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION 4-320 %-MCG/ML                    | GM        |                                          |
| THROMBATE III INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT                             | GM        | PA                                       |
| TNKASE INTRAVENOUS KIT 25 MG, 50 MG                                                   | GM        |                                          |
| TRICITRASOL IN VITRO CONCENTRATE 46.7 %                                               | 4         |                                          |
| warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg | 1         |                                          |
| XARELTO ORAL SUSPENSION RECONSTITUTED 1 MG/ML                                         | 3         | Brand penalty applies; AL (Max 17 Years) |
| XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG                                               | 3         |                                          |
| XARELTO ORAL TABLET 2.5 MG                                                            | 3         | Brand penalty applies                    |
| XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG                              | 3         |                                          |
| <b>Anticonvulsants - Drugs for Seizures</b>                                           |           |                                          |
| APTOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG                                      | 4         | ST                                       |
| BANZEL ORAL SUSPENSION 40 MG/ML                                                       | 4         |                                          |

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| Drug Name                                                                     | Drug Tier | Notes | Drug Name                                                                | Drug Tier | Notes |
|-------------------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------|-----------|-------|
| BANZEL ORAL TABLET 200 MG, 400 MG                                             | 4         |       | DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 250 MG, 500 MG          | 3         |       |
| BRIVIACT INTRAVENOUS SOLUTION 50 MG/5ML                                       | GM        | ST    | DEPAKOTE ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG              | 3         |       |
| BRIVIACT ORAL SOLUTION 10 MG/ML                                               | 4         | ST    | DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE 125 MG          | 3         |       |
| BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG                       | 4         | ST    | DIACOMIT ORAL CAPSULE 250 MG, 500 MG                                     | 4         |       |
| carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg | 2         |       | DIACOMIT ORAL PACKET 250 MG, 500 MG                                      | 4         |       |
| carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg  | 2         |       | DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG                                  | 4         |       |
| carbamazepine oral suspension 100 mg/5ml, 200 mg/10ml                         | 2         |       | DIASTAT PEDIATRIC RECTAL GEL 2.5 MG                                      | 4         |       |
| carbamazepine oral tablet 200 mg                                              | 2         |       | diazepam rectal gel 10 mg, 2.5 mg, 20 mg                                 | 2         |       |
| carbamazepine oral tablet chewable 100 mg, 200 mg                             | 2         |       | DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG                             | 3         |       |
| CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG        | 3         |       | DILANTIN ORAL CAPSULE 100 MG, 30 MG                                      | 3         |       |
| CELONTIN ORAL CAPSULE 300 MG                                                  | 4         |       | DILANTIN ORAL SUSPENSION 125 MG/5ML                                      | 3         |       |
| CEREBYX INJECTION SOLUTION 100 MG PE/2ML, 500 MG PE/10ML                      | GM        |       | DILANTIN-125 ORAL SUSPENSION 125 MG/5ML                                  | 3         |       |
| clobazam oral suspension 2.5 mg/ml                                            | 2         |       | divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg | 2         |       |
| clobazam oral tablet 10 mg, 20 mg                                             | 2         |       | divalproex sodium oral capsule delayed release sprinkle 125 mg           | 2         |       |

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| Drug Name                                                            | Drug Tier | Notes | Drug Name                                                                              | Drug Tier | Notes |
|----------------------------------------------------------------------|-----------|-------|----------------------------------------------------------------------------------------|-----------|-------|
| divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg | 2         |       | KEPPRA INTRAVENOUS SOLUTION 500 MG/5ML                                                 | GM        |       |
| EPIDIOLEX ORAL SOLUTION 100 MG/ML                                    | 6         | PA    | KEPPRA ORAL SOLUTION 100 MG/ML                                                         | 4         |       |
| epitol oral tablet 200 mg                                            | 2         |       | KEPPRA ORAL TABLET 1000 MG, 250 MG, 500 MG, 750 MG                                     | 4         |       |
| EPRONTIA ORAL SOLUTION 25 MG/ML                                      | 4         |       | KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG                          | 4         |       |
| eslicarbazepine acetate oral tablet 200 mg, 400 mg, 600 mg, 800 mg   | 2         | ST    | lacosamide intravenous solution 200 mg/20ml                                            | GM        |       |
| ethosuximide oral capsule 250 mg                                     | 2         |       | lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml                              | 2         |       |
| ethosuximide oral solution 250 mg/5ml                                | 2         |       | lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg                                   | 2         |       |
| felbamate oral suspension 600 mg/5ml                                 | 2         |       | LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 42 X 50 MG & 14X100 MG | 3         |       |
| felbamate oral tablet 400 mg, 600 mg                                 | 2         |       | LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG                      | 3         |       |
| FELBATOL ORAL TABLET 400 MG, 600 MG                                  | 4         |       | LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG                                     | 3         |       |
| FINTEPLA ORAL SOLUTION 2.2 MG/ML                                     | 6         | PA    | LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG                                              | 3         |       |
| fosphenytoin sodium injection solution 100 mg pe/2ml, 500 mg pe/10ml | GM        |       | LAMICTAL STARTER ORAL KIT 35 X 25 MG, 42 X 25 MG & 7 X 100 MG, 84 X 25 MG & 14X100 MG  | 3         |       |
| FYCOMPA ORAL SUSPENSION 0.5 MG/ML                                    | 4         |       |                                                                                        |           |       |
| FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG             | 4         |       |                                                                                        |           |       |
| gabapentin oral capsule 100 mg, 300 mg, 400 mg                       | 2         |       |                                                                                        |           |       |
| gabapentin oral solution 250 mg/5ml, 300 mg/6ml                      | 2         |       |                                                                                        |           |       |
| GABAPENTIN ORAL TABLET 25 MG, 50 MG                                  | 3         |       |                                                                                        |           |       |
| gabapentin oral tablet 600 mg, 800 mg                                | 2         |       |                                                                                        |           |       |

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| Drug Name                                                                                        | Drug Tier | Notes | Drug Name                                                               | Drug Tier | Notes                  |
|--------------------------------------------------------------------------------------------------|-----------|-------|-------------------------------------------------------------------------|-----------|------------------------|
| LAMICTAL XR ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 50 & 100 & 200 MG                 | 3         |       | levetiracetam intravenous solution 500 mg/5ml                           | GM        |                        |
| LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG    | 3         |       | levetiracetam oral solution 100 mg/ml, 500 mg/5ml                       | 2         |                        |
| lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg | 2         |       | levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg               | 2         |                        |
| lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg            | 2         |       | LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG                 | 4         | ST                     |
| lamotrigine oral tablet 100 mg, 150 mg, 200 mg                                                   | 1         |       | LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG               | 4         |                        |
| lamotrigine oral tablet 25 mg                                                                    | 2         |       | methsuximide oral capsule 300 mg                                        | 2         |                        |
| lamotrigine oral tablet chewable 25 mg, 5 mg                                                     | 2         |       | MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG | 4         |                        |
| lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg                                 | 2         |       | MYSOLINE ORAL TABLET 250 MG, 50 MG                                      | 3         |                        |
| lamotrigine starter kit-blue oral kit 35 x 25 mg                                                 | 2         |       | NAYZILAM NASAL SOLUTION 5 MG/0.1ML                                      | 4         | QL (10 EA per 30 days) |
| lamotrigine starter kit-green oral kit 84 x 25 mg & 14x100 mg                                    | 2         |       | NEURONTIN ORAL CAPSULE 100 MG, 300 MG, 400 MG                           | 4         |                        |
| lamotrigine starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg                                  | 2         |       | NEURONTIN ORAL SOLUTION 250 MG/5ML                                      | 4         |                        |
| levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg                             | 2         |       | NEURONTIN ORAL TABLET 600 MG, 800 MG                                    | 4         |                        |
| levetiracetam in nacl intravenous solution 1000 mg/100ml, 1500 mg/100ml, 500 mg/100ml            | GM        |       | ONFI ORAL SUSPENSION 2.5 MG/ML                                          | 4         |                        |
|                                                                                                  |           |       | ONFI ORAL TABLET 10 MG, 20 MG                                           | 4         |                        |

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| Drug Name                                                                                 | Drug Tier | Notes |
|-------------------------------------------------------------------------------------------|-----------|-------|
| oxcarbazepine er oral tablet extended release 24 hour 150 mg, 300 mg, 600 mg              | 2         |       |
| oxcarbazepine oral suspension 300 mg/5ml                                                  | 2         |       |
| oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg                                          | 2         |       |
| OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG                   | 4         |       |
| pentobarbital sodium injection solution 50 mg/ml                                          | GM        |       |
| perampanel oral tablet 10 mg, 12 mg, 2 mg, 4 mg, 6 mg, 8 mg                               | 2         |       |
| phenobarbital oral elixir 20 mg/5ml, 30 mg/7.5ml, 60 mg/15ml                              | 2         |       |
| phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg | 2         |       |
| phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml                               | GM        |       |
| phenytek oral capsule 200 mg, 300 mg                                                      | 2         |       |
| phenytoin infatabs oral tablet chewable 50 mg                                             | 2         |       |
| phenytoin oral suspension 100 mg/4ml, 125 mg/5ml                                          | 2         |       |
| phenytoin oral tablet chewable 50 mg                                                      | 2         |       |
| phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg                             | 2         |       |
| phenytoin sodium injection solution 50 mg/ml                                              | GM        |       |

| Drug Name                                                                       | Drug Tier | Notes |
|---------------------------------------------------------------------------------|-----------|-------|
| primidone oral tablet 125 mg, 250 mg, 50 mg                                     | 2         |       |
| QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG | 4         | PA    |
| roweepra oral tablet 500 mg                                                     | 2         |       |
| rufinamide oral suspension 40 mg/ml                                             | 2         |       |
| rufinamide oral tablet 200 mg, 400 mg                                           | 2         |       |
| SABRIL ORAL PACKET 500 MG                                                       | 6         | PA    |
| SABRIL ORAL TABLET 500 MG                                                       | 6         | PA    |
| SEZABY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                                | GM        |       |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG, 250 MG, 500 MG, 750 MG      | 4         | ST    |
| subvenite oral tablet 100 mg, 150 mg, 200 mg                                    | 1         |       |
| subvenite oral tablet 25 mg                                                     | 2         |       |
| subvenite starter kit-blue oral kit 35 x 25 mg                                  | 2         |       |
| subvenite starter kit-green oral kit 84 x 25 mg & 14x100 mg                     | 2         |       |
| subvenite starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg                   | 2         |       |
| SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG                                           | 4         |       |

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| Drug Name                                                                           | Drug Tier | Notes | Drug Name                                                                      | Drug Tier | Notes |
|-------------------------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------|-----------|-------|
| TEGRETOL ORAL SUSPENSION 100 MG/5ML                                                 | 3         |       | TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG | 4         | PA    |
| TEGRETOL ORAL TABLET 200 MG                                                         | 3         |       | valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml                    | GM        |       |
| TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG             | 3         |       | valproic acid oral capsule 250 mg                                              | 2         |       |
| tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg                                  | 2         |       | valproic acid oral solution 250 mg/5ml, 500 mg/10ml                            | 2         |       |
| TOPAMAX ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG                                    | 4         |       | VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML                                    | 4         |       |
| TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 15 MG, 25 MG                                 | 4         |       | VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 2 X 7.5 MG/0.1ML                  | 4         |       |
| topiramate er oral capsule er 24 hour sprinkle 100 mg, 150 mg, 200 mg, 25 mg, 50 mg | 2         | PA    | VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 2 X 10 MG/0.1ML                   | 4         |       |
| topiramate er oral capsule extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg    | 2         | PA    | VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML                                      | 4         |       |
| topiramate oral capsule sprinkle 15 mg, 25 mg, 50 mg                                | 2         |       | vigabatrin oral packet 500 mg                                                  | 5         | PA    |
| topiramate oral solution 25 mg/ml                                                   | 2         |       | vigabatrin oral tablet 500 mg                                                  | 5         | PA    |
| topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg                                 | 2         |       | VIGADRONE ORAL PACKET 500 MG                                                   | 6         | PA    |
| TRILEPTAL ORAL SUSPENSION 300 MG/5ML                                                | 4         |       | VIGADRONE ORAL TABLET 500 MG                                                   | 6         | PA    |
| TRILEPTAL ORAL TABLET 150 MG, 300 MG, 600 MG                                        | 4         |       | vigpoder oral packet 500 mg                                                    | 5         | PA    |
|                                                                                     |           |       | VIMPAT INTRAVENOUS SOLUTION 200 MG/20ML                                        | GM        |       |
|                                                                                     |           |       | VIMPAT ORAL SOLUTION 10 MG/ML                                                  | 4         |       |

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| Drug Name                                                                                                                                | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG                                                                                         | 4         |                       |
| XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG                                                                                  | 4         | PA                    |
| XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG | 4         | PA                    |
| ZARONTIN ORAL CAPSULE 250 MG                                                                                                             | 4         |                       |
| ZARONTIN ORAL SOLUTION 250 MG/5ML                                                                                                        | 4         |                       |
| ZONEGRAN ORAL CAPSULE 100 MG, 25 MG                                                                                                      | 4         |                       |
| ZONISADE ORAL SUSPENSION 100 MG/5ML                                                                                                      | 2         |                       |
| zonisamide oral capsule 100 mg, 25 mg, 50 mg                                                                                             | 2         |                       |
| ZTALMY ORAL SUSPENSION 50 MG/ML                                                                                                          | 6         | PA                    |
| <b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>                                                                  |           |                       |
| ADLARITY TRANSDERMAL PATCH WEEKLY 10 MG/DAY, 5 MG/DAY                                                                                    | 4         |                       |
| ARICEPT ORAL TABLET 10 MG, 23 MG, 5 MG                                                                                                   | 4         | Brand penalty applies |
| donepezil hcl oral tablet 10 mg, 23 mg, 5 mg                                                                                             | 2         |                       |
| donepezil hcl oral tablet dispersible 10 mg, 5 mg                                                                                        | 2         |                       |

| Drug Name                                                                                      | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------|-----------|-----------------------|
| EXELON TRANSDERMAL PATCH 24 HOUR 13.3 MG/24HR, 4.6 MG/24HR, 9.5 MG/24HR                        | 4         | Brand penalty applies |
| galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg           | 2         |                       |
| galantamine hydrobromide oral solution 4 mg/ml                                                 | 2         |                       |
| galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg                                         | 2         |                       |
| LEQEMBI INTRAVENOUS SOLUTION 200 MG/2ML, 500 MG/5ML                                            | 6         | PA; Specialty Medical |
| LEQEMBI IQLIK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 360 MG/1.8ML                                 | 6         | PA                    |
| memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg               | 2         |                       |
| memantine hcl oral solution 10 mg/5ml, 2 mg/ml                                                 | 2         |                       |
| memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg, 5 mg                                  | 2         |                       |
| memantine hcl-donepezil hcl oral capsule extended release 24 hour 14-10 mg, 21-10 mg, 28-10 mg | 2         |                       |
| NAMENDA ORAL TABLET 10 MG, 5 MG                                                                | 4         | Brand penalty applies |

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| Drug Name                                                                     | Drug Tier | Notes                      |
|-------------------------------------------------------------------------------|-----------|----------------------------|
| NAMENDA TITRATION PAK ORAL TABLET 28 X 5 MG & 21 X 10 MG                      | 4         | Brand penalty applies      |
| NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG          | 4         | Brand penalty applies      |
| NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK 7 & 14 & 21 & 28 -10 MG         | 4         |                            |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG   | 4         | Brand penalty applies      |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7-10 MG                        | 4         |                            |
| rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg                 | 2         |                            |
| rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr | 2         |                            |
| <b>Antidepressants</b>                                                        |           |                            |
| amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg      | 2         |                            |
| amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg                            | 2         |                            |
| ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG                                    | 4         | Brand penalty applies      |
| APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG, 522 MG          | 4         | ST; QL (30 EA per 30 days) |

| Drug Name                                                                         | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------|-----------|-----------------------|
| AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG                                   | 4         | ST                    |
| bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg | 2         |                       |
| bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg         | 2         |                       |
| bupropion hcl oral tablet 100 mg, 75 mg                                           | 2         |                       |
| CELEXA ORAL TABLET 10 MG, 20 MG, 40 MG                                            | 4         | Brand penalty applies |
| chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg                    | 2         |                       |
| CITALOPRAM HYDROBROMIDE ORAL CAPSULE 30 MG                                        | 3         |                       |
| citalopram hydrobromide oral solution 10 mg/5ml, 20 mg/10ml                       | 2         |                       |
| citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg                           | 1         |                       |
| clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg                                 | 2         |                       |
| CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG, 30 MG, 60 MG               | 4         | Brand penalty applies |
| desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg            | 2         |                       |
| DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 50 MG              | 4         |                       |

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| Drug Name                                                                                      | Drug Tier | Notes                       | Drug Name                                                                            | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------|-----------|-----------------------------|--------------------------------------------------------------------------------------|-----------|-----------------------------|
| desvenlafaxine succinate<br>er oral tablet extended<br>release 24 hour 100 mg,<br>25 mg, 50 mg | 2         |                             | fluoxetine hcl oral<br>solution 20 mg/5ml                                            | 2         |                             |
| doxepin hcl oral capsule<br>10 mg, 100 mg, 150 mg,<br>25 mg, 50 mg, 75 mg                      | 2         |                             | fluoxetine hcl oral tablet<br>10 mg, 20 mg                                           | 2         |                             |
| doxepin hcl oral<br>concentrate 10 mg/ml                                                       | 2         |                             | fluvoxamine maleate er<br>oral capsule extended<br>release 24 hour 100 mg,<br>150 mg | 2         |                             |
| duloxetine hcl oral<br>capsule delayed release<br>particles 20 mg, 30 mg,<br>60 mg             | 2         |                             | fluvoxamine maleate oral<br>tablet 100 mg, 25 mg, 50<br>mg                           | 2         |                             |
| EFFEXOR XR ORAL<br>CAPSULE EXTENDED<br>RELEASE 24 HOUR 150<br>MG, 37.5 MG, 75 MG               | 4         | Brand<br>penalty<br>applies | imipramine hcl oral tablet<br>10 mg, 25 mg, 50 mg                                    | 2         |                             |
| EMSAM<br>TRANSDERMAL PATCH<br>24 HOUR 12 MG/24HR,<br>6 MG/24HR, 9 MG/24HR                      | 3         |                             | imipramine pamoate oral<br>capsule 100 mg, 125 mg,<br>150 mg, 75 mg                  | 2         |                             |
| escitalopram oxalate oral<br>solution 10 mg/10ml, 5<br>mg/5ml                                  | 2         |                             | LEXAPRO ORAL<br>TABLET 10 MG, 20 MG,<br>5 MG                                         | 4         | Brand<br>penalty<br>applies |
| escitalopram oxalate oral<br>tablet 10 mg, 20 mg, 5<br>mg                                      | 2         |                             | MARPLAN ORAL<br>TABLET 10 MG                                                         | 4         |                             |
| FETZIMA ORAL<br>CAPSULE EXTENDED<br>RELEASE 24 HOUR 120<br>MG, 20 MG, 40 MG, 80<br>MG          | 4         | PA                          | mirtazapine oral tablet 15<br>mg, 30 mg, 45 mg, 7.5<br>mg                            | 2         |                             |
| FETZIMA TITRATION<br>ORAL CAPSULE ER 24<br>HOUR THERAPY PACK<br>20 & 40 MG                     | 4         | PA                          | mirtazapine oral tablet<br>dispersible 15 mg, 30<br>mg, 45 mg                        | 2         |                             |
| fluoxetine hcl oral<br>capsule 10 mg, 20 mg,<br>40 mg                                          | 1         |                             | NARDIL ORAL TABLET<br>15 MG                                                          | 4         | Brand<br>penalty<br>applies |
| fluoxetine hcl oral<br>capsule delayed release<br>90 mg                                        | 2         |                             | nefazodone hcl oral<br>tablet 100 mg, 150 mg,<br>200 mg, 250 mg, 50 mg               | 2         |                             |
|                                                                                                |           |                             | NORPRAMIN ORAL<br>TABLET 10 MG, 25 MG                                                | 4         | Brand<br>penalty<br>applies |
|                                                                                                |           |                             | nortriptyline hcl oral<br>capsule 10 mg, 25 mg,<br>50 mg, 75 mg                      | 2         |                             |
|                                                                                                |           |                             | nortriptyline hcl oral<br>solution 10 mg/5ml                                         | 2         |                             |

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| Drug Name                                                                            | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------|-----------|-----------------------|
| olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg | 2         | ST                    |
| PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG                                      | 4         | Brand penalty applies |
| PARNATE ORAL TABLET 10 MG                                                            | 4         | Brand penalty applies |
| paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg       | 2         |                       |
| paroxetine hcl oral suspension 10 mg/5ml                                             | 2         |                       |
| paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg                                | 2         |                       |
| paroxetine mesylate oral capsule 7.5 mg                                              | 2         |                       |
| PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG                | 4         | Brand penalty applies |
| PAXIL ORAL SUSPENSION 10 MG/5ML                                                      | 3         |                       |
| PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG                                         | 4         | Brand penalty applies |
| perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg   | 2         |                       |
| phenelzine sulfate oral tablet 15 mg                                                 | 2         |                       |
| PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG                    | 4         | Brand penalty applies |

| Drug Name                                                      | Drug Tier | Notes                     |
|----------------------------------------------------------------|-----------|---------------------------|
| protriptyline hcl oral tablet 10 mg, 5 mg                      | 2         |                           |
| PROZAC ORAL CAPSULE 10 MG, 20 MG, 40 MG                        | 4         | Brand penalty applies     |
| REMERON ORAL TABLET 15 MG, 30 MG                               | 4         | Brand penalty applies     |
| REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG, 45 MG     | 4         | Brand penalty applies     |
| sertraline hcl oral capsule 150 mg, 200 mg                     | 2         |                           |
| sertraline hcl oral concentrate 20 mg/ml                       | 2         |                           |
| sertraline hcl oral tablet 100 mg, 25 mg, 50 mg                | 1         |                           |
| SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE | 6         | PA; Specialty Medical     |
| SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE | 6         | PA; Specialty Medical     |
| SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG                          | 4         | ST; Brand penalty applies |
| tranylcypromine sulfate oral tablet 10 mg                      | 2         |                           |
| trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg        | 2         |                           |
| trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg         | 2         |                           |
| TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG                      | 4         |                           |

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| Drug Name                                                                                | Drug Tier | Notes                             | Drug Name                                                                  | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------|-----------|-----------------------------------|----------------------------------------------------------------------------|-----------|-----------------------------|
| VENLAFAXINE<br>BESYLATE ER ORAL<br>TABLET EXTENDED<br>RELEASE 24 HOUR<br>112.5 MG        | 4         |                                   | AKYNZEO (TO-BE-<br>DILUTED)<br>INTRAVENOUS<br>SOLUTION 235-0.25<br>MG/20ML | GM        |                             |
| venlafaxine hcl er oral<br>capsule extended<br>release 24 hour 150 mg,<br>37.5 mg, 75 mg | 2         |                                   | AKYNZEO<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 235-<br>0.25 MG        | GM        |                             |
| venlafaxine hcl oral tablet<br>100 mg, 25 mg, 37.5 mg,<br>50 mg, 75 mg                   | 2         |                                   | AKYNZEO ORAL<br>CAPSULE 300-0.5 MG                                         | 4         | QL (3 EA<br>per 21<br>days) |
| VIIBRYD ORAL TABLET<br>10 MG, 20 MG, 40 MG                                               | 4         | Brand<br>penalty<br>applies       | ANTIVERT ORAL<br>TABLET 50 MG                                              | 4         | Brand<br>penalty<br>applies |
| vilazodone hcl oral tablet<br>10 mg, 20 mg, 40 mg                                        | 2         |                                   | ANTIVERT ORAL<br>TABLET CHEWABLE 25<br>MG                                  | 4         |                             |
| WELLBUTRIN SR ORAL<br>TABLET EXTENDED<br>RELEASE 12 HOUR 100<br>MG, 150 MG, 200 MG       | 4         | Brand<br>penalty<br>applies       | ANZEMET ORAL<br>TABLET 50 MG                                               | 3         |                             |
| WELLBUTRIN XL ORAL<br>TABLET EXTENDED<br>RELEASE 24 HOUR 150<br>MG, 300 MG               | 4         | Brand<br>penalty<br>applies       | APONVIE<br>INTRAVENOUS<br>EMULSION 32<br>MG/4.4ML                          | GM        |                             |
| ZOLOFT ORAL<br>CONCENTRATE 20<br>MG/ML                                                   | 4         | Brand<br>penalty<br>applies       | aprepitant oral capsule<br>125 mg, 40 mg, 80 & 125<br>mg, 80 mg            | 2         | QL (6 EA<br>per 30<br>days) |
| ZOLOFT ORAL TABLET<br>100 MG, 25 MG, 50 MG                                               | 4         | Brand<br>penalty<br>applies       | BARHEMSYS<br>INTRAVENOUS<br>SOLUTION 10 MG/4ML,<br>5 MG/2ML                | GM        |                             |
| ZURZUVAE ORAL<br>CAPSULE 20 MG, 25<br>MG                                                 | 6         | PA; QL (28<br>EA per 365<br>days) | CINVANTI<br>INTRAVENOUS<br>EMULSION 130<br>MG/18ML                         | GM        | QL (6 ML<br>per 30<br>days) |
| ZURZUVAE ORAL<br>CAPSULE 30 MG                                                           | 6         | PA; QL (14<br>EA per 365<br>days) | COMPRO RECTAL<br>SUPPOSITORY 25 MG                                         | 4         | Brand<br>penalty<br>applies |
| <b>Antiemetics - Drugs for<br/>Nausea and Vomiting</b>                                   |           |                                   | dimenhydrinate injection<br>solution 50 mg/ml                              | GM        |                             |
| AKYNZEO (READY-TO-<br>USE) INTRAVENOUS<br>SOLUTION 235-0.25<br>MG/20ML                   | GM        |                                   | dronabinol oral capsule<br>10 mg, 2.5 mg, 5 mg                             | 2         |                             |

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| Drug Name                                                           | Drug Tier | Notes                                        |
|---------------------------------------------------------------------|-----------|----------------------------------------------|
| droperidol injection solution 2.5 mg/ml                             | GM        |                                              |
| DROPERIDOL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.625 MG/ML       | GM        |                                              |
| EMEND BIPACK ORAL CAPSULE 80 MG                                     | 4         | Brand penalty applies; QL (6 EA per 30 days) |
| EMEND INTRAVENOUS SOLUTION RECONSTITUTED 150 MG                     | GM        |                                              |
| EMEND ORAL SUSPENSION RECONSTITUTED 125 MG/5ML                      | 3         | QL (6 EA per 30 days)                        |
| EMEND TRIPACK ORAL CAPSULE 80 & 125 MG                              | 4         | Brand penalty applies; QL (6 EA per 30 days) |
| FOCINVEZ INTRAVENOUS SOLUTION 150 MG/50ML                           | GM        |                                              |
| fosaprepitant dimeglumine intravenous solution reconstituted 150 mg | GM        |                                              |
| granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml              | GM        |                                              |
| granisetron hcl oral tablet 1 mg                                    | 2         |                                              |
| MARINOL ORAL CAPSULE 10 MG, 2.5 MG, 5 MG                            | 4         | Brand penalty applies                        |
| meclizine hcl oral tablet 12.5 mg, 25 mg, 50 mg                     | 2         |                                              |

| Drug Name                                                           | Drug Tier | Notes |
|---------------------------------------------------------------------|-----------|-------|
| metoclopramide hcl injection solution 5 mg/ml                       | GM        |       |
| metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml               | 2         |       |
| metoclopramide hcl oral tablet 10 mg, 5 mg                          | 2         |       |
| metoclopramide hcl oral tablet dispersible 5 mg                     | 2         |       |
| ondansetron hcl +rfd injection solution 4 mg/2ml                    | GM        |       |
| ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml             | GM        |       |
| ondansetron hcl injection solution prefilled syringe 4 mg/2ml       | GM        |       |
| ondansetron hcl oral solution 4 mg/5ml                              | 2         |       |
| ondansetron hcl oral tablet 24 mg, 4 mg, 8 mg                       | 2         |       |
| ondansetron odt oral tablet dispersible 16 mg, 4 mg, 8 mg           | 2         |       |
| palonosetron hcl intravenous solution 0.25 mg/2ml, 0.25 mg/5ml      | GM        |       |
| palonosetron hcl intravenous solution prefilled syringe 0.25 mg/5ml | GM        |       |
| perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg                    | 2         |       |
| PHENERGAN INJECTION SOLUTION 25 MG/ML, 50 MG/ML                     | GM        |       |
| POSFREA INTRAVENOUS SOLUTION 0.25 MG/5ML                            | GM        |       |

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| Drug Name                                                | Drug Tier | Notes                 |
|----------------------------------------------------------|-----------|-----------------------|
| prochlorperazine edisylate injection solution 10 mg/2ml  | GM        |                       |
| prochlorperazine maleate oral tablet 10 mg, 5 mg         | 2         |                       |
| prochlorperazine rectal suppository 25 mg                | 2         |                       |
| promethazine hcl injection solution 25 mg/ml, 50 mg/ml   | GM        |                       |
| promethazine hcl oral solution 12.5 mg/10ml, 6.25 mg/5ml | 2         |                       |
| promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg       | 2         |                       |
| promethazine hcl rectal suppository 12.5 mg, 25 mg       | 2         |                       |
| PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG            | 4         | Brand penalty applies |
| PROMETHEGAN RECTAL SUPPOSITORY 50 MG                     | 4         |                       |
| REGLAN ORAL TABLET 10 MG, 5 MG                           | 4         | Brand penalty applies |
| SANCUSO TRANSDERMAL PATCH 3.1 MG/24HR                    | 3         | QL (1 EA per 30 days) |
| scopolamine transdermal patch 72 hour 1 mg/3days         | 2         |                       |
| SUSTOL SUBCUTANEOUS PREFILLED SYRINGE 10 MG/0.4ML        | 6         | QL (2 ML per 30 days) |
| SYNDROS ORAL SOLUTION 5 MG/ML                            | 4         |                       |

| Drug Name                                                          | Drug Tier | Notes                    |
|--------------------------------------------------------------------|-----------|--------------------------|
| TIGAN INTRAMUSCULAR SOLUTION 100 MG/ML                             | GM        |                          |
| TRANSDERM SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS                | 4         | Brand penalty applies    |
| TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS                | 4         | Brand penalty applies    |
| trimethobenzamide hcl oral capsule 300 mg                          | 2         |                          |
| VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK 2 X 90 MG            | 4         | QL (4 EA per 30 days)    |
| <b>Antifungals</b>                                                 |           |                          |
| ABELCET INTRAVENOUS SUSPENSION 5 MG/ML                             | GM        |                          |
| AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED 50 MG                | GM        |                          |
| amphotericin b intravenous solution reconstituted 50 mg            | GM        |                          |
| amphotericin b liposome intravenous suspension reconstituted 50 mg | GM        |                          |
| ANCOBON ORAL CAPSULE 250 MG, 500 MG                                | 4         | Brand penalty applies    |
| BREXAFEMME ORAL TABLET 150 MG                                      | 4         | PA; QL (4 EA per 1 fill) |
| CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED 50 MG, 70 MG           | GM        |                          |

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| Drug Name                                                           | Drug Tier | Notes                    |
|---------------------------------------------------------------------|-----------|--------------------------|
| caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg | GM        |                          |
| ciclodan external solution 8 %                                      | 2         | QL (13.2 ML per 30 days) |
| ciclopirox external gel 0.77 %                                      | 2         |                          |
| ciclopirox external shampoo 1 %                                     | 2         |                          |
| ciclopirox external solution 8 %                                    | 2         | QL (13.2 ML per 30 days) |
| ciclopirox olamine external cream 0.77 %                            | 2         |                          |
| ciclopirox olamine external suspension 0.77 %                       | 2         |                          |
| clotrimazole external cream 1 %                                     | 2         |                          |
| clotrimazole external solution 1 %                                  | 2         |                          |
| clotrimazole mouth/throat troche 10 mg                              | 2         |                          |
| clotrimazole-betamethasone external cream 1-0.05 %                  | 2         |                          |
| clotrimazole-betamethasone external lotion 1-0.05 %                 | 2         |                          |
| CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED 372 MG                  | 6         | PA; Specialty Medical    |
| CRESEMBA ORAL CAPSULE 186 MG                                        | 6         | PA                       |
| DIFLUCAN ORAL SUSPENSION RECONSTITUTED 40 MG/ML                     | 4         | Brand penalty applies    |

| Drug Name                                                                                                     | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG                                                                   | 4         | Brand penalty applies |
| econazole nitrate external cream 1 %                                                                          | 2         |                       |
| ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG                                                       | GM        |                       |
| ERTACZO EXTERNAL CREAM 2 %                                                                                    | 4         | ST                    |
| EXELDERM EXTERNAL CREAM 1 %                                                                                   | 4         | ST                    |
| EXELDERM EXTERNAL SOLUTION 1 %                                                                                | 4         | ST                    |
| EXODERM EXTERNAL LOTION 25-1 %                                                                                | 4         |                       |
| fluconazole in sodium chloride intravenous solution 100-0.9 mg/50ml-%, 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-% | GM        |                       |
| fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml                                                  | 2         |                       |
| fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg                                                         | 2         |                       |
| flucytosine oral capsule 250 mg, 500 mg                                                                       | 2         |                       |
| griseofulvin microsize oral suspension 125 mg/5ml                                                             | 2         |                       |
| griseofulvin microsize oral tablet 500 mg                                                                     | 2         |                       |
| griseofulvin ultramicrosize oral tablet 125 mg, 250 mg                                                        | 2         |                       |
| GYNAZOLE-1 VAGINAL CREAM 2 %                                                                                  | 4         |                       |

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| Drug Name                                                           | Drug Tier | Notes                     |
|---------------------------------------------------------------------|-----------|---------------------------|
| hydrocortisone-iodoquinol external cream 1-1 %                      | 2         |                           |
| IDOQUIMEZ-HC EXTERNAL CREAM 1-1.9 %                                 | 4         |                           |
| iodoquinol-hc-aloe polysacch external gel 1-2-1 %                   | 2         |                           |
| iodoquinol-hydrocortisone-aloe external cream 1-1.9 %               | 2         |                           |
| itraconazole oral capsule 100 mg                                    | 2         |                           |
| itraconazole oral solution 10 mg/ml                                 | 2         |                           |
| JUBLIA EXTERNAL SOLUTION 10 %                                       | 4         | PA                        |
| KERYDIN EXTERNAL SOLUTION 5 %                                       | 4         | PA; Brand penalty applies |
| ketoconazole external cream 2 %                                     | 2         |                           |
| ketoconazole external foam 2 %                                      | 2         |                           |
| ketoconazole external shampoo 2 %                                   | 2         |                           |
| ketoconazole oral tablet 200 mg                                     | 2         |                           |
| ketodan external foam 2 %                                           | 2         |                           |
| klayesta external powder 100000 unit/gm                             | 2         |                           |
| LULICONAZOLE EXTERNAL CREAM 1 %                                     | 4         | ST                        |
| LUZU EXTERNAL CREAM 1 %                                             | 4         | ST                        |
| micalfungin sodium intravenous solution reconstituted 100 mg, 50 mg | GM        |                           |

| Drug Name                                                                                            | Drug Tier | Notes                     |
|------------------------------------------------------------------------------------------------------|-----------|---------------------------|
| MICAFUNGIN SODIUM-NACL INTRAVENOUS SOLUTION 100-0.9 MG/100ML-%, 150-0.9 MG/150ML-%, 50-0.9 MG/50ML-% | GM        |                           |
| MICONATATE EXTERNAL THERAPY PACK 2-1 %                                                               | 4         |                           |
| miconazole 3 vaginal suppository 200 mg                                                              | 2         |                           |
| MICONAZOLE-ZINC OXIDE-PETROLAT EXTERNAL OINTMENT 0.25-15-81.35 %                                     | 4         |                           |
| MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG                                            | GM        |                           |
| naftifine hcl external cream 1 %, 2 %                                                                | 2         |                           |
| naftifine hcl external gel 2 %                                                                       | 2         |                           |
| NAFTIN EXTERNAL GEL 1 %                                                                              | 4         | ST                        |
| NAFTIN EXTERNAL GEL 2 %                                                                              | 4         | ST; Brand penalty applies |
| NOXAFIL INTRAVENOUS SOLUTION 300 MG/16.7ML                                                           | 6         | Specialty Medical         |
| NOXAFIL ORAL PACKET 300 MG                                                                           | 6         |                           |
| NOXAFIL ORAL SUSPENSION 40 MG/ML                                                                     | 6         |                           |
| NOXAFIL ORAL TABLET DELAYED RELEASE 100 MG                                                           | 6         |                           |
| nystatin external cream 100000 unit/gm                                                               | 2         |                           |

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| Drug Name                                                     | Drug Tier | Notes                     |
|---------------------------------------------------------------|-----------|---------------------------|
| nystatin external ointment 100000 unit/gm                     | 2         |                           |
| nystatin external powder 100000 unit/gm                       | 2         |                           |
| nystatin mouth/throat suspension 100000 unit/ml               | 2         |                           |
| nystatin oral tablet 500000 unit                              | 2         |                           |
| nystatin-triamcinolone external cream 100000-0.1 unit/gm-%    | 2         |                           |
| nystatin-triamcinolone external ointment 100000-0.1 unit/gm-% | 2         |                           |
| nystop external powder 100000 unit/gm                         | 2         |                           |
| ORAVIG BUCCAL TABLET 50 MG                                    | 4         |                           |
| oxiconazole nitrate external cream 1 %                        | 2         |                           |
| OXISTAT EXTERNAL CREAM 1 %                                    | 4         | ST; Brand penalty applies |
| OXISTAT EXTERNAL LOTION 1 %                                   | 4         | ST                        |
| posaconazole intravenous solution 300 mg/16.7ml               | 6         | Specialty Medical         |
| posaconazole oral suspension 40 mg/ml                         | 6         |                           |
| posaconazole oral tablet delayed release 100 mg               | 6         |                           |
| SPORANOX ORAL CAPSULE 100 MG                                  | 4         | Brand penalty applies     |
| SPORANOX ORAL SOLUTION 10 MG/ML                               | 4         | Brand penalty applies     |
| SULCONAZOLE NITRATE EXTERNAL CREAM 1 %                        | 4         | ST                        |

| Drug Name                                              | Drug Tier | Notes                       |
|--------------------------------------------------------|-----------|-----------------------------|
| SULCONAZOLE NITRATE EXTERNAL SOLUTION 1 %              | 4         | ST                          |
| tavaborole external solution 5 %                       | 2         | PA                          |
| terbinafine hcl oral tablet 250 mg                     | 2         |                             |
| terconazole vaginal cream 0.4 %, 0.8 %                 | 2         |                             |
| terconazole vaginal suppository 80 mg                  | 2         |                             |
| VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED 200 MG     | 5         | Specialty Medical           |
| VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML           | 6         |                             |
| VFEND ORAL TABLET 50 MG                                | 6         |                             |
| VIVJOA ORAL CAPSULE THERAPY PACK 150 MG                | 4         | PA; QL (18 EA per 365 days) |
| voriconazole intravenous solution reconstituted 200 mg | 5         | Specialty Medical           |
| voriconazole oral suspension reconstituted 40 mg/ml    | 5         |                             |
| voriconazole oral tablet 200 mg, 50 mg                 | 5         |                             |
| VUSION EXTERNAL OINTMENT 0.25-15-81.35 %               | 4         |                             |
| VYONE EXTERNAL CREAM 1-1.9 %                           | 4         |                             |
| XOLEGEL COREPAK EXTERNAL KIT 2 & 1 %                   | 4         |                             |

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| Drug Name                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------|-----------|-----------------------|
| XOLEGEL DUO/HEAD & SHOULDERS EXTERNAL KIT 2 & 1 %            | 4         |                       |
| XOLEGEL DUO/XOLEX EXTERNAL KIT 2 & 1 %                       | 4         |                       |
| <b>Antigout Agents</b>                                       |           |                       |
| allopurinol oral tablet 100 mg, 300 mg                       | 1         |                       |
| allopurinol sodium intravenous solution reconstituted 500 mg | GM        |                       |
| ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED 500 MG            | GM        |                       |
| colchicine oral capsule 0.6 mg                               | 2         |                       |
| colchicine oral tablet 0.6 mg                                | 2         |                       |
| colchicine-probenecid oral tablet 0.5-500 mg                 | 2         |                       |
| COLCRYS ORAL TABLET 0.6 MG                                   | 3         |                       |
| febuxostat oral tablet 40 mg, 80 mg                          | 2         |                       |
| GLOPERBA ORAL SOLUTION 0.6 MG/5ML                            | 4         |                       |
| KRYSTEXXA INTRAVENOUS SOLUTION 8 MG/50ML, 8 MG/ML            | 6         | PA; Specialty Medical |
| MITIGARE ORAL CAPSULE 0.6 MG                                 | 3         | Brand penalty applies |
| probenecid oral tablet 500 mg                                | 2         |                       |
| ULORIC ORAL TABLET 40 MG, 80 MG                              | 4         | Brand penalty applies |

| Drug Name                                                       | Drug Tier | Notes                       |
|-----------------------------------------------------------------|-----------|-----------------------------|
| <b>Antimigraine Agents</b>                                      |           |                             |
| AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML | 3         | PA; QL (1 ML per 28 days)   |
| AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML          | 3         | PA; QL (1.5 ML per 28 days) |
| AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML      | 3         | PA; QL (1.5 ML per 28 days) |
| almotriptan malate oral tablet 12.5 mg, 6.25 mg                 | 2         | QL (9 EA per 30 days)       |
| CAMBIA ORAL PACKET 50 MG                                        | 4         | Brand penalty applies       |
| diclofenac potassium(migraine) oral packet 50 mg                | 2         |                             |
| dihydroergotamine mesylate injection solution 1 mg/ml           | GM        |                             |
| dihydroergotamine mesylate nasal solution 4 mg/ml               | 2         | PA; QL (8 ML per 30 days)   |
| eletriptan hydrobromide oral tablet 20 mg, 40 mg                | 2         | QL (9 EA per 30 days)       |
| EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML          | 4         | PA; QL (2 ML per 28 days)   |
| EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML      | 4         | PA; QL (3 ML per 28 days)   |

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| Drug Name                                                                          | Drug Tier | Notes                                         |
|------------------------------------------------------------------------------------|-----------|-----------------------------------------------|
| EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML                         | 4         | PA; QL (2 ML per 28 days)                     |
| ERGOMAR SUBLINGUAL TABLET SUBLINGUAL 2 MG                                          | 4         |                                               |
| ergotamine-caffeine oral tablet 1-100 mg                                           | 2         |                                               |
| FROVA ORAL TABLET 2.5 MG                                                           | 4         | Brand penalty applies; QL (9 EA per 30 days)  |
| frovatriptan succinate oral tablet 2.5 mg                                          | 2         | QL (9 EA per 30 days)                         |
| IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT                                         | 4         | Brand penalty applies; QL (6 EA per 30 days)  |
| IMITREX ORAL TABLET 100 MG, 25 MG, 50 MG                                           | 4         | Brand penalty applies; QL (9 EA per 30 days)  |
| IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML, 6 MG/0.5ML     | 4         | Brand penalty applies; QL (2 ML per 30 days)  |
| IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML, 6 MG/0.5ML | 4         | Brand penalty applies; QL (2 ML per 30 days)  |
| MAXALT ORAL TABLET 10 MG                                                           | 4         | Brand penalty applies; QL (12 EA per 30 days) |

| Drug Name                                                | Drug Tier | Notes                                            |
|----------------------------------------------------------|-----------|--------------------------------------------------|
| MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG                 | 4         | Brand penalty applies; QL (12 EA per 30 days)    |
| MIGERGOT RECTAL SUPPOSITORY 2-100 MG                     | 4         |                                                  |
| MIGRANAL NASAL SOLUTION 4 MG/ML                          | 4         | PA; Brand penalty applies; QL (8 ML per 30 days) |
| naratriptan hcl oral tablet 1 mg, 2.5 mg                 | 2         | QL (9 EA per 30 days)                            |
| NURTEC ORAL TABLET DISPERSIBLE 75 MG                     | 3         | PA; QL (16 EA per 30 days)                       |
| QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG                  | 3         | PA; QL (30 EA per 30 days)                       |
| RELPAK ORAL TABLET 20 MG, 40 MG                          | 4         | Brand penalty applies; QL (9 EA per 30 days)     |
| REYVOW ORAL TABLET 100 MG                                | 4         | PA; QL (8 EA per 30 days)                        |
| REYVOW ORAL TABLET 50 MG                                 | 4         | PA; QL (4 EA per 30 days)                        |
| rizatriptan benzoate oral tablet 10 mg, 5 mg             | 2         | QL (12 EA per 30 days)                           |
| rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg | 2         | QL (12 EA per 30 days)                           |
| sumatriptan nasal solution 20 mg/act, 5 mg/act           | 2         | QL (6 EA per 30 days)                            |

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| Drug Name                                                                                                           | Drug Tier | Notes                                            |
|---------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------|
| sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg                                                              | 2         | QL (9 EA per 30 days)                            |
| sumatriptan succinate refill subcutaneous solution cartridge subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml | 2         | QL (2 ML per 30 days)                            |
| sumatriptan succinate subcutaneous solution 6 mg/0.5ml                                                              | 2         | QL (2 ML per 30 days)                            |
| sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml                                    | 2         | QL (2 ML per 30 days)                            |
| sumatriptan-naproxen sodium oral tablet 85-500 mg                                                                   | 2         | PA; QL (9 EA per 30 days)                        |
| TREXIMET ORAL TABLET 85-500 MG                                                                                      | 4         | PA; Brand penalty applies; QL (9 EA per 30 days) |
| UBRELVY ORAL TABLET 100 MG, 50 MG                                                                                   | 3         | PA; QL (10 EA per 30 days)                       |
| VYEPTI INTRAVENOUS SOLUTION 100 MG/ML                                                                               | 5         | PA; Specialty Medical                            |
| ZAVZPRET NASAL SOLUTION 10 MG/ACT                                                                                   | 4         | PA; QL (6 EA per 30 days)                        |
| ZOLMITRIPTAN NASAL SOLUTION 2.5 MG                                                                                  | 4         | QL (6 EA per 30 days)                            |
| zolmitriptan nasal solution 5 mg                                                                                    | 2         | QL (6 EA per 30 days)                            |
| zolmitriptan oral tablet 2.5 mg, 5 mg                                                                               | 2         | QL (9 EA per 30 days)                            |

| Drug Name                                                                 | Drug Tier | Notes                                        |
|---------------------------------------------------------------------------|-----------|----------------------------------------------|
| zolmitriptan oral tablet dispersible 2.5 mg, 5 mg                         | 2         | QL (9 EA per 30 days)                        |
| ZOMIG NASAL SOLUTION 2.5 MG                                               | 4         | QL (6 EA per 30 days)                        |
| ZOMIG NASAL SOLUTION 5 MG                                                 | 4         | Brand penalty applies; QL (6 EA per 30 days) |
| ZOMIG ORAL TABLET 2.5 MG, 5 MG                                            | 4         | Brand penalty applies; QL (9 EA per 30 days) |
| <b>Antimyasthenic Agents</b>                                              |           |                                              |
| BLOXIVERZ INTRAVENOUS SOLUTION 10 MG/10ML, 5 MG/10ML                      | GM        |                                              |
| MESTINON ORAL SOLUTION 60 MG/5ML                                          | 4         | Brand penalty applies                        |
| MESTINON ORAL TABLET 60 MG                                                | 4         | Brand penalty applies                        |
| MESTINON ORAL TABLET EXTENDED RELEASE 180 MG                              | 4         | Brand penalty applies                        |
| neostigmine methylsulfate intravenous solution 10 mg/10ml, 5 mg/10ml      | GM        |                                              |
| NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 3 MG/3ML, 5 MG/5ML         | GM        |                                              |
| NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 4 MG/4ML | GM        |                                              |

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| Drug Name                                                                      | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------|-----------|----------------------------|
| neostigmine methylsulfate rfid intravenous solution 10 mg/10ml                 | GM        |                            |
| neostigmine methylsulfate rfid intravenous solution prefilled syringe 3 mg/3ml | GM        |                            |
| neostigmine methylsulfate solution prefilled syringe 3 mg/3ml intravenous      | GM        |                            |
| NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 3 MG/3ML INTRAVENOUS      | GM        |                            |
| pyridostigmine bromide er oral tablet extended release 180 mg                  | 2         |                            |
| pyridostigmine bromide oral solution 60 mg/5ml                                 | 2         |                            |
| pyridostigmine bromide oral tablet 30 mg, 60 mg                                | 2         |                            |
| REGONOL INTRAVENOUS SOLUTION 10 MG/2ML                                         | GM        |                            |
| VYVGART HYTRULO SUBCUTANEOUS SOLUTION 180-2000 MG-UNIT/ML                      | 6         | PA                         |
| VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1000-10000 MG-UNT/5ML  | 6         | PA; QL (20 ML per 28 days) |
| VYVGART INTRAVENOUS SOLUTION 400 MG/20ML                                       | 6         | PA; Specialty Medical      |

| Drug Name                                          | Drug Tier | Notes                      |
|----------------------------------------------------|-----------|----------------------------|
| <b>Antimycobacterials</b>                          |           |                            |
| cycloserine oral capsule 250 mg                    | 2         |                            |
| dapsone oral tablet 100 mg, 25 mg                  | 2         |                            |
| ethambutol hcl oral tablet 100 mg, 400 mg          | 2         |                            |
| isoniazid injection solution 100 mg/ml             | GM        |                            |
| isoniazid oral syrup 50 mg/5ml                     | 2         |                            |
| isoniazid oral tablet 100 mg, 300 mg               | 2         |                            |
| MYAMBUTOL ORAL TABLET 400 MG                       | 4         | Brand penalty applies      |
| MYCOBUTIN ORAL CAPSULE 150 MG                      | 4         | Brand penalty applies      |
| PRETOMANID ORAL TABLET 200 MG                      | 4         | PA; QL (30 EA per 30 days) |
| PRIFTIN ORAL TABLET 150 MG                         | 4         |                            |
| pyrazinamide oral tablet 500 mg                    | 2         |                            |
| rifabutin oral capsule 150 mg                      | 2         |                            |
| RIFADIN INTRAVENOUS SOLUTION RECONSTITUTED 600 MG  | GM        |                            |
| rifampin intravenous solution reconstituted 600 mg | GM        |                            |
| rifampin oral capsule 150 mg, 300 mg               | 2         |                            |
| SIRTURO ORAL TABLET 100 MG, 20 MG                  | 6         | PA                         |
| TRECATOR ORAL TABLET 250 MG                        | 4         |                            |

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| Drug Name                                                | Drug Tier | Notes                      |
|----------------------------------------------------------|-----------|----------------------------|
| <b>Antineoplastics - Drugs for Cancer</b>                |           |                            |
| ABECMA INTRAVENOUS SUSPENSION 460000000 CELLS            | 6         | PA; Specialty Medical      |
| abiraterone acetate oral tablet 250 mg                   | 5         | PA                         |
| abiraterone acetate oral tablet 500 mg                   | 6         | PA                         |
| abirtega oral tablet 250 mg                              | 5         | PA                         |
| ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED 100 MG     | 6         | PA; Specialty Medical      |
| ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED 50 MG        | 6         | PA; Specialty Medical      |
| adriamycin intravenous solution reconstituted 50 mg      | GM        | PA                         |
| ADSTILADRIN INTRAVESICAL SUSPENSION 300000000000 VP/ML   | 6         |                            |
| AKEEGA ORAL TABLET 100-500 MG, 50-500 MG                 | 6         | PA; QL (60 EA per 30 days) |
| ALECENSA ORAL CAPSULE 150 MG                             | 6         | PA                         |
| ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 500 MG | 6         | PA; Specialty Medical      |
| ALIQOPA INTRAVENOUS SOLUTION RECONSTITUTED 60 MG         | 6         | PA; Specialty Medical      |

| Drug Name                                                | Drug Tier | Notes                 |
|----------------------------------------------------------|-----------|-----------------------|
| ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG                | 6         | PA                    |
| ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG            | 6         | PA                    |
| ALYMSYS INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML     | 5         | PA; Specialty Medical |
| AMTAGVI INTRAVENOUS SUSPENSION 72000000000 CELLS         | 6         | PA; Specialty Medical |
| anastrozole oral tablet 1 mg                             | 2         |                       |
| ANKTIVA INTRAVESICAL SOLUTION 400 MCG/0.4ML              | 6         | PA; Specialty Medical |
| ARIMIDEX ORAL TABLET 1 MG                                | 4         | Brand penalty applies |
| AROMASIN ORAL TABLET 25 MG                               | 4         | Brand penalty applies |
| ARRANON INTRAVENOUS SOLUTION 5 MG/ML                     | 6         | PA; Specialty Medical |
| arsenic trioxide intravenous solution 10 mg/10ml         | 6         | PA; Specialty Medical |
| ARZERRA INTRAVENOUS CONCENTRATE 100 MG/5ML, 1000 MG/50ML | 6         | PA; Specialty Medical |
| ASPARLAS INTRAVENOUS SOLUTION 3750 UNIT/5ML              | 6         | PA; Specialty Medical |

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| Drug Name                                                         | Drug Tier | Notes                                | Drug Name                                                                                      | Drug Tier | Notes                       |
|-------------------------------------------------------------------|-----------|--------------------------------------|------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| AUCATZYL<br>INTRAVENOUS<br>SUSPENSION<br>410000000 CELLS          | 5         | PA;<br>Specialty<br>Medical          | BAVENCIO<br>INTRAVENOUS<br>SOLUTION 200<br>MG/10ML                                             | 6         | PA;<br>Specialty<br>Medical |
| AUGTYRO ORAL<br>CAPSULE 160 MG                                    | 6         | PA; QL (60<br>EA per 30<br>days)     | BEIZRAY<br>INTRAVENOUS<br>SOLUTION 2 X 80<br>MG/4ML & 25%(50 ML),<br>80 MG/4ML & 25%(50<br>ML) | 6         | PA;<br>Specialty<br>Medical |
| AUGTYRO ORAL<br>CAPSULE 40 MG                                     | 6         | PA; QL<br>(240 EA<br>per 30<br>days) | BELEODAQ<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 500<br>MG                                 | 6         | PA;<br>Specialty<br>Medical |
| AVASTIN<br>INTRAVENOUS<br>SOLUTION 100<br>MG/4ML, 400 MG/16ML     | 6         | PA;<br>Specialty<br>Medical          | BELRAPZO<br>INTRAVENOUS<br>SOLUTION 100 MG/4ML                                                 | 6         | PA;<br>Specialty<br>Medical |
| AVGEMSI<br>INTRAVENOUS<br>SOLUTION 1<br>GM/26.3ML, 2<br>GM/52.6ML | GM        | PA                                   | BENDAMUSTINE HCL<br>INTRAVENOUS<br>SOLUTION 100 MG/4ML                                         | 6         | PA;<br>Specialty<br>Medical |
| AVMAPKI FAKZYNJA<br>CO-PACK ORAL<br>THERAPY PACK 0.8 &<br>200 MG  | 6         | PA                                   | bendamustine hcl<br>intravenous solution<br>reconstituted 100 mg, 25<br>mg                     | 6         | PA;<br>Specialty<br>Medical |
| AXTLE INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG, 500 MG  | 6         | PA;<br>Specialty<br>Medical          | BENDEKA<br>INTRAVENOUS<br>SOLUTION 100 MG/4ML                                                  | 6         | PA;<br>Specialty<br>Medical |
| AYVAKIT ORAL TABLET<br>100 MG, 200 MG, 25<br>MG, 300 MG, 50 MG    | 6         | PA                                   | BESPONSA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 0.9<br>MG                                 | 6         | PA;<br>Specialty<br>Medical |
| azacitidine injection<br>suspension reconstituted<br>100 mg       | 6         | PA;<br>Specialty<br>Medical          | BESREMI<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 500 MCG/ML                            | 6         | PA                          |
| AZEDRA DOSIMETRIC<br>INTRAVENOUS<br>SOLUTION 15 MCI/ML            | GM        |                                      | bexarotene external gel 1<br>%                                                                 | 6         | PA                          |
| AZEDRA<br>THERAPEUTIC<br>INTRAVENOUS<br>SOLUTION 15 MCI/ML        | GM        |                                      | bexarotene oral capsule<br>75 mg                                                               | 6         | PA                          |
| BALVERSA ORAL<br>TABLET 3 MG, 4 MG, 5<br>MG                       | 6         | PA                                   | bicalutamide oral tablet<br>50 mg                                                              | 2         |                             |

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| Drug Name                                                               | Drug Tier | Notes                      | Drug Name                                                                         | Drug Tier | Notes                      |
|-------------------------------------------------------------------------|-----------|----------------------------|-----------------------------------------------------------------------------------|-----------|----------------------------|
| BIZENGRI (750 MG DOSE) INTRAVENOUS SOLUTION THERAPY PACK 375 MG/18.75ML | 6         | PA; Specialty Medical      | BREYANZI INTRAVENOUS SUSPENSION 70000000 CELLS/ML                                 | 6         | PA; Specialty Medical      |
| bleomycin sulfate injection solution reconstituted 15 unit, 30 unit     | 6         | PA; Specialty Medical      | BRUKINSA ORAL CAPSULE 80 MG                                                       | 6         | PA                         |
| BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED 35 MCG                      | 6         | PA; Specialty Medical      | BRUKINSA ORAL TABLET 160 MG                                                       | 6         | PA                         |
| bortezomib injection solution reconstituted 1 mg, 2.5 mg, 3.5 mg        | 6         | PA; Specialty Medical      | busulfan intravenous solution 6 mg/ml                                             | 6         | PA; Specialty Medical      |
| bortezomib intravenous solution 3.5 mg/1.4ml                            | 6         | PA; Specialty Medical      | BUSULFEX INTRAVENOUS SOLUTION 6 MG/ML                                             | 6         | PA; Specialty Medical      |
| BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED 3.5 MG                    | 6         | PA; Specialty Medical      | CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG                                         | 6         | PA; QL (30 EA per 30 days) |
| BORUZU INJECTION SOLUTION 3.5 MG/1.4ML                                  | 6         | PA; Specialty Medical      | CALQUENCE ORAL TABLET 100 MG                                                      | 6         | PA                         |
| BOSULIF ORAL CAPSULE 100 MG                                             | 6         | PA; QL (90 EA per 30 days) | CAMCEVI SUBCUTANEOUS PREFILLED SYRINGE 42 MG                                      | 6         | PA; Specialty Medical; GD* |
| BOSULIF ORAL CAPSULE 50 MG                                              | 6         | PA; QL (30 EA per 30 days) | CAMPTOSAR INTRAVENOUS SOLUTION 100 MG/5ML, 300 MG/15ML, 40 MG/2ML                 | GM        | PA                         |
| BOSULIF ORAL TABLET 100 MG                                              | 6         | PA; QL (90 EA per 30 days) | capecitabine oral tablet 150 mg, 500 mg                                           | 4         | PA                         |
| BOSULIF ORAL TABLET 400 MG, 500 MG                                      | 6         | PA; QL (30 EA per 30 days) | CAPRELSA ORAL TABLET 100 MG, 300 MG                                               | 6         | PA                         |
| BRAFTOVI ORAL CAPSULE 75 MG                                             | 6         | PA                         | carboplatin intravenous solution 150 mg/15ml, 450 mg/45ml, 50 mg/5ml, 600 mg/60ml | GM        | PA                         |
|                                                                         |           |                            | carmustine intravenous solution reconstituted 100 mg, 300 mg, 50 mg               | 6         | PA; Specialty Medical      |

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| Drug Name                                                       | Drug Tier | Notes                       | Drug Name                                                                                                                                                | Drug Tier | Notes                                |
|-----------------------------------------------------------------|-----------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------------|
| CARVYKTI<br>INTRAVENOUS<br>SUSPENSION<br>100000000 CELLS        | 6         | PA;<br>Specialty<br>Medical | cyclophosphamide<br>injection solution<br>reconstituted 1 gm, 2 gm,<br>500 mg                                                                            | 6         | PA;<br>Specialty<br>Medical          |
| CASODEX ORAL<br>TABLET 50 MG                                    | 4         | Brand<br>penalty<br>applies | CYCLOPHOSPHAMIDE<br>INTRAVENOUS<br>SOLUTION 1 GM/2ML, 1<br>GM/5ML, 1000<br>MG/10ML, 2 GM/10ML, 2<br>GM/4ML, 2000<br>MG/20ML, 500<br>MG/2.5ML, 500 MG/5ML | 6         | PA;<br>Specialty<br>Medical          |
| cisplatin intravenous<br>solution 100 mg/100ml,<br>200 mg/200ml | GM        | PA                          | CYCLOPHOSPHAMIDE<br>INTRAVENOUS<br>SOLUTION 500 MG/ML                                                                                                    | 6         | PA                                   |
| cisplatin solution 50<br>mg/50ml intravenous                    | GM        | PA                          | cyclophosphamide oral<br>capsule 25 mg, 50 mg                                                                                                            | 2         | PA                                   |
| CISPLATIN SOLUTION<br>50 MG/50ML<br>INTRAVENOUS                 | GM        | PA                          | CYCLOPHOSPHAMIDE<br>ORAL TABLET 25 MG,<br>50 MG                                                                                                          | 4         |                                      |
| cladribine intravenous<br>solution 10 mg/10ml                   | 6         | PA;<br>Specialty<br>Medical | CYRAMZA<br>INTRAVENOUS<br>SOLUTION 100<br>MG/10ML, 500 MG/50ML                                                                                           | 6         | PA;<br>Specialty<br>Medical          |
| clofarabine intravenous<br>solution 1 mg/ml                     | 6         | PA;<br>Specialty<br>Medical | cytarabine (pf) injection<br>solution 100 mg/ml, 20<br>mg/ml                                                                                             | 6         | PA;<br>Specialty<br>Medical          |
| CLOLAR<br>INTRAVENOUS<br>SOLUTION 1 MG/ML                       | 6         | PA;<br>Specialty<br>Medical | cytarabine injection<br>solution 20 mg/ml                                                                                                                | 6         | PA;<br>Specialty<br>Medical          |
| COLUMVI<br>INTRAVENOUS<br>SOLUTION 10<br>MG/10ML, 2.5 MG/2.5ML  | 6         | PA;<br>Specialty<br>Medical | dacarbazine intravenous<br>solution reconstituted<br>100 mg, 200 mg                                                                                      | 6         | PA;<br>Specialty<br>Medical          |
| COMETRIQ ORAL KIT<br>20 MG, 3 X 20 MG & 80<br>MG, 80 & 20 MG    | 6         | PA                          | dactinomycin intravenous<br>solution reconstituted 0.5<br>mg                                                                                             | 6         | PA;<br>Specialty<br>Medical          |
| COPIKTRA ORAL<br>CAPSULE 15 MG, 25<br>MG                        | 6         | PA                          | DANYELZA<br>INTRAVENOUS<br>SOLUTION 40 MG/10ML                                                                                                           | 6         | PA;<br>Specialty<br>Medical          |
| COSELA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 300<br>MG    | 6         | PA;<br>Specialty<br>Medical | DANZITEN ORAL<br>TABLET 71 MG, 95 MG                                                                                                                     | 6         | PA; QL<br>(120 EA<br>per 30<br>days) |
| COTELLIC ORAL<br>TABLET 20 MG                                   | 6         | PA                          |                                                                                                                                                          |           |                                      |

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| Drug Name                                                         | Drug Tier | Notes                 | Drug Name                                                       | Drug Tier | Notes                 |
|-------------------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------|-----------|-----------------------|
| DARZALEX FASPRO SUBCUTANEOUS SOLUTION 1800-30000 MG-UT/15ML       | 6         | PA; Specialty Medical | DOXIL INTRAVENOUS SUSPENSION 2 MG/ML                            | GM        | PA                    |
| DARZALEX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML             | 6         | PA; Specialty Medical | doxorubicin hcl intravenous solution 2 mg/ml                    | GM        | PA                    |
| dasatinib oral tablet 100 mg, 140 mg, 20 mg, 50 mg, 70 mg, 80 mg  | 6         | PA                    | doxorubicin hcl intravenous solution reconstituted 10 mg, 50 mg | GM        | PA                    |
| DATROWAY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                | 6         | PA; Specialty Medical | doxorubicin hcl liposomal intravenous suspension 2 mg/ml        | GM        | PA                    |
| daunorubicin hcl intravenous solution 20 mg/4ml, 50 mg/10ml       | 6         | PA; Specialty Medical | DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG                      | 4         |                       |
| DAURISMO ORAL TABLET 100 MG, 25 MG                                | 6         | PA                    | ELAHERE INTRAVENOUS SOLUTION 100 MG/20ML                        | 6         | PA; Specialty Medical |
| decitabine intravenous solution reconstituted 50 mg               | 6         | PA; Specialty Medical | ELITEK INTRAVENOUS SOLUTION RECONSTITUTED 1.5 MG, 7.5 MG        | 6         | Specialty Medical     |
| dexrazoxane hcl intravenous solution reconstituted 250 mg, 500 mg | GM        |                       | ELLENC E INTRAVENOUS SOLUTION 200 MG/100ML, 50 MG/25ML          | 6         | PA; Specialty Medical |
| dexrazoxane intravenous solution reconstituted 250 mg             | GM        |                       | ELREXFIO SUBCUTANEOUS SOLUTION 44 MG/1.1ML, 76 MG/1.9ML         | 6         | PA; Specialty Medical |
| docetaxel intravenous concentrate 160 mg/8ml, 20 mg/ml, 80 mg/4ml | 6         | PA; Specialty Medical | ELZONRIS INTRAVENOUS SOLUTION 1000 MCG/ML                       | 6         | PA; Specialty Medical |
| docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml  | 6         | PA; Specialty Medical | EMCYT ORAL CAPSULE 140 MG                                       | 3         | PA                    |
| DOCIVYX INTRAVENOUS SOLUTION 160 MG/16ML, 20 MG/2ML, 80 MG/8ML    | 6         | PA; Specialty Medical | EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED 300 MG, 400 MG     | 6         | PA; Specialty Medical |

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| Drug Name                                                               | Drug Tier | Notes                            | Drug Name                                                                                  | Drug Tier | Notes                           |
|-------------------------------------------------------------------------|-----------|----------------------------------|--------------------------------------------------------------------------------------------|-----------|---------------------------------|
| EMRELIS<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG, 20 MG    | 6         | PA;<br>Specialty<br>Medical      | etoposide oral capsule<br>50 mg                                                            | 2         | PA                              |
| ENHERTU<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG           | 6         | PA;<br>Specialty<br>Medical      | EULEXIN ORAL<br>CAPSULE 125 MG                                                             | 4         | PA                              |
| ENSACOVE ORAL<br>CAPSULE 100 MG, 25<br>MG                               | 6         | PA                               | everolimus oral tablet 10<br>mg, 2.5 mg, 5 mg, 7.5<br>mg                                   | 6         | PA                              |
| EPKINLY<br>SUBCUTANEOUS<br>SOLUTION 4 MG/0.8ML,<br>48 MG/0.8ML          | 6         | PA                               | everolimus oral tablet<br>soluble 2 mg, 3 mg, 5 mg                                         | 6         | PA                              |
| ERBITUX<br>INTRAVENOUS<br>SOLUTION 100<br>MG/50ML, 200<br>MG/100ML      | 6         | PA;<br>Specialty<br>Medical      | EVOMELA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 50<br>MG                               | GM        | PA                              |
| eribulin mesylate<br>intravenous solution 1<br>mg/2ml                   | 6         | PA;<br>Specialty<br>Medical      | exemestane oral tablet<br>25 mg                                                            | 2         |                                 |
| ERIVEDGE ORAL<br>CAPSULE 150 MG                                         | 6         | PA                               | EXKIVITY ORAL<br>CAPSULE 40 MG                                                             | 6         | PA                              |
| ERLEADA ORAL<br>TABLET 240 MG                                           | 6         | PA; QL (30<br>EA per 30<br>days) | FARESTON ORAL<br>TABLET 60 MG                                                              | 4         | PA; Brand<br>penalty<br>applies |
| ERLEADA ORAL<br>TABLET 60 MG                                            | 6         | PA                               | FASLODEX<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 250 MG/5ML                      | 6         | PA;<br>Specialty<br>Medical     |
| erlotinib hcl oral tablet<br>100 mg, 150 mg, 25 mg                      | 5         | PA                               |                                                                                            | 4         | Brand<br>penalty<br>applies     |
| ETOPOPHOS<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG         | 6         | PA;<br>Specialty<br>Medical      | floxuridine injection<br>solution reconstituted 0.5<br>gm                                  | 6         | PA;<br>Specialty<br>Medical     |
| etoposide intravenous<br>solution 1 gm/50ml, 100<br>mg/5ml, 500 mg/25ml | GM        | PA                               | fludarabine phosphate<br>intravenous solution 25<br>mg/ml, 50 mg/2ml                       | 6         | PA;<br>Specialty<br>Medical     |
|                                                                         |           |                                  | fludarabine phosphate<br>intravenous solution<br>reconstituted 50 mg                       | 6         | PA;<br>Specialty<br>Medical     |
|                                                                         |           |                                  | fluorouracil intravenous<br>solution 1 gm/20ml, 2.5<br>gm/50ml, 5 gm/100ml,<br>500 mg/10ml | GM        | PA                              |

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| Drug Name                                                                          | Drug Tier | Notes                       | Drug Name                                                                    | Drug Tier | Notes                  |
|------------------------------------------------------------------------------------|-----------|-----------------------------|------------------------------------------------------------------------------|-----------|------------------------|
| FOLOTYN INTRAVENOUS SOLUTION 20 MG/ML, 40 MG/2ML                                   | 6         | PA; Specialty Medical       | gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml | GM        | PA                     |
| FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG                                              | 6         | PA                          | gemcitabine hcl intravenous solution reconstituted 1 gm, 2 gm, 200 mg        | GM        | PA                     |
| FRINDOVYX INTRAVENOUS SOLUTION 1 GM/2ML, 2 GM/4ML                                  | 6         | PA; Specialty Medical       | GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG                                     | 6         | PA                     |
| FRINDOVYX INTRAVENOUS SOLUTION 500 MG/ML                                           | 6         | PA                          | GLEEVEC ORAL TABLET 100 MG                                                   | 6         | QL (90 EA per 30 days) |
| FRUZAQLA ORAL CAPSULE 1 MG                                                         | 6         | PA; QL (120 EA per 30 days) | GLEEVEC ORAL TABLET 400 MG                                                   | 6         | QL (30 EA per 30 days) |
| FRUZAQLA ORAL CAPSULE 5 MG                                                         | 6         | PA; QL (30 EA per 30 days)  | GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG                                  | 6         | PA                     |
| fulvestrant intramuscular solution prefilled syringe 250 mg/5ml                    | 6         | PA; Specialty Medical       | GLIADEL WAFER IMPLANT WAFER 7.7 MG                                           | GM        |                        |
| FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED 100 MG                                 | 6         | PA; Specialty Medical       | GOMEKLI ORAL CAPSULE 1 MG, 2 MG                                              | 6         | PA                     |
| GAVRETO ORAL CAPSULE 100 MG                                                        | 6         | PA                          | GOMEKLI ORAL TABLET SOLUBLE 1 MG                                             | 6         | PA                     |
| GAZYVA INTRAVENOUS SOLUTION 1000 MG/40ML                                           | 6         | PA; Specialty Medical       | HALAVEN INTRAVENOUS SOLUTION 1 MG/2ML                                        | 6         | PA; Specialty Medical  |
| gefitinib oral tablet 250 mg                                                       | 5         | PA                          | HEPZATO W/50MM CATHETER INTRA-ARTERIAL SOLUTION RECONSTITUTED 50 MG          | 6         | PA; Specialty Medical  |
| gemcitabine hcl intravenous solution 1 gm/10ml, 1.5 gm/15ml, 2 gm/20ml, 200 mg/2ml | GM        |                             | HEPZATO W/62MM CATHETER INTRA-ARTERIAL SOLUTION RECONSTITUTED 50 MG          | 6         | PA; Specialty Medical  |

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| Drug Name                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------|-----------|-----------------------|
| HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600-10000 MG-UNT/5ML | 6         | PA                    |
| HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG          | 6         | PA; Specialty Medical |
| HERCESSI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG   | 5         | PA; Specialty Medical |
| HERNEXEOS ORAL TABLET 60 MG                                  | 6         | PA                    |
| HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG    | 5         | PA; Specialty Medical |
| HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED 4 MG             | GM        | PA                    |
| HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG                          | 4         | PA                    |
| HYDREA ORAL CAPSULE 500 MG                                   | 4         | Brand penalty applies |
| hydroxyurea oral capsule 500 mg                              | 2         |                       |
| IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG                   | 6         | PA                    |
| IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG                    | 6         | PA                    |
| IBTROZI ORAL CAPSULE 200 MG                                  | 6         | PA                    |

| Drug Name                                                            | Drug Tier | Notes                      |
|----------------------------------------------------------------------|-----------|----------------------------|
| ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG                       | 6         | PA; QL (30 EA per 30 days) |
| IDAMYCIN PFS INTRAVENOUS SOLUTION 10 MG/10ML, 20 MG/20ML, 5 MG/5ML   | 6         | PA; Specialty Medical      |
| idarubicin hcl intravenous solution 10 mg/10ml, 20 mg/20ml, 5 mg/5ml | 6         | PA; Specialty Medical      |
| IDHIFA ORAL TABLET 100 MG, 50 MG                                     | 6         | PA                         |
| IFEX INTRAVENOUS SOLUTION RECONSTITUTED 1 GM, 3 GM                   | 6         | PA; Specialty Medical      |
| ifosfamide intravenous solution 1 gm/20ml, 3 gm/60ml                 | 6         | PA; Specialty Medical      |
| ifosfamide intravenous solution reconstituted 1 gm, 3 gm             | 6         | PA; Specialty Medical      |
| imatinib mesylate oral tablet 100 mg                                 | 5         | PA; QL (90 EA per 30 days) |
| imatinib mesylate oral tablet 400 mg                                 | 5         | PA; QL (30 EA per 30 days) |
| IMBRUVICA ORAL CAPSULE 140 MG, 70 MG                                 | 6         | PA                         |
| IMBRUVICA ORAL SUSPENSION 70 MG/ML                                   | 6         | PA                         |
| IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG                         | 6         | PA                         |
| IMDELLTRA INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 10 MG             | 6         | PA; Specialty Medical      |

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| Drug Name                                                                           | Drug Tier | Notes                      | Drug Name                                                   | Drug Tier | Notes                      |
|-------------------------------------------------------------------------------------|-----------|----------------------------|-------------------------------------------------------------|-----------|----------------------------|
| IMFINZI INTRAVENOUS SOLUTION 120 MG/2.4ML, 500 MG/10ML                              | 6         | PA; Specialty Medical      | IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED 15 MG, 45 MG | 6         | PA; Specialty Medical      |
| IMJUDO INTRAVENOUS SOLUTION 25 MG/1.25ML, 300 MG/15ML                               | 6         | PA; Specialty Medical      | JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG         | 6         | PA                         |
| IMLYGIC INTRALESIONAL SUSPENSION 1000000 UNIT/ML, 100000000 UNIT/ML                 | 6         | PA; Specialty Medical      | JAYPIRCA ORAL TABLET 100 MG, 50 MG                          | 6         | PA; QL (60 EA per 30 days) |
| INLEXZO INTRAVESICAL IMPLANT 225 MG                                                 | 6         | PA; Specialty Medical      | JELMYTO SOLUTION RECONSTITUTED 80 (2 X 40) MG               | 6         | PA; Specialty Medical      |
| INLURIYO ORAL TABLET 200 MG                                                         | 6         | PA                         | JEMPERLI INTRAVENOUS SOLUTION 500 MG/10ML                   | 6         | PA; Specialty Medical      |
| INLYTA ORAL TABLET 1 MG, 5 MG                                                       | 6         | PA                         | JEVTANA INTRAVENOUS SOLUTION 60 MG/1.5ML                    | 6         | PA; Specialty Medical      |
| INQOVI ORAL TABLET 35-100 MG                                                        | 6         | PA                         | JOBEVNE INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML        | 5         | PA; Specialty Medical      |
| INREBIC ORAL CAPSULE 100 MG                                                         | 6         | PA                         | KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 160 MG   | 6         | PA; Specialty Medical      |
| IRESSA ORAL TABLET 250 MG                                                           | 6         | PA                         | KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG  | 5         | PA; Specialty Medical      |
| irinotecan hcl intravenous solution 100 mg/5ml, 300 mg/15ml, 40 mg/2ml, 500 mg/25ml | GM        | PA                         | KEMOPLAT INTRAVENOUS SOLUTION 50 MG/50ML                    | GM        | PA                         |
| ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED 10 MG                                    | 6         | PA; Specialty Medical      | KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4ML                    | 6         | PA; Specialty Medical      |
| ITOVEBI ORAL TABLET 3 MG, 9 MG                                                      | 6         | PA; QL (60 EA per 30 days) |                                                             |           |                            |
| IVRA INTRAVENOUS SOLUTION 90 MG/ML                                                  | 6         | PA; Specialty Medical      |                                                             |           |                            |

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| Drug Name                                                                          | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------|-----------|-----------------------------|
| KEYTRUDA QLEX SUBCUTANEOUS SOLUTION 395-4800 MG -UNT/2.4ML, 790-9600 MG -UNT/4.8ML | 6         | PA; Specialty Medical       |
| KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED 175 MG                                 | 6         | PA; Specialty Medical       |
| KIMMTRAK INTRAVENOUS SOLUTION 100 MCG/0.5ML                                        | 6         | PA; Specialty Medical       |
| KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG                              | 6         | PA                          |
| KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG                              | 6         | PA                          |
| KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG                              | 6         | PA                          |
| KISQALI FEMARA ORAL TABLET THERAPY PACK 200 & 2.5 MG                               | 6         | PA                          |
| KOSELUGO ORAL CAPSULE 10 MG, 25 MG                                                 | 6         | PA                          |
| KOSELUGO ORAL CAPSULE SPRINKLE 5 MG, 7.5 MG                                        | 6         | PA                          |
| KRAZATI ORAL TABLET 200 MG                                                         | 6         | PA; QL (180 EA per 30 days) |
| KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 30 MG, 60 MG                    | 6         | PA; Specialty Medical       |

| Drug Name                                                                                                                   | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| KYXATA INTRAVENOUS SOLUTION 500 MG/50ML, 80 MG/8ML                                                                          | GM        | PA                         |
| lapatinib ditosylate oral tablet 250 mg                                                                                     | 6         | PA                         |
| LAZCLUZE ORAL TABLET 240 MG                                                                                                 | 6         | PA; QL (30 EA per 30 days) |
| LAZCLUZE ORAL TABLET 80 MG                                                                                                  | 6         | PA; QL (60 EA per 30 days) |
| lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg                                                          | 6         | PA                         |
| LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG | 6         | PA                         |
| letrozole oral tablet 2.5 mg                                                                                                | 2         |                            |
| leucovorin calcium injection solution 100 mg/10ml, 500 mg/50ml                                                              | GM        | PA                         |
| leucovorin calcium injection solution reconstituted 100 mg, 200 mg, 350 mg, 50 mg, 500 mg                                   | GM        | PA                         |
| leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg                                                                    | 2         |                            |
| LEUKERAN ORAL TABLET 2 MG                                                                                                   | 3         | PA                         |
| levoleucovorin calcium intravenous solution reconstituted 50 mg                                                             | 6         | PA; Specialty Medical      |
| levoleucovorin calcium pf intravenous solution 175 mg/17.5ml, 250 mg/25ml                                                   | 6         | PA; Specialty Medical      |

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| Drug Name                                                | Drug Tier | Notes                      | Drug Name                                                       | Drug Tier | Notes                 |
|----------------------------------------------------------|-----------|----------------------------|-----------------------------------------------------------------|-----------|-----------------------|
| LIBTAYO INTRAVENOUS SOLUTION 350 MG/7ML                  | 6         | PA; Specialty Medical      | LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG        | 6         | PA                    |
| LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG               | 6         | PA                         | MARGENZA INTRAVENOUS SOLUTION 250 MG/10ML                       | 6         | PA; Specialty Medical |
| LOQTORZI INTRAVENOUS SOLUTION 240 MG/6ML                 | 6         | PA                         | MATULANE ORAL CAPSULE 50 MG                                     | 6         | PA                    |
| LORBRENA ORAL TABLET 100 MG, 25 MG                       | 6         | PA                         | MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML                 | 6         | PA                    |
| LUMAKRAS ORAL TABLET 120 MG                              | 6         | PA                         | MEKINIST ORAL TABLET 0.5 MG, 2 MG                               | 6         | PA                    |
| LUMAKRAS ORAL TABLET 240 MG                              | 6         | PA; QL (60 EA per 30 days) | MEKTOVI ORAL TABLET 15 MG                                       | 6         | PA                    |
| LUMAKRAS ORAL TABLET 320 MG                              | 6         | PA; QL (90 EA per 30 days) | melphalan hcl intravenous solution reconstituted 50 mg          | 6         | PA; Specialty Medical |
| LUNSUMIO INTRAVENOUS SOLUTION 1 MG/ML, 30 MG/30ML        | 6         | PA; Specialty Medical      | melphalan oral tablet 2 mg                                      | 2         | PA                    |
| LUTATHERA INTRAVENOUS SOLUTION 370 MBQ/ML                | 6         | PA; Specialty Medical      | mercaptopurine oral suspension 2000 mg/100ml                    | 2         |                       |
| LYNOZYFIC INTRAVENOUS SOLUTION 200 MG/10ML, 5 MG/2.5ML   | 6         | PA; Specialty Medical      | mercaptopurine oral tablet 50 mg                                | 2         |                       |
| LYNPARZA ORAL TABLET 100 MG, 150 MG                      | 6         | PA                         | mesna intravenous solution 100 mg/ml                            | 6         | Specialty Medical     |
| LYSODREN ORAL TABLET 500 MG                              | 3         | PA                         | mesna oral tablet 400 mg                                        | 2         |                       |
| LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG | 6         | PA                         | MESNEX INTRAVENOUS SOLUTION 100 MG/ML                           | 6         | Specialty Medical     |
| LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG | 6         | PA                         | MESNEX ORAL TABLET 400 MG                                       | 3         | Brand penalty applies |
|                                                          |           |                            | mitomycin intravenous solution reconstituted 20 mg, 40 mg, 5 mg | GM        | PA                    |

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| Drug Name                                                                     | Drug Tier | Notes                 | Drug Name                                                | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------|-----------|-----------------------|----------------------------------------------------------|-----------|-----------------------------|
| MITOMYCIN INTRAVESICAL SOLUTION PREFILLED SYRINGE 20 MG/40ML                  | GM        |                       | NILOTINIB D-TARTRATE ORAL CAPSULE 150 MG, 200 MG, 50 MG  | 6         | PA; QL (4 EA per 1 day)     |
| mitoxantrone hcl intravenous concentrate 20 mg/10ml, 25 mg/12.5ml, 30 mg/15ml | 6         | PA; Specialty Medical | nilotinib hcl oral capsule 150 mg, 200 mg, 50 mg         | 6         | PA; QL (120 EA per 30 days) |
| MODEYSO ORAL CAPSULE 125 MG                                                   | 6         | PA                    | nilutamide oral tablet 150 mg                            | 2         |                             |
| MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED 200 MG                             | 6         | PA; Specialty Medical | NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG                  | 6         | PA                          |
| MUTAMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 20 MG, 40 MG, 5 MG               | GM        | PA                    | NIPENT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG          | 6         | PA; Specialty Medical       |
| MVASI INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML                            | 5         | PA; Specialty Medical | NUBEQA ORAL TABLET 300 MG                                | 6         | PA                          |
| MYLERAN ORAL TABLET 2 MG                                                      | 3         |                       | ODOMZO ORAL CAPSULE 200 MG                               | 6         | PA                          |
| MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG                            | 6         | PA; Specialty Medical | OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | 5         | PA; Specialty Medical       |
| nelarabine intravenous solution 5 mg/ml                                       | 6         | PA; Specialty Medical | OGSIVEO ORAL TABLET 100 MG, 150 MG, 50 MG                | 6         | PA; QL (60 EA per 30 days)  |
| NERLYNX ORAL TABLET 40 MG                                                     | 6         | PA                    | OJEMDA ORAL SUSPENSION RECONSTITUTED 25 MG/ML            | 6         | PA; QL (24 ML per 28 days)  |
| NEXAVAR ORAL TABLET 200 MG                                                    | 6         | PA                    | OJEMDA ORAL TABLET 100 MG                                | 6         | PA; QL (24 EA per 28 days)  |
| NILANDRON ORAL TABLET 150 MG                                                  | 4         | Brand penalty applies | OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG               | 6         | PA; QL (30 EA per 30 days)  |
|                                                                               |           |                       | ONCASPAR INJECTION SOLUTION 750 UNIT/ML                  | 6         | PA; Specialty Medical       |

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| Drug Name                                                                                      | Drug Tier | Notes                                                        | Drug Name                                                                                               | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ONIVYDE<br>INTRAVENOUS<br>SUSPENSION 43<br>MG/10ML                                             | 6         | PA;<br>Specialty<br>Medical                                  | paclitaxel protein-bound<br>part intravenous<br>suspension reconstituted<br>100 mg                      | 6         | PA;<br>Specialty<br>Medical |
| ONTRUZANT<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 150<br>MG, 420 MG                        | 5         | PA;<br>Specialty<br>Medical                                  | PADCEV<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 20<br>MG, 30 MG                                      | 6         | PA;<br>Specialty<br>Medical |
| ONUREG ORAL<br>TABLET 200 MG, 300<br>MG                                                        | 6         | PA                                                           | PANRETIN EXTERNAL<br>GEL 0.1 %                                                                          | 4         |                             |
| OPDIVO<br>INTRAVENOUS<br>SOLUTION 100<br>MG/10ML, 120<br>MG/12ML, 240<br>MG/24ML, 40 MG/4ML    | 6         | PA;<br>Specialty<br>Medical                                  | PARAPLATIN<br>INTRAVENOUS<br>SOLUTION 1000<br>MG/100ML                                                  | GM        | PA                          |
|                                                                                                |           |                                                              | pazopanib hcl oral tablet<br>200 mg                                                                     | 5         | PA                          |
|                                                                                                |           |                                                              | PEMAZYRE ORAL<br>TABLET 13.5 MG, 4.5<br>MG, 9 MG                                                        | 6         | PA                          |
| OPDIVO QVANTIG<br>SUBCUTANEOUS<br>SOLUTION 600-10000<br>MG-UT/5ML                              | 6         | PA;<br>Specialty<br>Medical;<br>QL (10 ML<br>per 28<br>days) | PEMETREXED<br>DIPOTASSIUM<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG, 500 MG                 | 6         | PA;<br>Specialty<br>Medical |
| OPDUALAG<br>INTRAVENOUS<br>SOLUTION 240-80<br>MG/20ML                                          | 6         | PA;<br>Specialty<br>Medical                                  | PEMETREXED<br>DISODIUM<br>INTRAVENOUS<br>SOLUTION 1 GM/40ML,<br>100 MG/4ML, 500<br>MG/20ML, 850 MG/34ML | 6         | PA;<br>Specialty<br>Medical |
| ORGOVYX ORAL<br>TABLET 120 MG                                                                  | 6         | PA                                                           | pemetrexed disodium<br>intravenous solution<br>reconstituted 100 mg,<br>1000 mg, 500 mg, 750<br>mg      | 6         | PA;<br>Specialty<br>Medical |
| ORSERDU ORAL<br>TABLET 345 MG, 86 MG                                                           | 6         | PA; QL (30<br>EA per 30<br>days)                             | PEMETREXED<br>DITROMETHAMINE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG, 500 MG              | 6         | PA;<br>Specialty<br>Medical |
| oxaliplatin intravenous<br>solution 100 mg/20ml, 50<br>mg/10ml                                 | GM        | PA                                                           |                                                                                                         |           |                             |
| oxaliplatin intravenous<br>solution reconstituted<br>100 mg, 50 mg                             | GM        | PA                                                           |                                                                                                         |           |                             |
| paclitaxel intravenous<br>concentrate 100<br>mg/16.7ml, 150 mg/25ml,<br>30 mg/5ml, 300 mg/50ml | 6         | PA;<br>Specialty<br>Medical                                  |                                                                                                         |           |                             |

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| Drug Name                                                                 | Drug Tier | Notes                 |
|---------------------------------------------------------------------------|-----------|-----------------------|
| PEMETREXED INTRAVENOUS SOLUTION 1 GM/40ML, 100 MG/4ML, 500 MG/20ML        | 6         | PA; Specialty Medical |
| PEMFEXY INTRAVENOUS SOLUTION 500 MG/20ML                                  | 6         | PA; Specialty Medical |
| PEMRYDI RTU INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML                 | 6         | PA; Specialty Medical |
| PERJETA INTRAVENOUS SOLUTION 420 MG/14ML                                  | 6         | PA; Specialty Medical |
| PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML | 6         | PA; Specialty Medical |
| PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED 75 MG                        | 6         | PA; Specialty Medical |
| PHYRAGO ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG            | 6         | PA                    |
| PIQRAY ORAL TABLET THERAPY PACK 2 X 150 MG, 200 & 50 MG, 200 MG           | 6         | PA                    |
| PLUVICTO INTRAVENOUS SOLUTION 1000 MBQ/ML                                 | 6         | PA; Specialty Medical |
| POLIVY INTRAVENOUS SOLUTION RECONSTITUTED 140 MG, 30 MG                   | 6         | PA; Specialty Medical |

| Drug Name                                                      | Drug Tier | Notes                      |
|----------------------------------------------------------------|-----------|----------------------------|
| POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG                   | 6         | PA                         |
| PORTRAZZA INTRAVENOUS SOLUTION 800 MG/50ML                     | 6         | PA; Specialty Medical      |
| POTELIGEO INTRAVENOUS SOLUTION 20 MG/5ML                       | 6         | PA; Specialty Medical      |
| PRALATREXATE INTRAVENOUS SOLUTION 20 MG/ML, 40 MG/2ML          | 6         | PA; Specialty Medical      |
| PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED 22000000 UNIT     | 6         | PA; Specialty Medical      |
| PURIXAN ORAL SUSPENSION 2000 MG/100ML                          | 4         | Brand penalty applies      |
| QINLOCK ORAL TABLET 50 MG                                      | 6         | PA                         |
| RETEVMO ORAL CAPSULE 40 MG, 80 MG                              | 6         | PA                         |
| RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG                      | 6         | PA; QL (60 EA per 30 days) |
| RETEVMO ORAL TABLET 40 MG                                      | 6         | PA; QL (90 EA per 30 days) |
| REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG | 6         | PA                         |
| REVUFORJ ORAL TABLET 110 MG, 160 MG                            | 6         | PA; QL (60 EA per 30 days) |
| REVUFORJ ORAL TABLET 25 MG                                     | 6         | PA; QL (8 EA per 1 day)    |

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| Drug Name                                                                               | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------------|-----------|----------------------------|
| REZLIDHIA ORAL CAPSULE 150 MG                                                           | 6         | PA; QL (60 EA per 30 days) |
| RIABNI INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML                                    | 5         | PA; Specialty Medical      |
| RITUXAN HYCELA SUBCUTANEOUS SOLUTION 1400-23400 MG -UT/11.7ML, 1600-26800 MG -UT/13.4ML | 6         | PA; Specialty Medical      |
| RITUXAN INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML                                   | 6         | PA; Specialty Medical      |
| romidepsin intravenous solution reconstituted 10 mg                                     | 6         | PA; Specialty Medical      |
| ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG                                               | 6         | PA; QL (8 EA per 28 days)  |
| ROZLYTREK ORAL CAPSULE 100 MG, 200 MG                                                   | 6         | PA                         |
| ROZLYTREK ORAL PACKET 50 MG                                                             | 6         | PA                         |
| RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG                                              | 6         | PA                         |
| RUXIENCE INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML                                  | 5         | PA; Specialty Medical      |
| RYBREVANT INTRAVENOUS SOLUTION 350 MG/7ML                                               | 6         | PA; Specialty Medical      |
| RYDAPT ORAL CAPSULE 25 MG                                                               | 6         | PA                         |
| RYLAZE INTRAMUSCULAR SOLUTION 10 MG/0.5ML                                               | 6         | PA; Specialty Medical      |

| Drug Name                                                    | Drug Tier | Notes                       |
|--------------------------------------------------------------|-----------|-----------------------------|
| SARCLISA INTRAVENOUS SOLUTION 100 MG/5ML, 500 MG/25ML        | 6         | PA; Specialty Medical       |
| SCEMBLIX ORAL TABLET 100 MG                                  | 6         | PA; QL (120 EA per 30 days) |
| SCEMBLIX ORAL TABLET 20 MG, 40 MG                            | 6         | PA                          |
| sorafenib tosylate oral tablet 200 mg                        | 6         | PA                          |
| STIVARGA ORAL TABLET 40 MG                                   | 6         | PA                          |
| STRONTIUM CHLORIDE SR-89 INTRAVENOUS SOLUTION 1 MCI/ML       | GM        |                             |
| sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg | 5         | PA                          |
| SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG           | 6         | PA                          |
| SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 400 MG    | 6         | PA; Specialty Medical       |
| SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED 3.5 MG           | 6         | PA                          |
| TABLOID ORAL TABLET 40 MG                                    | 3         |                             |
| TABRECTA ORAL TABLET 150 MG, 200 MG                          | 6         | PA                          |
| TAFINLAR ORAL CAPSULE 50 MG, 75 MG                           | 6         | PA                          |

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| Drug Name                                                                      | Drug Tier | Notes                                |
|--------------------------------------------------------------------------------|-----------|--------------------------------------|
| TAFINLAR ORAL<br>TABLET SOLUBLE 10<br>MG                                       | 6         | PA                                   |
| TAGRISSO ORAL<br>TABLET 40 MG, 80 MG                                           | 6         | PA                                   |
| TALVEY<br>SUBCUTANEOUS<br>SOLUTION 3 MG/1.5ML,<br>40 MG/ML                     | 6         | PA;<br>Specialty<br>Medical          |
| TALZENNA ORAL<br>CAPSULE 0.1 MG, 0.25<br>MG, 0.35 MG, 0.5 MG,<br>0.75 MG, 1 MG | 6         | PA                                   |
| tamoxifen citrate oral<br>tablet 10 mg, 20 mg                                  | PV        |                                      |
| TARCEVA ORAL<br>TABLET 100 MG                                                  | 6         | PA                                   |
| TARGRETIN EXTERNAL<br>GEL 1 %                                                  | 6         | PA                                   |
| TARGRETIN ORAL<br>CAPSULE 75 MG                                                | 6         | PA                                   |
| TASIGNA ORAL<br>CAPSULE 150 MG, 200<br>MG, 50 MG                               | 6         | PA; QL<br>(120 EA<br>per 30<br>days) |
| TAZVERIK ORAL<br>TABLET 200 MG                                                 | 6         | PA                                   |
| TECARTUS<br>INTRAVENOUS<br>SUSPENSION<br>1000000000 CELLS,<br>2000000000 CELLS | 6         | PA;<br>Specialty<br>Medical          |
| TECELRA<br>INTRAVENOUS<br>SUSPENSION<br>100000000000 CELLS                     | 6         | PA;<br>Specialty<br>Medical          |
| TECENTRIQ HYBREZA<br>SUBCUTANEOUS<br>SOLUTION 1875-30000<br>MG-UT/15ML         | 6         | PA                                   |

| Drug Name                                                                      | Drug Tier | Notes                       |
|--------------------------------------------------------------------------------|-----------|-----------------------------|
| TECENTRIQ<br>INTRAVENOUS<br>SOLUTION 1200<br>MG/20ML, 840 MG/14ML              | 6         | PA;<br>Specialty<br>Medical |
| TECVAYLI<br>SUBCUTANEOUS<br>SOLUTION 153<br>MG/1.7ML, 30 MG/3ML                | 6         | PA;<br>Specialty<br>Medical |
| TEMODAR<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG                  | 6         | PA;<br>Specialty<br>Medical |
| temozolomide oral<br>capsule 100 mg, 140 mg,<br>180 mg, 20 mg, 250 mg,<br>5 mg | 5         | PA                          |
| TEPADINA INJECTION<br>SOLUTION<br>RECONSTITUTED 100<br>MG, 15 MG               | 6         | PA;<br>Specialty<br>Medical |
| TEPADINA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 200<br>MG/200ML           | 6         | PA;<br>Specialty<br>Medical |
| TEPMETKO ORAL<br>TABLET 225 MG                                                 | 6         | PA                          |
| TEPYLUTE<br>INTRAVENOUS<br>SOLUTION 100<br>MG/10ML, 15 MG/1.5ML                | 6         | PA;<br>Specialty<br>Medical |
| TEVIMBRA<br>INTRAVENOUS<br>SOLUTION 100<br>MG/10ML                             | 6         | PA                          |
| THALOMID ORAL<br>CAPSULE 100 MG, 150<br>MG, 200 MG, 50 MG                      | 6         | PA                          |
| thiotepa injection solution<br>reconstituted 100 mg, 15<br>mg                  | 6         | PA;<br>Specialty<br>Medical |
| TIBSOVO ORAL<br>TABLET 250 MG                                                  | 6         | PA                          |

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| Drug Name                                                   | Drug Tier | Notes                      |
|-------------------------------------------------------------|-----------|----------------------------|
| TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED 50 MG        | 6         | PA; Specialty Medical      |
| TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED 40 MG             | GM        | PA                         |
| topotecan hcl intravenous solution 4 mg/4ml                 | GM        | PA                         |
| topotecan hcl intravenous solution reconstituted 4 mg       | GM        | PA                         |
| toremifene citrate oral tablet 60 mg                        | 2         | PA                         |
| torpenz oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg             | 6         | PA                         |
| TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | 5         | PA; Specialty Medical      |
| TREANDA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 25 MG    | 6         | PA; Specialty Medical      |
| tretinoin oral capsule 10 mg                                | 2         | PA                         |
| TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED 180 MG          | 6         | PA; Specialty Medical      |
| TRUQAP ORAL TABLET 160 MG, 200 MG                           | 6         | PA; QL (64 EA per 28 days) |
| TRUQAP ORAL TABLET THERAPY PACK 160 MG, 200 MG              | 6         | PA; QL (64 EA per 28 days) |

| Drug Name                                             | Drug Tier | Notes                      |
|-------------------------------------------------------|-----------|----------------------------|
| TRUXIMA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | 5         | PA; Specialty Medical      |
| TUKYSA ORAL TABLET 150 MG, 50 MG                      | 6         | PA                         |
| TURALIO ORAL CAPSULE 125 MG                           | 6         | PA                         |
| TYKERB ORAL TABLET 250 MG                             | 6         | PA                         |
| UNITUXIN INTRAVENOUS SOLUTION 17.5 MG/5ML             | 6         | PA; Specialty Medical      |
| UNLOXCYT INTRAVENOUS SOLUTION 300 MG/5ML              | 6         | PA; Specialty Medical      |
| UVADEX EXTRACORPOREAL SOLUTION 20 MCG/ML              | GM        |                            |
| VALCHLOR EXTERNAL GEL 0.016 %                         | 6         | PA                         |
| valrubicin intravesical solution 40 mg/ml             | 6         | PA; Specialty Medical      |
| VALSTAR INTRAVESICAL SOLUTION 40 MG/ML                | 6         | PA; Specialty Medical      |
| VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG                 | 6         | PA; QL (60 EA per 30 days) |
| VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML | 6         | PA; Specialty Medical      |
| VEGZELMA INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | 5         | PA; Specialty Medical      |
| VELCADE INJECTION SOLUTION RECONSTITUTED 3.5 MG       | 6         | PA; Specialty Medical      |

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| Drug Name                                                         | Drug Tier | Notes                                         |
|-------------------------------------------------------------------|-----------|-----------------------------------------------|
| VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG                        | 6         | PA                                            |
| VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG | 6         | PA                                            |
| VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG                | 6         | PA                                            |
| VIDAZA INJECTION SUSPENSION RECONSTITUTED 100 MG                  | 6         | PA; Specialty Medical                         |
| VIJOICE ORAL PACKET 50 MG                                         | 6         | PA; QL (90 EA per 30 days); AL (Max 12 Years) |
| VIJOICE ORAL TABLET THERAPY PACK 125 MG, 200 & 50 MG, 50 MG       | 6         | PA; QL (60 EA per 30 days)                    |
| vinblastine sulfate intravenous solution 1 mg/ml                  | 6         | PA; Specialty Medical                         |
| vincristine sulfate intravenous solution 1 mg/ml, 2 mg/2ml        | GM        | PA                                            |
| vinorelbine tartrate intravenous solution 10 mg/ml, 50 mg/5ml     | 6         | PA; Specialty Medical                         |
| VITRAKVI ORAL CAPSULE 100 MG, 25 MG                               | 6         | PA                                            |
| VITRAKVI ORAL SOLUTION 20 MG/ML                                   | 6         | PA                                            |
| VIVIMUSTA INTRAVENOUS SOLUTION 100 MG/4ML                         | 6         | PA; Specialty Medical                         |
| VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG                          | 6         | PA                                            |

| Drug Name                                                  | Drug Tier | Notes                      |
|------------------------------------------------------------|-----------|----------------------------|
| VONJO ORAL CAPSULE 100 MG                                  | 6         | PA                         |
| VORANIGO ORAL TABLET 10 MG                                 | 6         | PA; QL (90 EA per 30 days) |
| VORANIGO ORAL TABLET 40 MG                                 | 6         | PA; QL (30 EA per 30 days) |
| VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT      | GM        |                            |
| VOTRIENT ORAL TABLET 200 MG                                | 6         | PA                         |
| VYLOY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 300 MG    | 6         | PA; Specialty Medical      |
| VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44-100 MG      | 6         | PA; Specialty Medical      |
| WELIREG ORAL TABLET 40 MG                                  | 6         | PA                         |
| XALKORI ORAL CAPSULE 200 MG, 250 MG                        | 6         | PA                         |
| XALKORI ORAL CAPSULE SPRINKLE 150 MG, 20 MG, 50 MG         | 6         | PA                         |
| XELODA ORAL TABLET 150 MG, 500 MG                          | 6         | PA                         |
| XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML                     | 6         | PA; Specialty Medical      |
| XOSPATA ORAL TABLET 40 MG                                  | 6         | PA                         |
| XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG | 6         | PA                         |

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| Drug Name                                                        | Drug Tier | Notes                 | Drug Name                                                  | Drug Tier | Notes                      |
|------------------------------------------------------------------|-----------|-----------------------|------------------------------------------------------------|-----------|----------------------------|
| XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 10 MG, 40 MG | 6         | PA                    | ZALTRAP INTRAVENOUS SOLUTION 100 MG/4ML, 200 MG/8ML        | 6         | PA; Specialty Medical      |
| XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG       | 6         | PA                    | ZANOSAR INTRAVENOUS SOLUTION RECONSTITUTED 1 GM            | 6         | PA; Specialty Medical      |
| XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG        | 6         | PA                    | ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG                  | 6         | PA; QL (30 EA per 30 days) |
| XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG       | 6         | PA                    | ZELBORAF ORAL TABLET 240 MG                                | 6         | PA                         |
| XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG        | 6         | PA                    | ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED 4 MG           | 6         | PA; Specialty Medical      |
| XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG       | 6         | PA                    | ZEVALIN Y-90 INTRAVENOUS KIT 3.2 MG/2ML                    | 6         | Specialty Medical          |
| XTANDI ORAL CAPSULE 40 MG                                        | 6         | PA                    | ZIIHERA INTRAVENOUS SOLUTION RECONSTITUTED 300 MG          | 6         | PA; Specialty Medical      |
| XTANDI ORAL TABLET 40 MG, 80 MG                                  | 6         | PA                    | ZIRABEV INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML       | 5         | PA; Specialty Medical      |
| YERVOY INTRAVENOUS SOLUTION 200 MG/40ML, 50 MG/10ML              | 6         | PA; Specialty Medical | ZOLINZA ORAL CAPSULE 100 MG                                | 6         | PA                         |
| YESCARTA INTRAVENOUS SUSPENSION 200000000 CELLS                  | 6         | PA; Specialty Medical | ZUSDURI INTRAVESICAL SOLUTION RECONSTITUTED 80 (2 X 40) MG | 6         | PA; Specialty Medical      |
| YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED 1 MG                 | 6         | PA; Specialty Medical | ZYDELIG ORAL TABLET 100 MG, 150 MG                         | 6         | PA                         |
| YONSA ORAL TABLET 125 MG                                         | 6         | PA                    | ZYKADIA ORAL TABLET 150 MG                                 | 6         | PA                         |

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| Drug Name                                                   | Drug Tier | Notes                 |
|-------------------------------------------------------------|-----------|-----------------------|
| ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED 10 MG           | 6         | PA; Specialty Medical |
| ZYNYZ INTRAVENOUS SOLUTION 500 MG/20ML                      | 6         | PA; Specialty Medical |
| <b>Antiparasitics</b>                                       |           |                       |
| albendazole oral tablet 200 mg                              | 2         |                       |
| ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML             | 4         |                       |
| ALINIA ORAL TABLET 500 MG                                   | 4         | Brand penalty applies |
| ARAKODA ORAL TABLET 100 MG                                  | 3         |                       |
| ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED 110 MG        | GM        |                       |
| atovaquone oral suspension 750 mg/5ml                       | 2         |                       |
| atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg | 2         |                       |
| BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG                    | 4         |                       |
| BILTRICIDE ORAL TABLET 600 MG                               | 4         |                       |
| chloroquine phosphate oral tablet 250 mg, 500 mg            | 2         |                       |
| COARTEM ORAL TABLET 20-120 MG                               | 3         |                       |
| CROTAN EXTERNAL LOTION 10 %                                 | 4         | PA                    |

| Drug Name                                                             | Drug Tier | Notes                 |
|-----------------------------------------------------------------------|-----------|-----------------------|
| DARAPRIM ORAL TABLET 25 MG                                            | 6         |                       |
| ELIMITE EXTERNAL CREAM 5 %                                            | 4         | Brand penalty applies |
| EMVERM ORAL TABLET CHEWABLE 100 MG                                    | 4         |                       |
| hydroxychloroquine sulfate oral tablet 100 mg, 200 mg, 300 mg, 400 mg | 2         |                       |
| IMPAVIDO ORAL CAPSULE 50 MG                                           | 6         | PA                    |
| ivermectin oral tablet 3 mg, 6 mg                                     | 2         |                       |
| KRINTAFEL ORAL TABLET 150 MG                                          | 3         | QL (2 EA per 30 days) |
| LAMPIT ORAL TABLET 120 MG, 30 MG                                      | 4         |                       |
| MALARONE ORAL TABLET 250-100 MG, 62.5-25 MG                           | 4         | Brand penalty applies |
| malathion external lotion 0.5 %                                       | 2         |                       |
| mefloquine hcl oral tablet 250 mg                                     | 2         |                       |
| MEPRON ORAL SUSPENSION 750 MG/5ML                                     | 4         | Brand penalty applies |
| NATROBA EXTERNAL SUSPENSION 0.9 %                                     | 4         | Brand penalty applies |
| NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG                     | 4         | Brand penalty applies |
| nitazoxanide oral tablet 500 mg                                       | 2         |                       |

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| Drug Name                                                                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| OVIDE EXTERNAL LOTION 0.5 %                                                                                  | 4         | Brand penalty applies |
| PENTAM INJECTION SOLUTION RECONSTITUTED 300 MG                                                               | GM        |                       |
| pentamidine isethionate inhalation solution reconstituted 300 mg                                             | 2         |                       |
| pentamidine isethionate injection solution reconstituted 300 mg                                              | GM        |                       |
| permethrin external cream 5 %                                                                                | 2         |                       |
| PLAQUENIL ORAL TABLET 200 MG                                                                                 | 4         | Brand penalty applies |
| praziquantel oral tablet 600 mg                                                                              | 2         |                       |
| primaquine phosphate oral tablet 26.3 (15 base) mg                                                           | 2         |                       |
| PRURADIK EXTERNAL LOTION 10 %                                                                                | 4         | PA                    |
| pyrimethamine oral tablet 25 mg                                                                              | 6         |                       |
| PYRIMETHAMINE-LEUCOVORIN ORAL CAPSULE 12.5-2.5 MG, 25-10 MG, 25-5 MG, 50-10 MG, 50-20 MG, 50-25 MG, 75-25 MG | 4         |                       |
| QUALAQUIN ORAL CAPSULE 324 MG                                                                                | 4         | Brand penalty applies |
| quinine sulfate oral capsule 324 mg                                                                          | 2         |                       |
| SOVUNA ORAL TABLET 200 MG, 300 MG                                                                            | 4         |                       |
| spinosad external suspension 0.9 %                                                                           | 2         |                       |

| Drug Name                                                                                                 | Drug Tier | Notes                     |
|-----------------------------------------------------------------------------------------------------------|-----------|---------------------------|
| STROMEKTOL ORAL TABLET 3 MG                                                                               | 4         | PA; Brand penalty applies |
| sulfurated lime external solution                                                                         | 2         |                           |
| <b>Antiparkinson Agents</b>                                                                               |           |                           |
| amantadine hcl oral capsule 100 mg                                                                        | 2         |                           |
| amantadine hcl oral solution 50 mg/5ml                                                                    | 2         |                           |
| amantadine hcl oral tablet 100 mg                                                                         | 2         |                           |
| APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML                                                          | 6         | PA                        |
| apomorphine hcl subcutaneous solution cartridge 30 mg/3ml                                                 | 6         | PA                        |
| AZILECT ORAL TABLET 0.5 MG, 1 MG                                                                          | 4         | Brand penalty applies     |
| benztropine mesylate injection solution 1 mg/ml                                                           | GM        |                           |
| benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg                                                       | 1         |                           |
| bromocriptine mesylate oral capsule 5 mg                                                                  | 2         |                           |
| bromocriptine mesylate oral tablet 2.5 mg                                                                 | 2         |                           |
| carbidopa oral tablet 25 mg                                                                               | 2         |                           |
| CARBIDOPA-LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG | 4         |                           |

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| Drug Name                                                                                                                                  | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg                                                                    | 2         |                       |
| carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg                                                                             | 2         |                       |
| carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg                                                                 | 2         |                       |
| carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg | 2         |                       |
| COMTAN ORAL TABLET 200 MG                                                                                                                  | 4         | Brand penalty applies |
| DHIVY ORAL TABLET 25-100 MG                                                                                                                | 4         |                       |
| entacapone oral tablet 200 mg                                                                                                              | 2         |                       |
| INBRIJA INHALATION CAPSULE 42 MG                                                                                                           | 6         | PA                    |
| LODOSYN ORAL TABLET 25 MG                                                                                                                  | 4         | Brand penalty applies |
| MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.375 MG, 0.75 MG, 1.5 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG                                  | 4         | Brand penalty applies |
| NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR                                          | 4         |                       |
| NOURIANZ ORAL TABLET 20 MG, 40 MG                                                                                                          | 6         | PA                    |

| Drug Name                                                                                                                     | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ONAPGO SUBCUTANEOUS SOLUTION CARTRIDGE 98 MG/20ML                                                                             | 6         | PA; QL (600 ML per 30 days) |
| ONGENTYS ORAL CAPSULE 25 MG, 50 MG                                                                                            | 4         | PA                          |
| PARLODEL ORAL CAPSULE 5 MG                                                                                                    | 4         | Brand penalty applies       |
| PARLODEL ORAL TABLET 2.5 MG                                                                                                   | 4         | Brand penalty applies       |
| pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg | 2         |                             |
| pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg                                      | 2         |                             |
| rasagiline mesylate oral tablet 0.5 mg, 1 mg                                                                                  | 2         |                             |
| ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg                                          | 2         |                             |
| ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg                                                      | 2         |                             |
| RYTARY ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG                                    | 4         |                             |
| selegiline hcl oral capsule 5 mg                                                                                              | 2         |                             |
| selegiline hcl oral tablet 5 mg                                                                                               | 2         |                             |

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| Drug Name                                          | Drug Tier | Notes                       |
|----------------------------------------------------|-----------|-----------------------------|
| SINEMET ORAL<br>TABLET 10-100 MG, 25-100 MG        | 4         | Brand penalty applies       |
| STALEVO 100 ORAL<br>TABLET 25-100-200 MG           | 4         | Brand penalty applies       |
| STALEVO 125 ORAL<br>TABLET 31.25-125-200 MG        | 4         | Brand penalty applies       |
| STALEVO 150 ORAL<br>TABLET 37.5-150-200 MG         | 4         | Brand penalty applies       |
| STALEVO 200 ORAL<br>TABLET 50-200-200 MG           | 4         | Brand penalty applies       |
| STALEVO 50 ORAL<br>TABLET 12.5-50-200 MG           | 4         | Brand penalty applies       |
| STALEVO 75 ORAL<br>TABLET 18.75-75-200 MG          | 4         | Brand penalty applies       |
| TASMAR ORAL TABLET<br>100 MG                       | 4         | Brand penalty applies       |
| tolcapone oral tablet 100 mg                       | 2         |                             |
| trihexyphenidyl hcl oral solution 0.4 mg/ml        | 2         |                             |
| trihexyphenidyl hcl oral tablet 2 mg, 5 mg         | 2         |                             |
| VYALEV<br>SUBCUTANEOUS<br>SOLUTION 12-240<br>MG/ML | 6         | PA; QL (450 ML per 30 days) |
| XADAGO ORAL TABLET<br>100 MG, 50 MG                | 4         |                             |
| ZELAPAR ORAL<br>TABLET DISPERSIBLE<br>1.25 MG      | 4         |                             |

| Drug Name                                                                        | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------|-----------|-----------------------|
| <b>Antiplatelets</b>                                                             |           |                       |
| AGGRASTAT<br>INTRAVENOUS<br>CONCENTRATE 3.75<br>MG/15ML                          | GM        |                       |
| AGGRASTAT<br>INTRAVENOUS<br>SOLUTION 12.5-0.9<br>MG/250ML-%, 5-0.9<br>MG/100ML-% | GM        |                       |
| aspirin-dipyridamole er<br>oral capsule extended<br>release 12 hour 25-200<br>mg | 2         |                       |
| BRILINTA ORAL<br>TABLET 60 MG, 90 MG                                             | 3         | Brand penalty applies |
| CABLIVI INJECTION KIT<br>11 MG                                                   | 6         | PA                    |
| cilostazol oral tablet 100<br>mg, 50 mg                                          | 2         |                       |
| clopidogrel bisulfate oral<br>tablet 300 mg                                      | 2         |                       |
| clopidogrel bisulfate oral<br>tablet 75 mg                                       | 1         |                       |
| DEFITELIO<br>INTRAVENOUS<br>SOLUTION 200<br>MG/2.5ML                             | GM        |                       |
| dipyridamole oral tablet<br>25 mg, 50 mg, 75 mg                                  | 2         |                       |
| EFFIENT ORAL TABLET<br>10 MG, 5 MG                                               | 4         | Brand penalty applies |
| eptifibatide intravenous<br>solution 20 mg/10ml, 200<br>mg/100ml, 75 mg/100ml    | GM        |                       |
| KENGREAL<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 50<br>MG                    | GM        |                       |

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| Drug Name                                                                                | Drug Tier | Notes                  |
|------------------------------------------------------------------------------------------|-----------|------------------------|
| PLAVIX ORAL TABLET 75 MG                                                                 | 4         | Brand penalty applies  |
| prasugrel hcl oral tablet 10 mg, 5 mg                                                    | 2         |                        |
| TAVALISSE ORAL TABLET 100 MG, 150 MG                                                     | 6         | PA                     |
| ticagrelor oral tablet 60 mg, 90 mg                                                      | 2         |                        |
| tirofiban hcl in nacl intravenous solution 12.5-0.9 mg/250ml-%, 5-0.9 mg/100ml-%         | GM        |                        |
| YOSPRALA ORAL TABLET DELAYED RELEASE 325-40 MG, 81-40 MG                                 | 4         | PA                     |
| ZONTIVITY ORAL TABLET 2.08 MG                                                            | 4         |                        |
| <b>Antipsychotics - Drugs for Mood Disorders</b>                                         |           |                        |
| ABILIFY ASIMTUFI INTRAMUSCULAR PREFILLED SYRINGE 720 MG/2.4ML, 960 MG/3.2ML              | 5         |                        |
| ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG                          | 5         |                        |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG                | 5         |                        |
| ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 20 MG, 30 MG, 5 MG | 4         | QL (30 EA per 30 days) |

| Drug Name                                                                            | Drug Tier | Notes                                         |
|--------------------------------------------------------------------------------------|-----------|-----------------------------------------------|
| ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK 2 MG                         | 4         | QL (60 EA per 30 days)                        |
| ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 10 MG, 15 MG, 20 MG, 30 MG, 5 MG | 4         | QL (60 EA per 365 days)                       |
| ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK 2 MG                             | 4         | QL (60 EA per 30 days)                        |
| ABILIFY ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG, 5 MG                                 | 4         | Brand penalty applies; QL (30 EA per 30 days) |
| ABILIFY ORAL TABLET 2 MG                                                             | 4         | Brand penalty applies; QL (60 EA per 30 days) |
| ADASUVE INHALATION AEROSOL POWDER BREATH ACTIVATED 10 MG                             | GM        |                                               |
| aripiprazole oral solution 1 mg/ml                                                   | 2         |                                               |
| aripiprazole oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg                            | 2         | QL (30 EA per 30 days)                        |
| aripiprazole oral tablet 2 mg                                                        | 2         | QL (60 EA per 30 days)                        |
| aripiprazole oral tablet dispersible 10 mg, 15 mg                                    | 2         | QL (30 EA per 30 days)                        |
| ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML                         | 5         |                                               |

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| Drug Name                                                                                                          | Drug Tier | Notes                            |
|--------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------|
| ARISTADA<br>INTRAMUSCULAR<br>PREFILLED SYRINGE<br>1064 MG/3.9ML, 441<br>MG/1.6ML, 662<br>MG/2.4ML, 882<br>MG/3.2ML | 5         |                                  |
| asenapine maleate<br>sublingual tablet<br>sublingual 10 mg, 2.5<br>mg, 5 mg                                        | 2         | PA                               |
| CAPLYTA ORAL<br>CAPSULE 10.5 MG, 21<br>MG, 42 MG                                                                   | 4         | PA                               |
| chlorpromazine hcl<br>injection solution 25<br>mg/ml, 50 mg/2ml                                                    | GM        |                                  |
| chlorpromazine hcl oral<br>concentrate 100 mg/ml,<br>30 mg/ml                                                      | GM        |                                  |
| chlorpromazine hcl oral<br>tablet 10 mg, 100 mg,<br>200 mg, 25 mg, 50 mg                                           | 2         |                                  |
| clozapine oral tablet 100<br>mg, 200 mg, 25 mg, 50<br>mg                                                           | 2         |                                  |
| clozapine oral tablet<br>dispersible 100 mg, 12.5<br>mg, 150 mg, 200 mg, 25<br>mg                                  | 2         |                                  |
| CLOZARIL ORAL<br>TABLET 100 MG, 200<br>MG, 25 MG, 50 MG                                                            | 4         | Brand<br>penalty<br>applies      |
| COBENFY ORAL<br>CAPSULE 100-20 MG,<br>125-30 MG, 50-20 MG                                                          | 4         | PA; QL (60<br>EA per 30<br>days) |
| COBENFY STARTER<br>PACK ORAL CAPSULE<br>THERAPY PACK 50-20<br>& 100-20 MG                                          | 4         | PA; QL (56<br>EA per 28<br>days) |

| Drug Name                                                                                                                                                   | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ERZOFRI<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>117 MG/0.75ML, 156<br>MG/ML, 234 MG/1.5ML,<br>351 MG/2.25ML, 39<br>MG/0.25ML, 78<br>MG/0.5ML | 5         |                             |
| FANAPT ORAL TABLET<br>1 MG, 10 MG, 12 MG, 2<br>MG, 4 MG, 6 MG, 8 MG                                                                                         | 4         | PA                          |
| FANAPT TITRATION<br>PACK A ORAL TABLET<br>1 & 2 & 4 & 6 MG                                                                                                  | 4         | PA                          |
| FANAPT TITRATION<br>PACK B ORAL TABLET<br>1 & 2 & 6 & 8 MG                                                                                                  | 4         | PA                          |
| FANAPT TITRATION<br>PACK C ORAL TABLET<br>1 & 2 & 6 MG                                                                                                      | 4         | PA                          |
| fluphenazine decanoate<br>injection solution 25<br>mg/ml                                                                                                    | GM        |                             |
| fluphenazine hcl injection<br>solution 2.5 mg/ml                                                                                                            | GM        |                             |
| fluphenazine hcl oral<br>concentrate 5 mg/ml                                                                                                                | 2         |                             |
| fluphenazine hcl oral<br>elixir 2.5 mg/5ml                                                                                                                  | 2         |                             |
| fluphenazine hcl oral<br>tablet 1 mg, 10 mg, 2.5<br>mg, 5 mg                                                                                                | 2         |                             |
| GEODON<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED 20<br>MG                                                                                               | GM        |                             |
| GEODON ORAL<br>CAPSULE 20 MG, 40<br>MG, 60 MG, 80 MG                                                                                                        | 4         | Brand<br>penalty<br>applies |

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| Drug Name                                                                                                                    | Drug Tier | Notes                                         |
|------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------|
| HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/ML                                                                  | GM        |                                               |
| haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml                                                             | GM        |                                               |
| haloperidol lactate injection solution 5 mg/ml                                                                               | GM        |                                               |
| haloperidol lactate oral concentrate 2 mg/ml                                                                                 | 2         |                                               |
| haloperidol oral tablet 0.5 mg, 1 mg, 2 mg, 5 mg                                                                             | 1         |                                               |
| haloperidol oral tablet 10 mg, 20 mg                                                                                         | 2         |                                               |
| INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML                                         | 5         |                                               |
| INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 3 MG, 9 MG                                                                       | 4         | Brand penalty applies; QL (30 EA per 30 days) |
| INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG                                                                             | 4         | Brand penalty applies; QL (60 EA per 30 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML | 5         |                                               |

| Drug Name                                                                                                           | Drug Tier | Notes                  |
|---------------------------------------------------------------------------------------------------------------------|-----------|------------------------|
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML | 5         |                        |
| LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG                                                               | 4         | Brand penalty applies  |
| loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg                                                           | 2         |                        |
| lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg                                                       | 2         |                        |
| LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG                                                           | 4         | PA                     |
| molindone hcl oral tablet 10 mg, 25 mg, 5 mg                                                                        | 2         |                        |
| NUPLAZID ORAL CAPSULE 34 MG                                                                                         | 5         | PA                     |
| NUPLAZID ORAL TABLET 10 MG                                                                                          | 5         | PA                     |
| olanzapine intramuscular solution reconstituted 10 mg                                                               | GM        |                        |
| olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg                                                    | 2         |                        |
| olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg                                                        | 2         |                        |
| OPIPZA ORAL FILM 10 MG, 2 MG, 5 MG                                                                                  | 4         | AL (Max 12 Years)      |
| paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg                                             | 2         | QL (30 EA per 30 days) |
| paliperidone er oral tablet extended release 24 hour 6 mg                                                           | 2         | QL (60 EA per 30 days) |

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| Drug Name                                                                                            | Drug Tier | Notes                  |
|------------------------------------------------------------------------------------------------------|-----------|------------------------|
| PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG                                                | 5         |                        |
| pimozide oral tablet 1 mg, 2 mg                                                                      | 2         |                        |
| quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg                           | 2         | QL (30 EA per 30 days) |
| quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg                    | 2         | QL (60 EA per 30 days) |
| quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg                 | 2         |                        |
| REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG                                          | 4         | PA                     |
| RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG, 37.5 MG, 50 MG            | 5         |                        |
| RISPERDAL ORAL SOLUTION 1 MG/ML                                                                      | 4         | Brand penalty applies  |
| RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG                                                 | 4         | Brand penalty applies  |
| risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg, 37.5 mg, 50 mg | 5         |                        |
| risperidone oral solution 1 mg/ml                                                                    | 2         |                        |
| risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg                                      | 1         |                        |

| Drug Name                                                                   | Drug Tier | Notes                                         |
|-----------------------------------------------------------------------------|-----------|-----------------------------------------------|
| risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg | 2         |                                               |
| RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG, 37.5 MG, 50 MG     | 5         |                                               |
| SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 2.5 MG, 5 MG                    | 4         | PA; Brand penalty applies                     |
| SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR     | 4         | PA                                            |
| SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG           | 4         | Brand penalty applies                         |
| SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG             | 4         | Brand penalty applies; QL (30 EA per 30 days) |
| SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 300 MG, 400 MG, 50 MG      | 4         | Brand penalty applies; QL (60 EA per 30 days) |
| thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg                    | 2         |                                               |
| thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg                            | 2         |                                               |
| trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg                     | 2         |                                               |

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| Drug Name                                                                                                                                                                          | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| UZEDY<br>SUBCUTANEOUS<br>SUSPENSION<br>PREFILLED SYRINGE<br>100 MG/0.28ML, 125<br>MG/0.35ML, 150<br>MG/0.42ML, 200<br>MG/0.56ML, 250<br>MG/0.7ML, 50<br>MG/0.14ML, 75<br>MG/0.21ML | 5         |                             |
| VERSACLOZ ORAL<br>SUSPENSION 50<br>MG/ML                                                                                                                                           | 4         |                             |
| VRAYLAR ORAL<br>CAPSULE 1.5 MG, 3<br>MG, 4.5 MG, 6 MG                                                                                                                              | 4         | PA                          |
| ziprasidone hcl oral<br>capsule 20 mg, 40 mg,<br>60 mg, 80 mg                                                                                                                      | 2         |                             |
| ziprasidone mesylate<br>intramuscular solution<br>reconstituted 20 mg                                                                                                              | GM        |                             |
| ZYPREXA<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED 10<br>MG                                                                                                                     | GM        |                             |
| ZYPREXA ORAL<br>TABLET 10 MG, 15 MG,<br>2.5 MG, 20 MG, 5 MG,<br>7.5 MG                                                                                                             | 4         | Brand<br>penalty<br>applies |
| ZYPREXA RELPREVV<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED 210<br>MG, 300 MG, 405 MG                                                                                         | 5         |                             |
| ZYPREXA ZYDIS ORAL<br>TABLET DISPERSIBLE<br>10 MG, 15 MG, 20 MG, 5<br>MG                                                                                                           | 4         | Brand<br>penalty<br>applies |
| <b>Antivirals</b>                                                                                                                                                                  |           |                             |
| abacavir sulfate oral<br>solution 20 mg/ml                                                                                                                                         | 2         |                             |

| Drug Name                                                                 | Drug Tier | Notes                           |
|---------------------------------------------------------------------------|-----------|---------------------------------|
| abacavir sulfate oral<br>tablet 300 mg                                    | 2         |                                 |
| abacavir sulfate-<br>lamivudine oral tablet<br>600-300 mg                 | 2         |                                 |
| acyclovir external cream<br>5 %                                           | 2         |                                 |
| acyclovir external<br>ointment 5 %                                        | 2         | QL (15 GM<br>per 30<br>days)    |
| acyclovir oral capsule<br>200 mg                                          | 2         |                                 |
| acyclovir oral suspension<br>200 mg/5ml, 800<br>mg/20ml                   | 2         |                                 |
| acyclovir oral tablet 400<br>mg, 800 mg                                   | 2         |                                 |
| acyclovir sodium<br>intravenous solution 50<br>mg/ml                      | GM        |                                 |
| ACYCLOVIR SODIUM-<br>NACL INTRAVENOUS<br>SOLUTION 200-0.9<br>MG/100ML-%   | GM        |                                 |
| adefovir dipivoxil oral<br>tablet 10 mg                                   | 2         | PA                              |
| APRETUDE<br>INTRAMUSCULAR<br>SUSPENSION<br>EXTENDED RELEASE<br>600 MG/3ML | PV        |                                 |
| APTIVUS ORAL<br>CAPSULE 250 MG                                            | 3         |                                 |
| atazanavir sulfate oral<br>capsule 150 mg, 200 mg,<br>300 mg              | 2         |                                 |
| BARACLUDE ORAL<br>SOLUTION 0.05 MG/ML                                     | 4         | PA                              |
| BARACLUDE ORAL<br>TABLET 0.5 MG, 1 MG                                     | 4         | PA; Brand<br>penalty<br>applies |

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| Drug Name                                                                             | Drug Tier | Notes                     | Drug Name                                                                             | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------|-----------|---------------------------|---------------------------------------------------------------------------------------|-----------|-----------------------|
| BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG                                       | 6         |                           | efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg                             | 5         |                       |
| CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 400 & 600 MG/2ML, 600 & 900 MG/3ML | 6         | Specialty Medical         | efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg             | 2         |                       |
| cidofovir intravenous solution 75 mg/ml                                               | GM        |                           | emtricitabine oral capsule 200 mg                                                     | 2         |                       |
| CIMDUO ORAL TABLET 300-300 MG                                                         | 6         |                           | emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg | PV        |                       |
| COMBIVIR ORAL TABLET 150-300 MG                                                       | 4         | Brand penalty applies     | emtricitab-rilpivir-tenofov df oral tablet 200-25-300 mg                              | 6         |                       |
| COMPLERA ORAL TABLET 200-25-300 MG                                                    | 6         |                           | EMTRIVA ORAL CAPSULE 200 MG                                                           | 3         | Brand penalty applies |
| darunavir oral tablet 600 mg, 800 mg                                                  | 2         | PV*                       | EMTRIVA ORAL SOLUTION 10 MG/ML                                                        | 3         |                       |
| DELSTRIGO ORAL TABLET 100-300-300 MG                                                  | 6         |                           | entecavir oral tablet 0.5 mg, 1 mg                                                    | 2         | PA                    |
| DENAVIR EXTERNAL CREAM 1 %                                                            | 4         | ST; Brand penalty applies | EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG                                            | 5         | PA                    |
| DESCOVY ORAL TABLET 120-15 MG, 200-25 MG                                              | PV        |                           | EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG                                             | 5         | PA                    |
| DOVATO ORAL TABLET 50-300 MG                                                          | 6         |                           | EPIVIR ORAL SOLUTION 10 MG/ML                                                         | 4         | Brand penalty applies |
| EDURANT ORAL TABLET 25 MG                                                             | 4         |                           | EPIVIR ORAL TABLET 150 MG, 300 MG                                                     | 4         | Brand penalty applies |
| EDURANT PED ORAL TABLET SOLUBLE 2.5 MG                                                | 4         |                           | EPZICOM ORAL TABLET 600-300 MG                                                        | 4         | Brand penalty applies |
| efavirenz oral capsule 200 mg, 50 mg                                                  | 2         |                           | etravirine oral tablet 100 mg, 200 mg                                                 | 2         |                       |
| efavirenz oral tablet 600 mg                                                          | 2         |                           | EVOTAZ ORAL TABLET 300-150 MG                                                         | 6         |                       |

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| Drug Name                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------|-----------|-----------------------|
| famciclovir oral tablet 125 mg, 250 mg, 500 mg               | 2         |                       |
| fosamprenavir calcium oral tablet 700 mg                     | 2         |                       |
| foscarnet sodium intravenous solution 6000 mg/250ml          | GM        |                       |
| FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML                  | GM        |                       |
| FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG             | 6         |                       |
| ganciclovir sodium intravenous solution 500 mg/10ml          | GM        |                       |
| ganciclovir sodium intravenous solution reconstituted 500 mg | GM        |                       |
| GENVOYA ORAL TABLET 150-150-200-10 MG                        | 6         |                       |
| HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG                  | 5         | PA                    |
| HARVONI ORAL TABLET 45-200 MG, 90-400 MG                     | 5         | PA                    |
| INTELENCE ORAL TABLET 100 MG, 200 MG                         | 4         | Brand penalty applies |
| INTELENCE ORAL TABLET 25 MG                                  | 4         |                       |
| ISENTRESS HD ORAL TABLET 600 MG                              | 3         | PV*                   |
| ISENTRESS ORAL PACKET 100 MG                                 | 3         | PV*                   |
| ISENTRESS ORAL TABLET 400 MG                                 | 3         | PV*                   |

| Drug Name                                            | Drug Tier | Notes                      |
|------------------------------------------------------|-----------|----------------------------|
| ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG         | 3         | PV*                        |
| JULUCA ORAL TABLET 50-25 MG                          | 6         |                            |
| KALETRA ORAL SOLUTION 400-100 MG/5ML                 | 4         |                            |
| KALETRA ORAL TABLET 100-25 MG, 200-50 MG             | 3         | Brand penalty applies      |
| LAGEVRIO ORAL CAPSULE 200 MG                         | 4         |                            |
| lamivudine oral solution 10 mg/ml, 300 mg/30ml       | 2         |                            |
| lamivudine oral tablet 100 mg, 150 mg, 300 mg        | 2         |                            |
| lamivudine-zidovudine oral tablet 150-300 mg         | 2         |                            |
| LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG          | 5         | PA                         |
| LEXIVA ORAL SUSPENSION 50 MG/ML                      | 4         |                            |
| LEXIVA ORAL TABLET 700 MG                            | 4         | Brand penalty applies      |
| LIVTENCITY ORAL TABLET 200 MG                        | 6         | PA; QL (60 EA per 30 days) |
| lopinavir-ritonavir oral solution 400-100 mg/5ml     | 2         |                            |
| lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg | 2         |                            |
| maraviroc oral tablet 150 mg, 300 mg                 | 2         |                            |
| MAVYRET ORAL PACKET 50-20 MG                         | 5         | PA                         |
| MAVYRET ORAL TABLET 100-40 MG                        | 5         | PA                         |

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| Drug Name                                                                    | Drug Tier | Notes                      |
|------------------------------------------------------------------------------|-----------|----------------------------|
| nevirapine er oral tablet extended release 24 hour 400 mg                    | 2         |                            |
| nevirapine oral suspension 50 mg/5ml                                         | 2         |                            |
| nevirapine oral tablet 200 mg                                                | 2         |                            |
| NORVIR ORAL CAPSULE 100 MG                                                   | 3         | PV*                        |
| NORVIR ORAL PACKET 100 MG                                                    | 4         | PV*                        |
| NORVIR ORAL TABLET 100 MG                                                    | 3         | Brand penalty applies; PV* |
| ODEFSEY ORAL TABLET 200-25-25 MG                                             | 6         |                            |
| oseltamivir phosphate oral capsule 30 mg                                     | 2         | QL (20 EA per 180 days)    |
| oseltamivir phosphate oral capsule 45 mg, 75 mg                              | 2         | QL (10 EA per 180 days)    |
| oseltamivir phosphate oral suspension reconstituted 6 mg/ml                  | 2         | QL (120 ML per 180 days)   |
| PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG & 10 X 100MG         | 4         | QL (20 EA per 56 days)     |
| PAXLOVID (300/100 & 150/100) ORAL TABLET THERAPY PACK 6 X 150 MG & 5 X 100MG | 4         | QL (11 EA per 56 days)     |
| PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG & 10 X 100MG         | 4         | QL (30 EA per 56 days)     |
| PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML                                     | 6         | PA                         |

| Drug Name                                                             | Drug Tier | Notes                      |
|-----------------------------------------------------------------------|-----------|----------------------------|
| PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML         | 6         | PA                         |
| penciclovir external cream 1 %                                        | 2         | ST                         |
| PIFELTRO ORAL TABLET 100 MG                                           | 4         |                            |
| PREVYMIS INTRAVENOUS SOLUTION 240 MG/12ML, 480 MG/24ML                | 6         | PA; Specialty Medical      |
| PREVYMIS ORAL PACKET 120 MG, 20 MG                                    | 6         | PA                         |
| PREVYMIS ORAL TABLET 240 MG, 480 MG                                   | 6         | PA                         |
| PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG                          | 6         |                            |
| PREZISTA ORAL SUSPENSION 100 MG/ML                                    | 4         | PV*                        |
| PREZISTA ORAL TABLET 150 MG, 75 MG                                    | 4         | PV*                        |
| PREZISTA ORAL TABLET 600 MG, 800 MG                                   | 4         | Brand penalty applies; PV* |
| RAPIVAB INTRAVENOUS SOLUTION 200 MG/20ML                              | GM        |                            |
| RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT | 4         | QL (20 EA per 180 days)    |
| RETROVIR INTRAVENOUS SOLUTION 10 MG/ML                                | GM        |                            |

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| Drug Name                                           | Drug Tier | Notes                 | Drug Name                                                | Drug Tier | Notes                                           |
|-----------------------------------------------------|-----------|-----------------------|----------------------------------------------------------|-----------|-------------------------------------------------|
| RETROVIR ORAL CAPSULE 100 MG                        | 4         | Brand penalty applies | STRIBILD ORAL TABLET 150-150-200-300 MG                  | 6         |                                                 |
| RETROVIR ORAL SYRUP 50 MG/5ML                       | 4         | Brand penalty applies | SUNLENCA ORAL TABLET 300 MG                              | 6         |                                                 |
| REYATAZ ORAL CAPSULE 200 MG, 300 MG                 | 4         | Brand penalty applies | SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG | 6         |                                                 |
| REYATAZ ORAL PACKET 50 MG                           | 4         |                       | SUNLENCA SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML            | 6         | Specialty Medical                               |
| ribavirin inhalation solution reconstituted 6 gm    | 6         | PA; Specialty Medical | SYMFI LO ORAL TABLET 400-300-300 MG                      | 2         | Brand penalty applies                           |
| ribavirin oral capsule 200 mg                       | 5         |                       | SYMFI ORAL TABLET 600-300-300 MG                         | 2         | Brand penalty applies                           |
| ribavirin oral tablet 200 mg                        | 5         |                       | SYMTUZA ORAL TABLET 800-150-200-10 MG                    | 6         |                                                 |
| rimantadine hcl oral tablet 100 mg                  | 2         |                       |                                                          | 4         | Brand penalty applies; QL (20 EA per 180 days)  |
| ritonavir oral tablet 100 mg                        | 2         | PV*                   | TAMIFLU ORAL CAPSULE 30 MG                               | 4         | Brand penalty applies; QL (10 EA per 180 days)  |
| RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG | 6         |                       | TAMIFLU ORAL CAPSULE 45 MG, 75 MG                        | 4         | Brand penalty applies; QL (120 ML per 180 days) |
| SELZENTRY ORAL SOLUTION 20 MG/ML                    | 4         |                       | TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML            | 4         | Brand penalty applies; QL (120 ML per 180 days) |
| SELZENTRY ORAL TABLET 150 MG, 300 MG                | 4         | Brand penalty applies | tenofovir disoproxil fumarate oral tablet 300 mg         | 2         |                                                 |
| SELZENTRY ORAL TABLET 25 MG, 75 MG                  | 4         |                       | TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG                  | 6         | PV*                                             |
| SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG       | 4         | PA                    |                                                          |           |                                                 |
| SOVALDI ORAL PACKET 150 MG, 200 MG                  | 6         | PA                    |                                                          |           |                                                 |
| SOVALDI ORAL TABLET 200 MG, 400 MG                  | 6         | PA                    |                                                          |           |                                                 |

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| Drug Name                                                                   | Drug Tier | Notes                       | Drug Name                                                        | Drug Tier | Notes                        |
|-----------------------------------------------------------------------------|-----------|-----------------------------|------------------------------------------------------------------|-----------|------------------------------|
| TIVICAY PD ORAL<br>TABLET SOLUBLE 5<br>MG                                   | 6         | PV*                         | VIRACEPT ORAL<br>TABLET 250 MG, 625<br>MG                        | 4         |                              |
| TRIUMEQ ORAL<br>TABLET 600-50-300 MG                                        | 6         |                             | VIRAZOLE INHALATION<br>SOLUTION<br>RECONSTITUTED 6 GM            | 6         | PA;<br>Specialty<br>Medical  |
| TRIUMEQ PD ORAL<br>TABLET SOLUBLE 60-5-<br>30 MG                            | 6         |                             | VIREAD ORAL<br>POWDER 40 MG/GM                                   | 4         |                              |
| TROGARZO<br>INTRAVENOUS<br>SOLUTION 200<br>MG/1.33ML                        | 6         | Specialty<br>Medical        | VIREAD ORAL TABLET<br>150 MG, 200 MG, 250<br>MG                  | 4         |                              |
| TRUVADA ORAL<br>TABLET 100-150 MG,<br>133-200 MG, 167-250<br>MG, 200-300 MG | PV        |                             | VIREAD ORAL TABLET<br>300 MG                                     | 4         | Brand<br>penalty<br>applies  |
| TYBOST ORAL TABLET<br>150 MG                                                | 4         |                             | VOCABRIA ORAL<br>TABLET 30 MG                                    | PV        |                              |
| valacyclovir hcl oral<br>tablet 1 gm, 500 mg                                | 2         |                             | VOSEVI ORAL TABLET<br>400-100-100 MG                             | 6         | PA                           |
| VALCYTE ORAL<br>SOLUTION<br>RECONSTITUTED 50<br>MG/ML                       | 6         |                             | XOFLUZA (40 MG<br>DOSE) ORAL TABLET<br>THERAPY PACK 1 X 40<br>MG | 4         | QL (2 EA<br>per 180<br>days) |
| VALCYTE ORAL<br>TABLET 450 MG                                               | 6         |                             | XOFLUZA (80 MG<br>DOSE) ORAL TABLET<br>THERAPY PACK 1 X 80<br>MG | 4         | QL (2 EA<br>per 180<br>days) |
| valganciclovir hcl oral<br>solution reconstituted 50<br>mg/ml               | 5         |                             | YEZTUGO ORAL<br>TABLET 300 MG                                    | PV        |                              |
| valganciclovir hcl oral<br>tablet 450 mg                                    | 5         |                             | YEZTUGO<br>SUBCUTANEOUS<br>SOLUTION 463.5<br>MG/1.5ML            | PV        |                              |
| VALTREX ORAL<br>TABLET 1 GM, 500 MG                                         | 4         | Brand<br>penalty<br>applies | ZEPATIER ORAL<br>TABLET 50-100 MG                                | 6         | PA                           |
| VEKLURY<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG               | 6         | Specialty<br>Medical        | ZIAGEN ORAL<br>SOLUTION 20 MG/ML                                 | 4         | Brand<br>penalty<br>applies  |
| VEMLIDY ORAL<br>TABLET 25 MG                                                | 5         | PA                          | zidovudine oral capsule<br>100 mg                                | 2         |                              |
|                                                                             |           |                             | zidovudine oral syrup 50<br>mg/5ml                               | 2         |                              |

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| Drug Name                                                                   | Drug Tier | Notes                                         |
|-----------------------------------------------------------------------------|-----------|-----------------------------------------------|
| zidovudine oral tablet 300 mg                                               | 2         |                                               |
| ZOVIRAX EXTERNAL CREAM 5 %                                                  | 4         | Brand penalty applies                         |
| ZOVIRAX EXTERNAL OINTMENT 5 %                                               | 4         | Brand penalty applies; QL (15 GM per 30 days) |
| <b>Anxiolytics - Drugs for Anxiety</b>                                      |           |                                               |
| alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg | 2         |                                               |
| alprazolam intensol oral concentrate 1 mg/ml                                | 2         |                                               |
| alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg                          | 2         |                                               |
| alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg              | 2         | ST                                            |
| alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg | 2         |                                               |
| ATIVAN INJECTION SOLUTION 2 MG/ML, 4 MG/ML                                  | GM        |                                               |
| ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG                                       | 4         | Brand penalty applies                         |
| buspirone hcl oral tablet 10 mg, 15 mg, 5 mg                                | 1         |                                               |
| buspirone hcl oral tablet 30 mg, 7.5 mg                                     | 2         |                                               |
| BYFAVO INTRAVENOUS SOLUTION RECONSTITUTED 20 MG                             | GM        |                                               |

| Drug Name                                                                | Drug Tier | Notes                 |
|--------------------------------------------------------------------------|-----------|-----------------------|
| chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg                     | 2         |                       |
| clonazepam oral tablet 0.5 mg, 1 mg, 2 mg                                | 2         |                       |
| clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg | 2         |                       |
| clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg               | 2         |                       |
| diazepam injection solution 10 mg/2ml                                    | GM        |                       |
| diazepam intensol oral concentrate 5 mg/ml                               | 1         |                       |
| diazepam oral concentrate 5 mg/ml                                        | 1         |                       |
| diazepam oral solution 5 mg/5ml                                          | 1         |                       |
| diazepam oral tablet 10 mg, 2 mg, 5 mg                                   | 1         |                       |
| diazepam solution 5 mg/ml injection                                      | GM        |                       |
| DIAZEPAM SOLUTION 5 MG/ML INJECTION                                      | GM        |                       |
| DORAL ORAL TABLET 15 MG                                                  | 4         | Brand penalty applies |
| estazolam oral tablet 1 mg, 2 mg                                         | 2         |                       |
| HALCION ORAL TABLET 0.25 MG                                              | 4         | Brand penalty applies |
| hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml                | GM        |                       |
| hydroxyzine hcl oral syrup 10 mg/5ml                                     | 2         |                       |
| hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg                          | 2         |                       |

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| Drug Name                                                                              | Drug Tier | Notes |
|----------------------------------------------------------------------------------------|-----------|-------|
| hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg                                  | 2         |       |
| KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG                                                | 4         |       |
| lorazepam injection solution 4 mg/ml                                                   | GM        |       |
| lorazepam intensol oral concentrate 2 mg/ml                                            | 2         |       |
| lorazepam oral concentrate 2 mg/ml                                                     | 2         |       |
| lorazepam oral tablet 0.5 mg, 1 mg, 2 mg                                               | 2         |       |
| lorazepam solution 2 mg/ml injection                                                   | GM        |       |
| LORAZEPAM SOLUTION 2 MG/ML INJECTION                                                   | GM        |       |
| LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1 MG, 1.5 MG, 2 MG, 3 MG                    | 4         |       |
| meprobamate oral tablet 200 mg, 400 mg                                                 | 2         |       |
| midazolam hcl (pf) +rfid injection solution 2 mg/2ml                                   | GM        |       |
| midazolam hcl (pf) injection solution 10 mg/2ml, 2 mg/2ml, 5 mg/5ml, 5 mg/ml           | GM        |       |
| midazolam hcl injection solution 10 mg/10ml, 10 mg/2ml, 25 mg/5ml, 5 mg/ml, 50 mg/10ml | GM        |       |
| MIDAZOLAM HCL INTRAVENOUS SOLUTION 150 MG/30ML                                         | GM        |       |

| Drug Name                                                                                                                                                 | Drug Tier | Notes |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| MIDAZOLAM HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 150 MG/30ML                                                                                          | GM        |       |
| MIDAZOLAM HCL SOLUTION 2 MG/2ML INJECTION                                                                                                                 | GM        |       |
| midazolam hcl solution 2 mg/2ml injection                                                                                                                 | GM        |       |
| MIDAZOLAM HCL SOLUTION 5 MG/5ML INJECTION                                                                                                                 | GM        |       |
| midazolam hcl solution 5 mg/5ml injection                                                                                                                 | GM        |       |
| MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.8 MG/100ML-%, 50-0.8 MG/50ML-%, 50-0.9 MG/50ML-%                                                 | GM        |       |
| MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 2-0.9 MG/2ML-%, 30-0.9 MG/30ML-%, 5-0.9 MG/5ML-%, 50-0.9 MG/50ML-%, 55-0.9 MG/55ML-% | GM        |       |
| MIDAZOLAM INJECTION SOLUTION PREFILLED SYRINGE 2 MG/2ML, 3 MG/3ML, 5 MG/5ML                                                                               | GM        |       |
| MIDAZOLAM INTRAVENOUS SOLUTION 100 MG/100ML, 50 MG/50ML                                                                                                   | GM        |       |

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| Drug Name                                                                                                                      | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| MIDAZOLAM INTRAVENOUS SOLUTION PREFILLED SYRINGE 2 MG/2ML, 25 MG/25ML, 30 MG/30ML, 50 MG/50ML                                  | GM        |                       |
| midazolam-sodium chloride (pf) intravenous solution 100-0.8 mg/100ml-%, 100-0.9 mg/100ml-%, 50-0.8 mg/50ml-%, 50-0.9 mg/50ml-% | GM        |                       |
| midazolam-sodium chloride solution 100-0.9 mg/100ml-% intravenous                                                              | GM        |                       |
| MIDAZOLAM-SODIUM CHLORIDE SOLUTION 100-0.9 MG/100ML-% INTRAVENOUS                                                              | GM        |                       |
| midazolam-sodium chloride solution 50-0.9 mg/50ml-% intravenous                                                                | GM        |                       |
| MIDAZOLAM-SODIUM CHLORIDE SOLUTION 50-0.9 MG/50ML-% INTRAVENOUS                                                                | GM        |                       |
| oxazepam oral capsule 10 mg, 15 mg, 30 mg                                                                                      | 2         |                       |
| quazepam oral tablet 15 mg                                                                                                     | 2         |                       |
| triazolam oral tablet 0.125 mg, 0.25 mg                                                                                        | 2         |                       |
| VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG                                                                                           | 3         |                       |
| XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG                                                                                  | 4         | Brand penalty applies |
| XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG, 3 MG                                                         | 4         | Brand penalty applies |

| Drug Name                                                                                                             | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| <b>Bipolar Agents - Drugs for Mood Disorders</b>                                                                      |           |                       |
| EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG                                                  | 3         |                       |
| lithium carbonate er oral tablet extended release 300 mg, 450 mg                                                      | 2         |                       |
| lithium carbonate oral capsule 150 mg, 300 mg, 600 mg                                                                 | 1         |                       |
| lithium carbonate oral tablet 300 mg                                                                                  | 2         |                       |
| lithium oral solution 8 meq/5ml                                                                                       | 2         |                       |
| LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG                                                                          | 3         |                       |
| <b>Blood Products and Modifiers - Drugs for Blood Disorders</b>                                                       |           |                       |
| ADAKVEO INTRAVENOUS SOLUTION 100 MG/10ML                                                                              | 6         | PA; Specialty Medical |
| ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT   | 6         | Specialty Medical     |
| ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT | 6         | Specialty Medical     |

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| Drug Name                                                                                                                     | Drug Tier | Notes                       | Drug Name                                                                                                                                                                                                                    | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| AFSTYLA<br>INTRAVENOUS KIT<br>1000 UNIT, 1500 UNIT,<br>2000 UNIT, 250 UNIT,<br>2500 UNIT, 3000 UNIT,<br>500 UNIT              | 6         | Specialty<br>Medical        | aminocaproic acid oral<br>solution 0.25 gm/ml                                                                                                                                                                                | 2         |                             |
|                                                                                                                               |           |                             | aminocaproic acid oral<br>tablet 1000 mg, 500 mg                                                                                                                                                                             | 2         |                             |
|                                                                                                                               |           |                             | anagrelide hcl oral<br>capsule 0.5 mg, 1 mg                                                                                                                                                                                  | 2         |                             |
| AGRYLIN ORAL<br>CAPSULE 0.5 MG                                                                                                | 4         | Brand<br>penalty<br>applies | APHEXDA<br>SUBCUTANEOUS<br>SOLUTION<br>RECONSTITUTED 62<br>MG                                                                                                                                                                | 6         | PA;<br>Specialty<br>Medical |
| ALHEMO<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 150<br>MG/1.5ML, 300 MG/3ML,<br>60 MG/1.5ML                               | 6         | PA                          | ARANESP (ALBUMIN<br>FREE) INJECTION<br>SOLUTION 100<br>MCG/ML, 200 MCG/ML,<br>25 MCG/ML, 40<br>MCG/ML, 60 MCG/ML                                                                                                             | 6         |                             |
| ALPHANATE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1500 UNIT, 2000<br>UNIT, 250 UNIT, 500<br>UNIT            | 6         | Specialty<br>Medical        | ARANESP (ALBUMIN<br>FREE) INJECTION<br>SOLUTION PREFILLED<br>SYRINGE 10<br>MCG/0.4ML, 100<br>MCG/0.5ML, 150<br>MCG/0.3ML, 200<br>MCG/0.4ML, 25<br>MCG/0.42ML, 300<br>MCG/0.6ML, 40<br>MCG/0.4ML, 500<br>MCG/ML, 60 MCG/0.3ML | 6         |                             |
| ALPHANINE SD<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1500 UNIT, 500<br>UNIT                                 | 6         | Specialty<br>Medical        | ASTRINGYN<br>EXTERNAL SOLUTION<br>259 MG/GM                                                                                                                                                                                  | 4         |                             |
| ALPROLIX<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 250<br>UNIT, 3000 UNIT, 4000<br>UNIT, 500 UNIT  | 6         | Specialty<br>Medical        | BALFAXAR<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 500 UNIT                                                                                                                                                  | GM        |                             |
| ALTUVIIIQ<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 250<br>UNIT, 3000 UNIT, 4000<br>UNIT, 500 UNIT | 6         | Specialty<br>Medical        | BENEFIX<br>INTRAVENOUS KIT<br>1000 UNIT, 2000 UNIT,<br>250 UNIT, 3000 UNIT,<br>500 UNIT                                                                                                                                      | 6         | Specialty<br>Medical        |
| aminocaproic acid<br>intravenous solution 250<br>mg/ml                                                                        | GM        |                             |                                                                                                                                                                                                                              |           |                             |

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| Drug Name                                                                                                                                                                     | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| BEQVEZ<br>INTRAVENOUS<br>SUSPENSION<br>THERAPY PACK 4 X 1<br>ML, 5 X 1 ML, 6 X 1 ML,<br>7 X 1 ML                                                                              | 6         | PA;<br>Specialty<br>Medical |
| BKEMV INTRAVENOUS<br>SOLUTION 300<br>MG/30ML                                                                                                                                  | 5         | PA;<br>Specialty<br>Medical |
| CEPROTIN<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 500 UNIT                                                                                                   | GM        |                             |
| COAGADEX<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 250<br>UNIT, 500 UNIT                                                                                                    | 6         | Specialty<br>Medical        |
| CORIFACT<br>INTRAVENOUS KIT<br>1000-1600 UNIT                                                                                                                                 | 6         | Specialty<br>Medical        |
| CYKLOKAPRON<br>INTRAVENOUS<br>SOLUTION 1000<br>MG/10ML                                                                                                                        | GM        |                             |
| DOPTELET ORAL<br>TABLET 20 MG                                                                                                                                                 | 6         | PA                          |
| DOPTELET SPRINKLE<br>ORAL CAPSULE<br>SPRINKLE 10 MG                                                                                                                           | 6         | PA                          |
| ELOCTATE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1500 UNIT, 2000<br>UNIT, 250 UNIT, 3000<br>UNIT, 4000 UNIT, 500<br>UNIT, 5000 UNIT, 6000<br>UNIT, 750 UNIT | 6         | Specialty<br>Medical        |
| eltrombopag olamine oral<br>packet 12.5 mg                                                                                                                                    | 5         | PA                          |
| eltrombopag olamine oral<br>packet 25 mg                                                                                                                                      | 6         | PA                          |

| Drug Name                                                                                                                     | Drug Tier | Notes                            |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------|
| eltrombopag olamine oral<br>tablet 12.5 mg, 25 mg, 50<br>mg, 75 mg                                                            | 5         | PA                               |
| EMPAVELI<br>SUBCUTANEOUS<br>SOLUTION 1080<br>MG/20ML                                                                          | 6         | PA                               |
| ENJAYMO<br>INTRAVENOUS<br>SOLUTION 1100<br>MG/22ML                                                                            | 6         | PA;<br>Specialty<br>Medical      |
| EPOGEN INJECTION<br>SOLUTION 10000<br>UNIT/ML, 2000 UNIT/ML,<br>20000 UNIT/ML, 3000<br>UNIT/ML, 4000 UNIT/ML                  | 6         |                                  |
| EPYSQLI<br>INTRAVENOUS<br>SOLUTION 300<br>MG/30ML                                                                             | 5         | PA;<br>Specialty<br>Medical      |
| ESPEROCT<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1500 UNIT, 2000<br>UNIT, 3000 UNIT, 4000<br>UNIT, 500 UNIT | 6         | Specialty<br>Medical             |
| FABHALTA ORAL<br>CAPSULE 200 MG                                                                                               | 6         | PA; QL (60<br>EA per 30<br>days) |
| FEIBA INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2500 UNIT, 500<br>UNIT                                           | 6         | Specialty<br>Medical             |
| FIBRYGA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED , 2<br>GM                                                                 | GM        |                                  |
| FULPHILA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 6 MG/0.6ML                                                          | 5         |                                  |

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| Drug Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Drug Tier | Notes                       | Drug Name                                                                                                                | Drug Tier | Notes                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------|
| FYLNETRA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 6 MG/0.6ML                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 5         |                             | HEMOFIL M<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1700 UNIT, 250<br>UNIT, 500 UNIT                     | 6         | Specialty<br>Medical            |
| GRANIX<br>SUBCUTANEOUS<br>SOLUTION 300<br>MCG/ML, 480<br>MCG/1.6ML                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 5         |                             | HESPAN<br>INTRAVENOUS<br>SOLUTION 6-0.9 %                                                                                | GM        |                                 |
| GRANIX<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 300<br>MCG/0.5ML, 480<br>MCG/0.8ML                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 5         |                             | hetastarch-nacl<br>intravenous solution 6-<br>0.9 %                                                                      | GM        |                                 |
| HEMGENIX<br>INTRAVENOUS<br>SUSPENSION<br>THERAPY PACK 10 X<br>10 ML, 11 X 10 ML, 12 X<br>10 ML, 13 X 10 ML, 14 X<br>10 ML, 15 X 10 ML, 16 X<br>10 ML, 17 X 10 ML, 18 X<br>10 ML, 19 X 10 ML, 20 X<br>10 ML, 21 X 10 ML, 22 X<br>10 ML, 23 X 10 ML, 24 X<br>10 ML, 25 X 10 ML, 26 X<br>10 ML, 27 X 10 ML, 28 X<br>10 ML, 29 X 10 ML, 30 X<br>10 ML, 31 X 10 ML, 32 X<br>10 ML, 33 X 10 ML, 34 X<br>10 ML, 35 X 10 ML, 36 X<br>10 ML, 37 X 10 ML, 38 X<br>10 ML, 39 X 10 ML, 40 X<br>10 ML, 41 X 10 ML, 42 X<br>10 ML, 43 X 10 ML, 44 X<br>10 ML, 45 X 10 ML, 46 X<br>10 ML, 47 X 10 ML, 48 X<br>10 ML | 6         | PA;<br>Specialty<br>Medical | HEXTEND<br>INTRAVENOUS<br>SOLUTION 6 %                                                                                   | GM        |                                 |
| HEMLIBRA<br>SUBCUTANEOUS<br>SOLUTION 105<br>MG/0.7ML, 12<br>MG/0.4ML, 150 MG/ML,<br>30 MG/ML, 300 MG/2ML,<br>60 MG/0.4ML                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | GM        |                             | HUMATE-P<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000-<br>2400 UNIT, 250-600<br>UNIT, 500-1200 UNIT                  | 6         | Specialty<br>Medical            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                             | HYMPAVZI<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 150 MG/ML                                                         | 6         | PA; QL (4<br>ML per 28<br>days) |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                             | IDELVION<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 250<br>UNIT, 3500 UNIT, 500<br>UNIT        | 6         | Specialty<br>Medical            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                             | IXINITY INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 1500 UNIT, 2000<br>UNIT, 250 UNIT, 3000<br>UNIT, 500 UNIT | 6         | Specialty<br>Medical            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |           |                             | JIVI INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 3000<br>UNIT, 4000 UNIT, 500<br>UNIT              | 6         | Specialty<br>Medical            |

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| Drug Name                                                                                                                                                                    | Drug Tier | Notes                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------|
| KCENTRA<br>INTRAVENOUS KIT<br>1000 UNIT, 500 UNIT                                                                                                                            | GM        |                      |
| KOATE INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 250 UNIT, 500<br>UNIT                                                                                           | 6         | Specialty<br>Medical |
| KOATE-DVI<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT                                                                                                           | 6         | Specialty<br>Medical |
| KOGENATE FS<br>INTRAVENOUS KIT<br>1000 UNIT, 2000 UNIT,<br>250 UNIT, 3000 UNIT,<br>500 UNIT                                                                                  | 6         | Specialty<br>Medical |
| KOVALTRY<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 250<br>UNIT, 3000 UNIT, 500<br>UNIT                                                            | 6         | Specialty<br>Medical |
| LEUKINE INJECTION<br>SOLUTION<br>RECONSTITUTED 250<br>MCG                                                                                                                    | 6         | Specialty<br>Medical |
| LMD IN D5W<br>INTRAVENOUS<br>SOLUTION 10-5 %                                                                                                                                 | GM        |                      |
| LMD IN NACL<br>INTRAVENOUS<br>SOLUTION 10-0.9 %                                                                                                                              | GM        |                      |
| MIRCERA INJECTION<br>SOLUTION PREFILLED<br>SYRINGE 100<br>MCG/0.3ML, 120<br>MCG/0.3ML, 150<br>MCG/0.3ML, 200<br>MCG/0.3ML, 30<br>MCG/0.3ML, 50<br>MCG/0.3ML, 75<br>MCG/0.3ML | 6         | Specialty<br>Medical |

| Drug Name                                                                              | Drug Tier | Notes                       |
|----------------------------------------------------------------------------------------|-----------|-----------------------------|
| MONSELS FERRIC<br>SUBSULFATE<br>EXTERNAL PASTE                                         | 4         |                             |
| MONSELS FERRIC<br>SUBSULFATE<br>EXTERNAL SOLUTION                                      | 4         |                             |
| MOZOBIL<br>SUBCUTANEOUS<br>SOLUTION 24<br>MG/1.2ML                                     | 6         | PA;<br>Specialty<br>Medical |
| MULPLETA ORAL<br>TABLET 3 MG                                                           | 6         | PA                          |
| NEULASTA ONPRO<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 6 MG/0.6ML             | 6         |                             |
| NEULASTA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 6 MG/0.6ML                   | 6         |                             |
| NEUPOGEN INJECTION<br>SOLUTION 300<br>MCG/ML, 480<br>MCG/1.6ML                         | 6         |                             |
| NEUPOGEN INJECTION<br>SOLUTION PREFILLED<br>SYRINGE 300<br>MCG/0.5ML, 480<br>MCG/0.8ML | 6         |                             |
| NIVESTYM INJECTION<br>SOLUTION 300<br>MCG/ML, 480<br>MCG/1.6ML                         | 5         |                             |
| NIVESTYM INJECTION<br>SOLUTION PREFILLED<br>SYRINGE 300<br>MCG/0.5ML, 480<br>MCG/0.8ML | 5         |                             |

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| Drug Name                                                                                                                     | Drug Tier | Notes                 | Drug Name                                                                                                        | Drug Tier | Notes                      |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT                   | 6         | Specialty Medical     | PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG                                                             | GM        |                            |
| NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG                                                        | 6         | Specialty Medical     | plerixafor subcutaneous solution 24 mg/1.2ml                                                                     | 6         | PA; Specialty Medical      |
| NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 125 MCG, 250 MCG, 500 MCG                                                          | 6         | PA; Specialty Medical | PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML | 6         |                            |
| NUWIQ INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT                    | 6         | Specialty Medical     | PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT                                     | 6         | Specialty Medical          |
| NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 6         | Specialty Medical     | PROMACTA ORAL PACKET 12.5 MG, 25 MG                                                                              | 6         | PA                         |
| NYPOZI INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML                                                      | 5         |                       | PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG                                                                | 6         | PA                         |
| NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML                                                                   | 5         |                       | protamine sulfate intravenous solution 10 mg/ml                                                                  | GM        |                            |
| OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT                                                                            | 6         | Specialty Medical     | PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG                                                                          | 6         | PA; QL (60 EA per 30 days) |
|                                                                                                                               |           |                       | PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK 5 MG, 7 X 20 MG & 7 X 5 MG, 7 X 50 MG & 7 X 20 MG                   | 6         | PA                         |
|                                                                                                                               |           |                       | REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT                             | GM        |                            |

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| Drug Name                                                                                                                                      | Drug Tier | Notes                       | Drug Name                                                                                                        | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| REBLOZYL<br>SUBCUTANEOUS<br>SOLUTION<br>RECONSTITUTED 25<br>MG, 75 MG                                                                          | 6         | PA;<br>Specialty<br>Medical | RIXUBIS<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 2000 UNIT, 250<br>UNIT, 3000 UNIT, 500<br>UNIT | 6         | Specialty<br>Medical        |
| RECOMBINATE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1241-<br>1800 UNIT, 1801-2400<br>UNIT, 220-400 UNIT,<br>401-800 UNIT, 801-1240<br>UNIT | 6         | Specialty<br>Medical        | ROLVEDON<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 13.2<br>MG/0.6ML                                       | 6         |                             |
| RECOTHROM<br>EXTERNAL SOLUTION<br>RECONSTITUTED<br>20000 UNIT, 5000 UNIT                                                                       | 4         |                             | SEVENFACT<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 1<br>MG, 2 MG, 5 MG                                        | 6         | Specialty<br>Medical        |
| RECOTHROM SPRAY<br>KIT EXTERNAL<br>SOLUTION<br>RECONSTITUTED<br>20000 UNIT                                                                     | 4         |                             | SOLIRIS<br>INTRAVENOUS<br>SOLUTION 300<br>MG/30ML                                                                | 6         | PA;<br>Specialty<br>Medical |
| RELEUKO INJECTION<br>SOLUTION 300<br>MCG/ML, 480<br>MCG/1.6ML                                                                                  | 5         |                             | STIMUFEND<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 6 MG/0.6ML                                            | 5         |                             |
| RELEUKO<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 300<br>MCG/0.5ML, 480<br>MCG/0.8ML                                                    | 5         |                             | THROMBIN-JMI<br>EPISTAXIS EXTERNAL<br>KIT 5000 UNIT                                                              | 4         |                             |
| RETACRIT INJECTION<br>SOLUTION 10000<br>UNIT/ML, 2000 UNIT/ML,<br>20000 UNIT/ML, 3000<br>UNIT/ML, 4000 UNIT/ML,<br>40000 UNIT/ML               | 5         |                             | THROMBIN-JMI<br>EXTERNAL KIT 20000<br>UNIT, 5000 UNIT                                                            | 4         |                             |
| RIASTAP<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED                                                                                            | GM        |                             | THROMBIN-JMI<br>EXTERNAL SOLUTION<br>RECONSTITUTED<br>20000 UNIT, 5000 UNIT                                      | 4         |                             |
|                                                                                                                                                |           |                             | THROMBOGEN<br>EXTERNAL KIT 10000<br>UNIT                                                                         | 4         |                             |
|                                                                                                                                                |           |                             | THROMBOGEN<br>EXTERNAL SOLUTION<br>RECONSTITUTED 1000<br>UNIT, 10000 UNIT                                        | 4         |                             |

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| Drug Name                                                         | Drug Tier | Notes                       | Drug Name                                                                           | Drug Tier | Notes                       |
|-------------------------------------------------------------------|-----------|-----------------------------|-------------------------------------------------------------------------------------|-----------|-----------------------------|
| tranexamic acid intravenous solution 1000 mg/10ml                 | GM        |                             | WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT                                 | 6         | Specialty Medical           |
| tranexamic acid oral tablet 650 mg                                | 2         |                             |                                                                                     | 6         | PA; QL (120 EA per 30 days) |
| tranexamic acid-nacl intravenous solution 1000-0.7 mg/100ml-%     | GM        |                             | XOLREMDI ORAL CAPSULE 100 MG                                                        |           |                             |
| TRETEN INTRAVENOUS SOLUTION RECONSTITUTED 2500 UNIT               | 6         | Specialty Medical           | XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT                     | 6         | Specialty Medical           |
| UDENYCA ONBODY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | 5         |                             | XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 6         | Specialty Medical           |
| UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6 MG/0.6ML            | 5         |                             | ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML            | 5         |                             |
| UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML        | 5         |                             | ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML                        | 5         |                             |
| ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML           | 6         | PA; Specialty Medical       | <b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>           |           |                             |
| VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT   | 6         | Specialty Medical           | ACCUPRIL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG                                      | 4         | Brand penalty applies       |
|                                                                   | 6         | PA; QL (180 EA per 30 days) | ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG                                        | 4         | Brand penalty applies       |
| VOYDEYA ORAL TABLET 100 MG                                        | 6         |                             | acebutolol hcl oral capsule 200 mg, 400 mg                                          | 2         |                             |
| VOYDEYA ORAL TABLET THERAPY PACK 50 & 100 MG                      | 6         | PA; QL (180 EA per 30 days) | acetazolamide sodium injection solution reconstituted 500 mg                        | GM        |                             |
|                                                                   |           |                             | adenosine intravenous solution 12 mg/4ml, 6 mg/2ml                                  | GM        |                             |

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| Drug Name                                                                                           | Drug Tier | Notes                               |
|-----------------------------------------------------------------------------------------------------|-----------|-------------------------------------|
| ADRENALIN<br>INTRAVENOUS<br>SOLUTION 10-0.9<br>MG/250ML-%, 2-0.9<br>MG/250ML-%, 8-0.9<br>MG/250ML-% | GM        |                                     |
| ADRENALIN-NACL<br>INTRAVENOUS<br>SOLUTION 4-0.9<br>MG/250ML-%                                       | GM        |                                     |
| AKOVAZ<br>INTRAVENOUS<br>SOLUTION 50 MG/ML                                                          | GM        |                                     |
| AKOVAZ<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 25 MG/5ML                                    | GM        |                                     |
| ALDACTONE ORAL<br>TABLET 100 MG, 25<br>MG, 50 MG                                                    | 4         | Brand<br>penalty<br>applies;<br>GD* |
| aliskiren fumarate oral<br>tablet 150 mg, 300 mg                                                    | 2         |                                     |
| alprostadil injection<br>solution 500 mcg/ml                                                        | GM        |                                     |
| ALTACE ORAL<br>CAPSULE 10 MG, 2.5<br>MG                                                             | 4         | Brand<br>penalty<br>applies         |
| ALTOPREV ORAL<br>TABLET EXTENDED<br>RELEASE 24 HOUR 20<br>MG, 40 MG, 60 MG                          | 4         | PA                                  |
| amiloride hcl oral tablet 5<br>mg                                                                   | 2         |                                     |
| amiloride-<br>hydrochlorothiazide oral<br>tablet 5-50 mg                                            | 2         |                                     |
| AMIODARONE HCL IN<br>DEXTROSE<br>INTRAVENOUS<br>SOLUTION 450-5<br>MG/250ML-%                        | GM        |                                     |

| Drug Name                                                                                                                                                          | Drug Tier | Notes                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| amiodarone hcl<br>intravenous solution 150<br>mg/3ml, 450 mg/9ml, 900<br>mg/18ml                                                                                   | GM        |                             |
| amiodarone hcl oral<br>tablet 100 mg, 200 mg,<br>400 mg                                                                                                            | 2         |                             |
| amlodipine besylate oral<br>tablet 10 mg, 2.5 mg, 5<br>mg                                                                                                          | 1         |                             |
| amlodipine besylate-<br>benazepril hcl oral<br>capsule 10-20 mg, 10-40<br>mg, 2.5-10 mg, 5-10 mg,<br>5-20 mg, 5-40 mg                                              | 2         |                             |
| amlodipine besylate-<br>valsartan oral tablet 10-<br>160 mg, 10-320 mg, 5-<br>160 mg, 5-320 mg                                                                     | 2         |                             |
| amlodipine-atorvastatin<br>oral tablet 10-10 mg, 10-<br>20 mg, 10-40 mg, 10-80<br>mg, 2.5-10 mg, 2.5-20<br>mg, 2.5-40 mg, 5-10 mg,<br>5-20 mg, 5-40 mg, 5-80<br>mg | 2         |                             |
| amlodipine-olmesartan<br>oral tablet 10-20 mg, 10-<br>40 mg, 5-20 mg, 5-40 mg                                                                                      | 2         |                             |
| amlodipine-valsartan-<br>hctz oral tablet 10-160-<br>12.5 mg, 10-160-25 mg,<br>10-320-25 mg, 5-160-<br>12.5 mg, 5-160-25 mg                                        | 2         |                             |
| ASCLERA<br>INTRAVENOUS<br>SOLUTION 0.5 %, 1 %                                                                                                                      | GM        |                             |
| ATACAND HCT ORAL<br>TABLET 16-12.5 MG, 32-<br>12.5 MG, 32-25 MG                                                                                                    | 4         | Brand<br>penalty<br>applies |
| ATACAND ORAL<br>TABLET 16 MG, 32 MG,<br>4 MG, 8 MG                                                                                                                 | 4         | Brand<br>penalty<br>applies |

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| Drug Name                                                                              | Drug Tier | Notes                   |
|----------------------------------------------------------------------------------------|-----------|-------------------------|
| atenolol oral tablet 100 mg, 25 mg, 50 mg                                              | 2         |                         |
| atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg                                | 2         |                         |
| atorvastatin calcium oral tablet 10 mg, 20 mg                                          | 2         | PV*                     |
| atorvastatin calcium oral tablet 40 mg, 80 mg                                          | 2         |                         |
| ATTRUBY ORAL TABLET THERAPY PACK 356 MG                                                | 6         | PA; QL (4 EA per 1 day) |
| AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG                                           | 4         | Brand penalty applies   |
| AVAPRO ORAL TABLET 150 MG, 300 MG, 75 MG                                               | 4         | Brand penalty applies   |
| AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG                                  | 3         | Brand penalty applies   |
| benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg                                   | 1         |                         |
| benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg | 2         |                         |
| BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG                               | 4         | Brand penalty applies   |
| BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG                                                 | 4         | Brand penalty applies   |
| BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG                                          | 4         | Brand penalty applies   |
| BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG                                             | 4         | Brand penalty applies   |
| betaxolol hcl oral tablet 10 mg, 20 mg                                                 | 2         |                         |

| Drug Name                                                                                     | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------|-----------|-----------------------|
| BIDIL ORAL TABLET 20-37.5 MG                                                                  | 4         | Brand penalty applies |
| BIORPHEN INTRAVENOUS SOLUTION 0.5 MG/5ML                                                      | GM        |                       |
| bisoprolol fumarate oral tablet 10 mg, 2.5 mg, 5 mg                                           | 2         |                       |
| bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg                 | 1         |                       |
| BREVIBLOC IN NACL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML                           | GM        |                       |
| BREVIBLOC INTRAVENOUS SOLUTION 100 MG/10ML                                                    | GM        |                       |
| BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION 2000 MG/100ML                                      | GM        |                       |
| BREVIBLOC PREMIXED INTRAVENOUS SOLUTION 2500 MG/250ML                                         | GM        |                       |
| bumetanide oral tablet 0.5 mg, 1 mg, 2 mg                                                     | 2         |                       |
| BUMEX ORAL TABLET 0.5 MG                                                                      | 4         | Brand penalty applies |
| BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG                                               | 3         | Brand penalty applies |
| CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG | 4         | Brand penalty applies |

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| Drug Name                                                                                       | Drug Tier | Notes                      |
|-------------------------------------------------------------------------------------------------|-----------|----------------------------|
| CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG                                                 | 6         | PA; QL (30 EA per 30 days) |
| candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg                                      | 2         |                            |
| candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg                         | 2         |                            |
| captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg                                             | 2         |                            |
| captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg                | 2         |                            |
| CARDENE IV INTRAVENOUS SOLUTION 20-0.86 MG/200ML-%, 40-0.83 MG/200ML-%                          | GM        |                            |
| CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG        | 4         | Brand penalty applies      |
| CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG | 4         | Brand penalty applies      |
| CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG                                                       | 4         | Brand penalty applies      |
| CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG                                                      | 4         | Brand penalty applies      |
| cartia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg                  | 2         |                            |

| Drug Name                                                                                | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------|-----------|-----------------------|
| carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg                                 | 1         |                       |
| carvedilol phosphate er oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 80 mg | 2         |                       |
| CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR                                      | 4         | Brand penalty applies |
| CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24HR                                      | 4         | Brand penalty applies |
| CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24HR                                      | 4         | Brand penalty applies |
| chlorothiazide sodium intravenous solution reconstituted 500 mg                          | GM        |                       |
| chlorthalidone oral tablet 25 mg, 50 mg                                                  | 2         |                       |
| cholestyramine light oral packet 4 gm                                                    | 2         |                       |
| cholestyramine light oral powder 4 gm/dose                                               | 2         |                       |
| cholestyramine oral packet 4 gm                                                          | 2         |                       |
| cholestyramine oral powder 4 gm/dose                                                     | 2         |                       |
| CLEVIPREX INTRAVENOUS EMULSION 25 MG/50ML, 50 MG/100ML                                   | GM        |                       |
| CLONIDINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.17 MG                                | 4         |                       |
| clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg                                         | 2         |                       |
| clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr                 | 2         |                       |

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| Drug Name                                                                 | Drug Tier | Notes                     |
|---------------------------------------------------------------------------|-----------|---------------------------|
| colesevelam hcl oral packet 3.75 gm                                       | 2         |                           |
| colesevelam hcl oral tablet 625 mg                                        | 2         |                           |
| COLESTID FLAVORED ORAL GRANULES 5 GM                                      | 4         | Brand penalty applies     |
| COLESTID FLAVORED ORAL PACKET 5 GM                                        | 4         | Brand penalty applies     |
| COLESTID ORAL GRANULES 5 GM                                               | 4         | Brand penalty applies     |
| COLESTID ORAL TABLET 1 GM                                                 | 4         | Brand penalty applies     |
| colestipol hcl oral granules 5 gm                                         | 2         |                           |
| colestipol hcl oral packet 5 gm                                           | 2         |                           |
| colestipol hcl oral tablet 1 gm                                           | 2         |                           |
| COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG, 80 MG | 4         | Brand penalty applies     |
| COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG                       | 4         | Brand penalty applies     |
| CORLANOR ORAL SOLUTION 5 MG/5ML                                           | 4         | PA                        |
| CORLANOR ORAL TABLET 5 MG, 7.5 MG                                         | 4         | PA; Brand penalty applies |
| CORVERT INTRAVENOUS SOLUTION 1 MG/10ML                                    | GM        |                           |
| COZAAR ORAL TABLET 100 MG, 25 MG, 50 MG                                   | 4         | Brand penalty applies     |

| Drug Name                                                                                                   | Drug Tier | Notes                                             |
|-------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------|
| CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG                                                               | 4         | Brand penalty applies                             |
| DEMSEER ORAL CAPSULE 250 MG                                                                                 | 4         | Brand penalty applies                             |
| DIBENZYLINE ORAL CAPSULE 10 MG                                                                              | 4         | PA; Brand penalty applies; QL (14 EA per 30 days) |
| digoxin injection solution 0.25 mg/ml                                                                       | GM        |                                                   |
| digoxin oral solution 0.05 mg/ml                                                                            | 2         |                                                   |
| digoxin oral tablet 125 mcg, 250 mcg, 62.5 mcg                                                              | 2         |                                                   |
| diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg | 2         |                                                   |
| diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg  | 2         |                                                   |
| diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg                                 | 2         |                                                   |
| diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg                               | 2         |                                                   |
| diltiazem hcl er oral tablet extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg        | 2         |                                                   |
| diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml                                       | GM        |                                                   |

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| Drug Name                                                                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| diltiazem hcl intravenous solution reconstituted 100 mg                                                        | GM        |                       |
| diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg                                                          | 2         |                       |
| DILTIAZEM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.72 MG/100ML-%, 125-0.7 MG/125ML-%, 125-0.9 MG/125ML-% | GM        |                       |
| dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg                                           | 2         |                       |
| DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG                              | 4         | Brand penalty applies |
| DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG                                                                | 4         | Brand penalty applies |
| disopyramide phosphate oral capsule 100 mg, 150 mg                                                             | 2         |                       |
| DIURIL ORAL SUSPENSION 250 MG/5ML                                                                              | 4         |                       |
| dobutamine hcl intravenous solution 12.5 mg/ml, 250 mg/20ml                                                    | GM        |                       |
| dobutamine-dextrose intravenous solution 1-5 mg/ml-%, 2-5 mg/ml-%, 4-5 mg/ml-%                                 | GM        |                       |
| dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg                                                              | 2         |                       |
| dopamine hcl intravenous solution 40 mg/ml                                                                     | GM        |                       |

| Drug Name                                                                          | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------|-----------|-----------------------|
| dopamine-dextrose intravenous solution 0.8-5 mg/ml-%, 1.6-5 mg/ml-%, 3.2-5 mg/ml-% | GM        |                       |
| doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg                              | 2         |                       |
| droxidopa oral capsule 100 mg, 200 mg, 300 mg                                      | 6         | PA                    |
| DYRENIUM ORAL CAPSULE 100 MG, 50 MG                                                | 4         | Brand penalty applies |
| EDARBI ORAL TABLET 40 MG, 80 MG                                                    | 4         | ST                    |
| EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG                                        | 4         | ST                    |
| EDECIN ORAL TABLET 25 MG                                                           | 4         | Brand penalty applies |
| EMERPHED INTRAVENOUS SOLUTION 5 MG/ML                                              | GM        |                       |
| EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE 25 MG/5ML, 50 MG/10ML              | GM        |                       |
| enalapril maleate oral solution 1 mg/ml                                            | 2         |                       |
| enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg                           | 2         |                       |
| enalaprilat intravenous solution 1.25 mg/ml                                        | GM        |                       |
| enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg                      | 2         |                       |
| ENTRESTO ORAL CAPSULE SPRINKLE 15-16 MG, 6-6 MG                                    | 3         |                       |

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| Drug Name                                                                                                         | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ENTRESTO ORAL<br>TABLET 24-26 MG, 49-<br>51 MG, 97-103 MG                                                         | 3         | Brand<br>penalty<br>applies |
| EPANED ORAL<br>SOLUTION 1 MG/ML                                                                                   | 4         | Brand<br>penalty<br>applies |
| EPHEDRINE SULFATE<br>(PRESSORS)<br>INJECTION SOLUTION<br>PREFILLED SYRINGE<br>25 MG/5ML, 50<br>MG/10ML, 50 MG/5ML | GM        |                             |
| ephedrine sulfate<br>(pressors) intravenous<br>solution 5 mg/ml, 50<br>mg/ml                                      | GM        |                             |
| ephedrine sulfate<br>(pressors) intravenous<br>solution prefilled syringe<br>50 mg/10ml                           | GM        |                             |
| EPHEDRINE SULFATE<br>(PRESSORS)<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 50 MG/5ML                         | GM        |                             |
| ephedrine sulfate<br>(pressors) solution<br>prefilled syringe 25<br>mg/5ml intravenous                            | GM        |                             |
| EPHEDRINE SULFATE<br>(PRESSORS)<br>SOLUTION PREFILLED<br>SYRINGE 25 MG/5ML<br>INTRAVENOUS                         | GM        |                             |
| EPINEPHRINE<br>BITARTRATE-NACL<br>INTRAVENOUS<br>SOLUTION 16-0.9<br>MG/250ML-%                                    | GM        |                             |

| Drug Name                                                                                            | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------------|-----------|-------|
| EPINEPHRINE<br>BITARTRATE-NACL<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 100-0.9<br>MCG/10ML-% | GM        |       |
| EPINEPHRINE HCL-<br>DEXTROSE<br>INTRAVENOUS<br>SOLUTION 4-5<br>MG/250ML-%                            | GM        |       |
| EPINEPHRINE HCL-<br>NACL INTRAVENOUS<br>SOLUTION 4-0.9<br>MG/250ML-%, 8-0.9<br>MG/250ML-%            | GM        |       |
| epinephrine injection<br>solution 10 mg/10ml                                                         | GM        |       |
| EPINEPHRINE<br>INJECTION SOLUTION<br>PREFILLED SYRINGE<br>0.2 MG/0.2ML, 1 MG/ML                      | GM        |       |
| EPINEPHRINE<br>INTRAVENOUS<br>SOLUTION 1 MG/10ML                                                     | GM        |       |
| EPINEPHRINE<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 0.1 MG/10ML                              | GM        |       |
| epinephrine intravenous<br>solution prefilled syringe<br>1 mg/10ml                                   | GM        |       |
| epinephrine pf injection<br>solution 1 mg/ml                                                         | GM        |       |
| epinephrine solution 1<br>mg/ml injection                                                            | GM        |       |
| EPINEPHRINE<br>SOLUTION 1 MG/ML<br>INJECTION                                                         | GM        |       |
| EPINEPHRINE-<br>DEXTROSE<br>INTRAVENOUS<br>SOLUTION 2-5<br>MG/250ML-%                                | GM        |       |

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| Drug Name                                                                                      | Drug Tier | Notes                 | Drug Name                                                                | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------|-----------|-----------------------|--------------------------------------------------------------------------|-----------|-----------------------|
| EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION PREFILLED SYRINGE 100-5 MCG/10ML-%                   | GM        |                       | EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG             | 4         | Brand penalty applies |
| EPINEPHRINE-NACL INTRAVENOUS SOLUTION 2-0.9 MG/250ML-%, 4-0.9 MG/250ML-%, 8-0.9 MG/250ML-%     | GM        |                       | EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG         | 4         | PA                    |
| EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-%                        | GM        |                       | ezetimibe oral tablet 10 mg                                              | 2         |                       |
| eplerenone oral tablet 25 mg, 50 mg                                                            | 2         |                       | ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg | 2         |                       |
| esmolol hcl intravenous solution 100 mg/10ml                                                   | GM        |                       | felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg   | 2         |                       |
| ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML                                  | GM        |                       | fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg | 2         |                       |
| esmolol hcl-sodium chloride intravenous solution 2000 mg/100ml, 2500 mg/250ml                  | GM        |                       | fenofibrate oral capsule 134 mg, 150 mg, 200 mg, 50 mg, 67 mg            | 2         |                       |
| ethacrynate sodium intravenous solution reconstituted 50 mg                                    | GM        |                       | fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg                     | 2         |                       |
| ethacrynic acid oral tablet 25 mg                                                              | 2         |                       | fenofibric acid oral capsule delayed release 135 mg, 45 mg               | 2         |                       |
| EVKEEZA INTRAVENOUS SOLUTION 1200 MG/8ML, 345 MG/2.3ML                                         | 6         | PA; Specialty Medical | fenofibric acid oral tablet 105 mg, 35 mg                                | 2         |                       |
| EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG | 4         | Brand penalty applies | FIBRICOR ORAL TABLET 105 MG, 35 MG                                       | 4         |                       |
|                                                                                                |           |                       | flecainide acetate oral tablet 100 mg, 150 mg, 50 mg                     | 2         |                       |
|                                                                                                |           |                       | fluvastatin sodium er oral tablet extended release 24 hour 80 mg         | 2         | PA                    |
|                                                                                                |           |                       | fluvastatin sodium oral capsule 20 mg, 40 mg                             | 2         |                       |

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| Drug Name                                                             | Drug Tier | Notes                 |
|-----------------------------------------------------------------------|-----------|-----------------------|
| fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg                     | 2         |                       |
| fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg             | 2         |                       |
| FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.9 MG/100ML-% | GM        |                       |
| furosemide oral solution 10 mg/ml, 8 mg/ml                            | 2         |                       |
| furosemide oral tablet 20 mg, 40 mg, 80 mg                            | 1         |                       |
| furosemide solution 10 mg/ml injection                                | GM        |                       |
| FUROSEMIDE SOLUTION 10 MG/ML INJECTION                                | GM        |                       |
| gemfibrozil oral tablet 600 mg                                        | 2         |                       |
| GIAPREZA INTRAVENOUS SOLUTION 0.5 MG/ML                               | GM        |                       |
| guanfacine hcl oral tablet 1 mg, 2 mg                                 | 1         |                       |
| hydralazine hcl injection solution 20 mg/ml                           | GM        |                       |
| hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg               | 2         |                       |
| hydrochlorothiazide oral capsule 12.5 mg                              | 1         |                       |
| hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg                 | 1         |                       |
| HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG                 | 4         | Brand penalty applies |

| Drug Name                                                                     | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------|-----------|-----------------------|
| ibutilide fumarate intravenous solution 1 mg/10ml                             | GM        |                       |
| icosapent ethyl oral capsule 0.5 gm, 1 gm                                     | 2         |                       |
| IMMPHENTIV INTRAVENOUS SOLUTION 0.5 MG/5ML, 1 MG/10ML                         | GM        |                       |
| indapamide oral tablet 1.25 mg, 2.5 mg                                        | 2         |                       |
| INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 160 MG, 60 MG, 80 MG | 4         | Brand penalty applies |
| INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG                | 4         |                       |
| INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG               | 4         |                       |
| INSPIRA ORAL TABLET 25 MG, 50 MG                                              | 4         | Brand penalty applies |
| irbesartan oral tablet 150 mg, 300 mg, 75 mg                                  | 2         |                       |
| irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg           | 2         |                       |
| ISORDIL TITRADOSE ORAL TABLET 40 MG, 5 MG                                     | 4         | Brand penalty applies |
| isosorb dinitrate-hydralazine oral tablet 20-37.5 mg                          | 2         |                       |
| isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 40 mg, 5 mg             | 2         |                       |

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| Drug Name                                                                                                        | Drug Tier | Notes                      |
|------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg                              | 2         |                            |
| isosorbide mononitrate oral tablet 10 mg, 20 mg                                                                  | 2         |                            |
| isradipine oral capsule 2.5 mg, 5 mg                                                                             | 2         |                            |
| ivabradine hcl oral tablet 5 mg, 7.5 mg                                                                          | 2         | PA                         |
| JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG                                                                  | 6         | PA; QL (30 EA per 30 days) |
| LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10 MG/2ML, 20 MG/4ML                                        | GM        |                            |
| labetalol hcl oral tablet 100 mg, 200 mg, 300 mg, 400 mg                                                         | 2         |                            |
| labetalol hcl solution 5 mg/ml intravenous                                                                       | GM        |                            |
| LABETALOL HCL SOLUTION 5 MG/ML INTRAVENOUS                                                                       | GM        |                            |
| LABETALOL HCL-DEXTROSE INTRAVENOUS SOLUTION 200-5 MG/200ML-%                                                     | GM        |                            |
| LABETALOL HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.72 MG/100ML-%, 200-0.72 MG/200ML-%, 300-0.72 MG/300ML-% | GM        |                            |
| LANOXIN INJECTION SOLUTION 0.25 MG/ML                                                                            | GM        |                            |
| LANOXIN ORAL TABLET 125 MCG, 250 MCG                                                                             | 3         |                            |

| Drug Name                                                                   | Drug Tier | Notes                     |
|-----------------------------------------------------------------------------|-----------|---------------------------|
| LANOXIN ORAL TABLET 62.5 MCG                                                | 4         |                           |
| LANOXIN PEDIATRIC INJECTION SOLUTION 0.1 MG/ML                              | GM        |                           |
| LASIX ORAL TABLET 20 MG, 40 MG, 80 MG                                       | 4         | Brand penalty applies     |
| LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML                 | 6         | PA; Specialty Medical     |
| LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 80 MG                        | 4         | PA; Brand penalty applies |
| LEVOPHED INTRAVENOUS SOLUTION 1 MG/ML                                       | GM        |                           |
| LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG                              | 4         | Brand penalty applies     |
| LIPOFEN ORAL CAPSULE 150 MG, 50 MG                                          | 4         | Brand penalty applies     |
| lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg             | 1         |                           |
| lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg | 1         |                           |
| LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG                                         | 4         | PA; Brand penalty applies |
| LOPID ORAL TABLET 600 MG                                                    | 4         | Brand penalty applies     |
| LOPRESSOR ORAL TABLET 100 MG, 50 MG                                         | 4         | Brand penalty applies     |

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| Drug Name                                                                                 | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------------|-----------|-----------------------|
| losartan potassium oral tablet 100 mg, 25 mg, 50 mg                                       | 1         |                       |
| losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg                    | 1         |                       |
| LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG                                 | 4         | Brand penalty applies |
| LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG                                                  | 4         | Brand penalty applies |
| LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG                                  | 4         | Brand penalty applies |
| lovastatin oral tablet 10 mg, 20 mg, 40 mg                                                | 2         | PV*                   |
| LOVAZA ORAL CAPSULE 1 GM                                                                  | 4         | Brand penalty applies |
| mannitol intravenous solution 20 %, 25 %                                                  | GM        |                       |
| matzim la oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg     | 2         |                       |
| MAXZIDE ORAL TABLET 75-50 MG                                                              | 4         | Brand penalty applies |
| MAXZIDE-25 ORAL TABLET 37.5-25 MG                                                         | 4         | Brand penalty applies |
| methyldopa oral tablet 250 mg, 500 mg                                                     | 2         |                       |
| metolazone oral tablet 10 mg, 2.5 mg, 5 mg                                                | 2         |                       |
| metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg | 2         |                       |

| Drug Name                                                                           | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------|-----------|-----------------------|
| metoprolol tartrate intravenous solution 5 mg/5ml                                   | GM        |                       |
| metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg                                | 1         |                       |
| metoprolol tartrate oral tablet 37.5 mg, 75 mg                                      | 2         |                       |
| metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg           | 2         |                       |
| metyrosine oral capsule 250 mg                                                      | 2         |                       |
| mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg                                  | 2         |                       |
| MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG                           | 4         | Brand penalty applies |
| MICARDIS ORAL TABLET 20 MG, 40 MG, 80 MG                                            | 4         | Brand penalty applies |
| midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg                                       | 2         |                       |
| milrinone lactate in dextrose intravenous solution 20-5 mg/100ml-%, 40-5 mg/200ml-% | GM        |                       |
| milrinone lactate intravenous solution 10 mg/10ml, 20 mg/20ml, 50 mg/50ml           | GM        |                       |
| MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG                                             | 4         | Brand penalty applies |
| minoxidil oral tablet 10 mg, 2.5 mg                                                 | 2         |                       |
| moexipril hcl oral tablet 15 mg, 7.5 mg                                             | 2         |                       |
| MULTAQ ORAL TABLET 400 MG                                                           | 3         |                       |

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| Drug Name                                                                                                                 | Drug Tier | Notes |
|---------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| nadolol oral tablet 20 mg, 40 mg, 80 mg                                                                                   | 2         |       |
| nebivolol hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg                                                                      | 2         |       |
| NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.17 MG                                                                  | 4         |       |
| NEXLETOL ORAL TABLET 180 MG                                                                                               | 3         | PA    |
| NEXLIZET ORAL TABLET 180-10 MG                                                                                            | 3         | PA    |
| NEXTERONE INTRAVENOUS SOLUTION 150-4.21 MG/100ML-%, 360-4.14 MG/200ML-%                                                   | GM        |       |
| niacin (antihyperlipidemic) oral tablet 500 mg                                                                            | 2         |       |
| niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg                                       | 2         |       |
| niacor oral tablet 500 mg                                                                                                 | 2         |       |
| nicardipine hcl in nacl intravenous solution 20-0.86 mg/200ml-%, 20-0.9 mg/200ml-%, 40-0.83 mg/200ml-%, 40-0.9 mg/200ml-% | GM        |       |
| nicardipine hcl intravenous solution 2.5 mg/ml                                                                            | GM        |       |
| nicardipine hcl oral capsule 20 mg, 30 mg                                                                                 | 2         |       |
| nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg                                                    | 2         |       |

| Drug Name                                                                                              | Drug Tier | Notes |
|--------------------------------------------------------------------------------------------------------|-----------|-------|
| nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg                 | 2         |       |
| nifedipine oral capsule 10 mg, 20 mg                                                                   | 2         |       |
| nimodipine oral capsule 30 mg                                                                          | 2         |       |
| NIMODIPINE ORAL SOLUTION 60 MG/20ML                                                                    | 4         |       |
| NIPRIDE RTU INTRAVENOUS SOLUTION 20-0.9 MG/100ML-%, 50-0.9 MG/100ML-%                                  | GM        |       |
| nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg | 2         |       |
| NITRO-BID TRANSDERMAL OINTMENT 2 %                                                                     | 3         |       |
| NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR   | 4         |       |
| nitroglycerin in d5w intravenous solution 100-5 mcg/ml-%, 200-5 mcg/ml-%, 400-5 mcg/ml-%               | GM        |       |
| nitroglycerin intravenous solution 5 mg/ml                                                             | GM        |       |
| nitroglycerin rectal ointment 0.4 %                                                                    | 2         |       |
| nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg                                      | 2         |       |

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| Drug Name                                                                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr                           | 2         |                       |
| nitroglycerin translingual solution 0.4 mg/spray                                                             | 2         |                       |
| NITROLINGUAL TRANSLINGUAL SOLUTION 0.4 MG/SPRAY                                                              | 4         | Brand penalty applies |
| nitroprusside sodium intravenous solution 25 mg/ml                                                           | GM        |                       |
| nitroprusside sodium-nacl intravenous solution 20-0.9 mg/100ml-%, 50-0.9 mg/100ml-%                          | GM        |                       |
| NITROSTAT SUBLINGUAL TABLET SUBLINGUAL 0.3 MG, 0.4 MG, 0.6 MG                                                | 4         | Brand penalty applies |
| NITRO-TIME ORAL CAPSULE EXTENDED RELEASE 2.5 MG, 6.5 MG, 9 MG                                                | 4         |                       |
| NOREPINEPHRINE BITARTRATE INTRAVENOUS SOLUTION 2 MG/ML                                                       | GM        |                       |
| norepinephrine bitartrate solution 1 mg/ml intravenous                                                       | GM        |                       |
| NOREPINEPHRINE BITARTRATE SOLUTION 1 MG/ML INTRAVENOUS                                                       | GM        |                       |
| NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 16-5 MG/250ML-%, 4-5 MG/250ML-%, 8-5 MG/250ML-%, 8-5 MG/500ML-% | GM        |                       |

| Drug Name                                                                                                  | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 16-0.9 MG/250ML-%, 32-0.9 MG/250ML-%, 8-0.9 MG/500ML-% | GM        |                       |
| NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG                                            | 3         |                       |
| NORPACE ORAL CAPSULE 100 MG, 150 MG                                                                        | 4         | Brand penalty applies |
| NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG                                                               | 6         | PA                    |
| NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG                                                                    | 4         | Brand penalty applies |
| olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg                                                        | 2         |                       |
| olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg                                     | 2         |                       |
| olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg  | 2         |                       |
| omega-3-acid ethyl esters oral capsule 1 gm                                                                | 2         |                       |
| OSMITROL INTRAVENOUS SOLUTION 10 %, 20 %                                                                   | GM        |                       |
| PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG                                                                | 4         | Brand penalty applies |
| papaverine hcl injection solution 30 mg/ml                                                                 | GM        |                       |

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| Drug Name                                                                                                         | Drug Tier | Notes                      |
|-------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| pentoxifylline er oral tablet extended release 400 mg                                                             | 2         |                            |
| perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg                                                                 | 2         |                            |
| phenoxybenzamine hcl oral capsule 10 mg                                                                           | 2         | PA; QL (14 EA per 30 days) |
| phentolamine mesylate injection solution reconstituted 5 mg                                                       | GM        |                            |
| phenylephrine hcl (pf) intravenous solution 0.5 mg/5ml                                                            | GM        |                            |
| PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION 0.4 MG/10ML, 0.8 MG/10ML                                        | GM        |                            |
| phenylephrine hcl (pressors) intravenous solution 10 mg/ml                                                        | GM        |                            |
| PHENYLEPHRINE HCL (PRESSORS) INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.4 MG/10ML, 0.5 MG/5ML, 1 MG/10ML, 5 MG/50ML | GM        |                            |
| PHENYLEPHRINE HCL INTRAVENOUS SOLUTION 1 MG/10ML                                                                  | GM        |                            |
| PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.8 MG/10ML, 1 MG/10ML                                   | GM        |                            |

| Drug Name                                                                                                                                                                                            | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION 10-0.9 MG/250ML-%, 100-0.9 MG/250ML-%, 20-0.9 MG/250ML-%, 200-0.9 MG/250ML-%, 25-0.9 MG/250ML-%, 40-0.9 MG/250ML-%, 50-0.9 MG/250ML-%, 80-0.9 MG/250ML-% | GM        |       |
| PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.5-0.9 MG/5ML-%                                                                                                                       | GM        |       |
| pindolol oral tablet 10 mg, 5 mg                                                                                                                                                                     | 2         |       |
| pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg                                                                                                                                                    | 2         | PA    |
| POLIDOCANOL INTRAVENOUS SOLUTION 5 %                                                                                                                                                                 | GM        |       |
| PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML                                                                                                                                     | 3         |       |
| pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg                                                                                                                                            | 2         | PV*   |
| prazosin hcl oral capsule 1 mg, 2 mg, 5 mg                                                                                                                                                           | 2         |       |
| PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG                                                                                                                                                   | 4         |       |
| prevalite oral packet 4 gm                                                                                                                                                                           | 2         |       |
| prevalite oral powder 4 gm/dose                                                                                                                                                                      | 2         |       |
| procainamide hcl injection solution 100 mg/ml, 500 mg/ml                                                                                                                                             | GM        |       |

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| Drug Name                                                                             | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------|-----------|-----------------------|
| PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 60 MG, 90 MG                 | 4         | Brand penalty applies |
| propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg       | 2         |                       |
| propafenone hcl oral tablet 150 mg, 225 mg, 300 mg                                    | 2         |                       |
| propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg | 2         |                       |
| propranolol hcl intravenous solution 1 mg/ml                                          | GM        |                       |
| propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml                                    | 2         |                       |
| propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg                         | 2         |                       |
| PROSTIN VR INJECTION SOLUTION 500 MCG/ML                                              | GM        |                       |
| QBRELIS ORAL SOLUTION 1 MG/ML                                                         | 4         |                       |
| QUESTRAN LIGHT ORAL POWDER 4 GM/DOSE                                                  | 4         | Brand penalty applies |
| QUESTRAN ORAL PACKET 4 GM                                                             | 4         | Brand penalty applies |
| QUESTRAN ORAL POWDER 4 GM/DOSE                                                        | 4         | Brand penalty applies |
| quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg                                   | 2         |                       |

| Drug Name                                                                  | Drug Tier | Notes                 |
|----------------------------------------------------------------------------|-----------|-----------------------|
| quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg | 2         |                       |
| quinidine gluconate er oral tablet extended release 324 mg                 | 2         |                       |
| quinidine sulfate oral tablet 200 mg, 300 mg                               | 2         |                       |
| ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg                         | 2         |                       |
| ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg         | 2         |                       |
| RECTIV RECTAL OINTMENT 0.4 %                                               | 4         | Brand penalty applies |
| REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML     | 3         |                       |
| REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML                  | 3         |                       |
| REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML            | 3         |                       |
| REZIPRES INTRAVENOUS SOLUTION 47 MG/10ML                                   | GM        |                       |
| rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg                 | 2         |                       |
| RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG    | 4         | Brand penalty applies |
| sacubitril-valsartan oral tablet 24-26 mg, 49-51 mg, 97-103 mg             | 2         |                       |

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| Drug Name                                                                              | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------|-----------|-----------------------|
| simvastatin oral tablet 10 mg, 20 mg, 40 mg                                            | 1         | PV*                   |
| simvastatin oral tablet 5 mg, 80 mg                                                    | 1         |                       |
| SODIUM EDECRIN INTRAVENOUS SOLUTION RECONSTITUTED 50 MG                                | GM        |                       |
| sodium nitroprusside intravenous solution 25 mg/ml, 50 mg/2ml                          | GM        |                       |
| sodium tetradecyl sulfate intravenous solution 3 %                                     | GM        |                       |
| sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg                                     | 2         |                       |
| SOTALOL HCL INTRAVENOUS SOLUTION 150 MG/10ML                                           | GM        |                       |
| sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg                                  | 2         |                       |
| SOTRADECOL INTRAVENOUS SOLUTION 1 %, 3 %                                               | GM        |                       |
| SOTYLIZE ORAL SOLUTION 5 MG/ML                                                         | 4         |                       |
| spironolactone oral tablet 100 mg, 25 mg, 50 mg                                        | 2         | GD*                   |
| spironolactone-hctz oral tablet 25-25 mg                                               | 2         |                       |
| SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG                        | 4         | Brand penalty applies |
| taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg | 2         |                       |
| TEKTURNA ORAL TABLET 150 MG, 300 MG                                                    | 3         | Brand penalty applies |

| Drug Name                                                                                       | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------------------|-----------|-----------------------|
| telmisartan oral tablet 20 mg, 40 mg, 80 mg                                                     | 2         |                       |
| telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg                         | 2         |                       |
| telmisartan-hctz oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg                                   | 2         |                       |
| TENORETIC 100 ORAL TABLET 100-25 MG                                                             | 4         | Brand penalty applies |
| TENORETIC 50 ORAL TABLET 50-25 MG                                                               | 4         | Brand penalty applies |
| TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG                                                       | 4         | Brand penalty applies |
| THALITONE ORAL TABLET 15 MG                                                                     | 3         |                       |
| tiadylt er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg | 2         |                       |
| TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG     | 4         | Brand penalty applies |
| TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG                                                  | 4         | Brand penalty applies |
| timolol maleate oral tablet 10 mg, 20 mg, 5 mg                                                  | 2         |                       |
| TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG                     | 4         | Brand penalty applies |

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| Drug Name                                                                                            | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg                                                    | 2         |                       |
| trandolapril oral tablet 1 mg, 2 mg, 4 mg                                                            | 2         |                       |
| trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg    | 2         |                       |
| triamterene oral capsule 100 mg, 50 mg                                                               | 2         |                       |
| triamterene-hctz oral capsule 37.5-25 mg                                                             | 2         |                       |
| triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg                                                    | 2         |                       |
| TRIBENZOR ORAL TABLET 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG             | 3         | Brand penalty applies |
| TRICOR ORAL TABLET 145 MG, 48 MG                                                                     | 4         | Brand penalty applies |
| TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG                                                  | 4         | Brand penalty applies |
| valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg                                                   | 2         |                       |
| valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg | 2         |                       |
| VARITHENA INTRAVENOUS FOAM 180 MG/18ML                                                               | GM        |                       |
| VASCEPA ORAL CAPSULE 0.5 GM, 1 GM                                                                    | 4         | Brand penalty applies |

| Drug Name                                                                                                     | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| VASERETIC ORAL TABLET 10-25 MG                                                                                | 4         | Brand penalty applies |
| VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG                                                                | 4         | Brand penalty applies |
| VAZCULEP INTRAVENOUS SOLUTION 10 MG/ML                                                                        | GM        |                       |
| VECAMYL ORAL TABLET 2.5 MG                                                                                    | 4         |                       |
| verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg | 2         |                       |
| verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg                                          | 2         |                       |
| verapamil hcl intravenous solution 2.5 mg/ml                                                                  | GM        |                       |
| verapamil hcl oral tablet 120 mg, 40 mg, 80 mg                                                                | 2         |                       |
| VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG                                  | 4         | Brand penalty applies |
| VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG                                       | 4         | Brand penalty applies |
| VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG                                                                       | 4         | PA                    |
| VYNDAMAX ORAL CAPSULE 61 MG                                                                                   | 6         | PA                    |
| VYNDAQEL ORAL CAPSULE 20 MG                                                                                   | 6         | PA                    |

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| Drug Name                                                                                 | Drug Tier | Notes                                         |
|-------------------------------------------------------------------------------------------|-----------|-----------------------------------------------|
| VYTORIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG                                | 4         | Brand penalty applies                         |
| WELCHOL ORAL PACKET 3.75 GM                                                               | 4         | Brand penalty applies                         |
| WELCHOL ORAL TABLET 625 MG                                                                | 4         | Brand penalty applies                         |
| ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG                                   | 4         | Brand penalty applies                         |
| ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG                              | 4         | Brand penalty applies                         |
| ZETIA ORAL TABLET 10 MG                                                                   | 4         | Brand penalty applies                         |
| ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG                                                     | 4         | Brand penalty applies                         |
| ZYPITAMAG ORAL TABLET 2 MG, 4 MG                                                          | 4         | PA                                            |
| <b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>               |           |                                               |
| ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG                    | 4         | Brand penalty applies; QL (90 EA per 30 days) |
| ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG | 4         | Brand penalty applies; QL (60 EA per 30 days) |
| amphetamine sulfate oral tablet 10 mg, 5 mg                                               | 2         |                                               |

| Drug Name                                                                                                      | Drug Tier | Notes                                         |
|----------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------|
| amphetamine-dextroamphetamine er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg | 2         | QL (60 EA per 30 days)                        |
| amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg                    | 2         | QL (90 EA per 30 days)                        |
| APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG              | 4         | Brand penalty applies                         |
| atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg                                                        | 2         | QL (60 EA per 30 days)                        |
| atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg                                                              | 2         | QL (30 EA per 30 days)                        |
| AZSTARYS ORAL CAPSULE 26.1-5.2 MG, 39.2-7.8 MG, 52.3-10.4 MG                                                   | 4         | QL (30 EA per 30 days)                        |
| clonidine hcl er oral tablet extended release 12 hour 0.1 mg                                                   | 2         |                                               |
| CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG                                                      | 4         | Brand penalty applies; QL (30 EA per 30 days) |
| CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG                                                                    | 4         | Brand penalty applies; QL (60 EA per 30 days) |

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| Drug Name                                                                                                                         | Drug Tier | Notes                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------------------|
| DAYTRANA<br>TRANSDERMAL PATCH<br>10 MG/9HR, 15<br>MG/9HR, 20 MG/9HR,<br>30 MG/9HR                                                 | 4         | Brand<br>penalty<br>applies; QL<br>(30 EA per<br>30 days)     |
| DESOXYN ORAL<br>TABLET 5 MG                                                                                                       | 4         | Brand<br>penalty<br>applies                                   |
| DEXEDRINE ORAL<br>CAPSULE EXTENDED<br>RELEASE 24 HOUR 10<br>MG, 15 MG                                                             | 4         | Brand<br>penalty<br>applies; QL<br>(150 EA<br>per 30<br>days) |
| dexmethylphenidate hcl<br>er oral capsule extended<br>release 24 hour 10 mg,<br>15 mg, 20 mg, 25 mg, 30<br>mg, 35 mg, 40 mg, 5 mg | 2         | QL (30 EA<br>per 30<br>days)                                  |
| dexmethylphenidate hcl<br>oral tablet 10 mg, 2.5 mg,<br>5 mg                                                                      | 2         | QL (90 EA<br>per 30<br>days)                                  |
| dextroamphetamine<br>sulfate er oral capsule<br>extended release 24 hour<br>10 mg, 15 mg, 5 mg                                    | 2         | QL (150<br>EA per 30<br>days)                                 |
| dextroamphetamine<br>sulfate oral solution 5<br>mg/5ml                                                                            | 2         |                                                               |
| dextroamphetamine<br>sulfate oral tablet 10 mg,<br>15 mg, 2.5 mg, 20 mg,<br>30 mg, 5 mg, 7.5 mg                                   | 2         | QL (90 EA<br>per 30<br>days)                                  |
| DYANAVEL XR ORAL<br>SUSPENSION<br>EXTENDED RELEASE<br>2.5 MG/ML                                                                   | 4         | PA; AL<br>(Min 6<br>Years and<br>Max 12<br>Years)             |
| DYANAVEL XR ORAL<br>TABLET EXTENDED<br>RELEASE 10 MG, 15<br>MG, 20 MG, 5 MG                                                       | 4         | PA                                                            |

| Drug Name                                                                                                             | Drug Tier | Notes                                                                       |
|-----------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------|
| FOCALIN ORAL<br>TABLET 10 MG, 2.5 MG,<br>5 MG                                                                         | 4         | Brand<br>penalty<br>applies; QL<br>(90 EA per<br>30 days)                   |
| FOCALIN XR ORAL<br>CAPSULE EXTENDED<br>RELEASE 24 HOUR 10<br>MG, 15 MG, 20 MG, 25<br>MG, 30 MG, 35 MG, 40<br>MG, 5 MG | 4         | Brand<br>penalty<br>applies; QL<br>(30 EA per<br>30 days)                   |
| guanfacine hcl er oral<br>tablet extended release<br>24 hour 1 mg, 2 mg, 3<br>mg, 4 mg                                | 2         |                                                                             |
| INTUNIV ORAL TABLET<br>EXTENDED RELEASE<br>24 HOUR 1 MG, 2 MG, 3<br>MG, 4 MG                                          | 4         | Brand<br>penalty<br>applies                                                 |
| KAPVAY ORAL TABLET<br>EXTENDED RELEASE<br>12 HOUR 0.1 MG                                                              | 4         | Brand<br>penalty<br>applies                                                 |
| lisdexamfetamine<br>dimesylate oral capsule<br>10 mg, 20 mg, 30 mg, 40<br>mg, 50 mg, 60 mg, 70<br>mg                  | 2         | QL (30 EA<br>per 30<br>days)                                                |
| lisdexamfetamine<br>dimesylate oral tablet<br>chewable 10 mg, 20 mg,<br>30 mg, 40 mg, 50 mg, 60<br>mg                 | 2         | QL (30 EA<br>per 30<br>days); AL<br>(Min 6<br>Years and<br>Max 12<br>Years) |
| METADATE CD ORAL<br>CAPSULE EXTENDED<br>RELEASE 10 MG, 20<br>MG, 30 MG, 40 MG, 50<br>MG, 60 MG                        | 4         | Brand<br>penalty<br>applies; QL<br>(30 EA per<br>30 days)                   |
| methamphetamine hcl<br>oral tablet 5 mg                                                                               | 2         |                                                                             |

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| Drug Name                                                                                                         | Drug Tier | Notes                                          |
|-------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------|
| METHYLIN ORAL SOLUTION 10 MG/5ML, 5 MG/5ML                                                                        | 4         | Brand penalty applies; QL (900 ML per 30 days) |
| methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg                | 2         | QL (30 EA per 30 days)                         |
| methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg, 60 mg               | 2         | QL (30 EA per 30 days)                         |
| methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg                                     | 2         | QL (30 EA per 30 days)                         |
| methylphenidate hcl er (osm) oral tablet extended release 36 mg                                                   | 2         | QL (60 EA per 30 days)                         |
| METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG                                            | 4         | QL (30 EA per 30 days)                         |
| methylphenidate hcl er (osm) oral tablet extended release 72 mg                                                   | 4         | QL (1 EA per 1 day)                            |
| methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg | 2         |                                                |
| methylphenidate hcl er oral tablet extended release 10 mg                                                         | 2         |                                                |
| methylphenidate hcl er oral tablet extended release 20 mg                                                         | 2         | QL (90 EA per 30 days)                         |

| Drug Name                                                                              | Drug Tier | Notes                      |
|----------------------------------------------------------------------------------------|-----------|----------------------------|
| methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg | 2         |                            |
| methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml                                  | 2         | QL (900 ML per 30 days)    |
| methylphenidate hcl oral tablet 10 mg                                                  | 2         | QL (180 EA per 30 days)    |
| methylphenidate hcl oral tablet 20 mg                                                  | 2         |                            |
| methylphenidate hcl oral tablet 5 mg                                                   | 2         | QL (90 EA per 30 days)     |
| methylphenidate hcl oral tablet chewable 10 mg                                         | 2         |                            |
| methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg                                  | 2         | QL (90 EA per 30 days)     |
| methylphenidate transdermal patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr           | 2         | QL (30 EA per 30 days)     |
| PROCENTRA ORAL SOLUTION 5 MG/5ML                                                       | 4         | Brand penalty applies      |
| QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG                   | 4         |                            |
| QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 40 MG                       | 4         | PA; QL (30 EA per 30 days) |
| QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG                              | 4         | PA; QL (60 EA per 30 days) |

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| Drug Name                                                                   | Drug Tier | Notes                                                          | Drug Name                                                             | Drug Tier | Notes                                                     |
|-----------------------------------------------------------------------------|-----------|----------------------------------------------------------------|-----------------------------------------------------------------------|-----------|-----------------------------------------------------------|
| QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER 25 MG/5ML                    | 4         | PA; QL (180 ML per 30 days); AL (Min 6 Years and Max 12 Years) | STRATTERA ORAL CAPSULE 100 MG, 60 MG, 80 MG                           | 4         | Brand penalty applies; QL (30 EA per 30 days)             |
| RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 45 MG, 54 MG, 63 MG     | 4         | QL (30 EA per 30 days)                                         | VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG  | 4         | QL (30 EA per 30 days)                                    |
| RELEXXII ORAL TABLET EXTENDED RELEASE 36 MG                                 | 4         | QL (60 EA per 30 days)                                         | VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG | 4         | QL (30 EA per 30 days); AL (Min 6 Years and Max 12 Years) |
| RELEXXII ORAL TABLET EXTENDED RELEASE 72 MG                                 | 4         | QL (1 EA per 1 day)                                            | ZENZEDI ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 30 MG, 5 MG, 7.5 MG  | 4         | Brand penalty applies; QL (90 EA per 30 days)             |
| RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG | 4         | Brand penalty applies; QL (30 EA per 30 days)                  | <b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>   |           |                                                           |
| RITALIN ORAL TABLET 10 MG                                                   | 4         | Brand penalty applies; QL (180 EA per 30 days)                 | AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML               | 5         |                                                           |
| RITALIN ORAL TABLET 20 MG                                                   | 4         | Brand penalty applies                                          | AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML     | 5         |                                                           |
| RITALIN ORAL TABLET 5 MG                                                    | 4         | Brand penalty applies; QL (90 EA per 30 days)                  | BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG                          | 5         |                                                           |
| STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG                           | 4         | Brand penalty applies; QL (60 EA per 30 days)                  | BETASERON SUBCUTANEOUS KIT 0.3 MG                                     | 5         |                                                           |
|                                                                             |           |                                                                | BRIUMVI INTRAVENOUS SOLUTION 150 MG/6ML                               | 6         | PA; Specialty Medical                                     |
|                                                                             |           |                                                                | dalfampridine er oral tablet extended release 12 hour 10 mg           | 6         | PA                                                        |

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| Drug Name                                                                             | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------|-----------|-----------------------|
| dimethyl fumarate oral capsule delayed release 120 mg, 240 mg                         | 5         |                       |
| dimethyl fumarate starter pack oral capsule delayed release therapy pack 120 & 240 mg | 5         |                       |
| EXTAVIA SUBCUTANEOUS KIT 0.3 MG                                                       | 6         |                       |
| fingolimod hcl oral capsule 0.5 mg                                                    | 5         |                       |
| GILENYA ORAL CAPSULE 0.25 MG                                                          | 6         |                       |
| glatiramer acetate solution prefilled syringe 20 mg/ml subcutaneous                   | 4         |                       |
| glatiramer acetate solution prefilled syringe 20 mg/ml subcutaneous                   | 5         |                       |
| glatiramer acetate solution prefilled syringe 40 mg/ml subcutaneous                   | 4         |                       |
| glatiramer acetate solution prefilled syringe 40 mg/ml subcutaneous                   | 5         |                       |
| glatopa subcutaneous solution prefilled syringe 20 mg/ml, 40 mg/ml                    | 4         |                       |
| KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML                              | 5         |                       |
| LEMTRADA INTRAVENOUS SOLUTION 12 MG/1.2ML                                             | 6         | PA; Specialty Medical |
| MAVENCLAD ORAL TABLET THERAPY PACK 10 MG                                              | 6         | PA                    |
| MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG                                               | 6         |                       |

| Drug Name                                                                       | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------|-----------|-----------------------|
| MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG, 7 X 0.25 MG         | 6         |                       |
| OCREVUS INTRAVENOUS SOLUTION 300 MG/10ML                                        | 6         | PA; Specialty Medical |
| OCREVUS ZUNOVO SUBCUTANEOUS SOLUTION 920-23000 MG-UT/23ML                       | 6         | PA; Specialty Medical |
| PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML                 | 6         |                       |
| PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 63 & 94 MCG/0.5ML     | 6         |                       |
| PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 63 & 94 MCG/0.5ML | 6         |                       |
| PLEGRIDY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MCG/0.5ML                      | 6         |                       |
| PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML                  | 6         |                       |
| PONVORY ORAL TABLET 20 MG                                                       | 6         |                       |
| PONVORY STARTER PACK ORAL TABLET THERAPY PACK 2-3-4-5-6-7-8-9 & 10 MG           | 6         |                       |

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| Drug Name                                                                          | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------|-----------|-----------------------|
| REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML      | 6         |                       |
| REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG | 6         |                       |
| REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML           | 6         |                       |
| REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG      | 6         |                       |
| TASCENSO ODT ORAL TABLET DISPERSIBLE 0.25 MG, 0.5 MG                               | 6         |                       |
| teriflunomide oral tablet 14 mg, 7 mg                                              | 5         |                       |
| TYRUKO INTRAVENOUS CONCENTRATE 300 MG/15ML                                         | 5         | PA; Specialty Medical |
| TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML                                        | 6         | PA; Specialty Medical |
| VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG                                       | 5         |                       |
| ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK 4 X 0.23MG & 3 X 0.46MG       | 6         | PA                    |

| Drug Name                                                                                      | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ZEPOSIA ORAL CAPSULE 0.92 MG                                                                   | 6         | PA                          |
| ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG 0.92MG(21)                       | 6         | PA                          |
| <b>Central Nervous System Agents - Miscellaneous</b>                                           |           |                             |
| AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML                                   | 6         | PA; Specialty Medical       |
| ANECTINE INJECTION SOLUTION 20 MG/ML                                                           | GM        |                             |
| atracurium besylate intravenous solution 100 mg/10ml, 50 mg/5ml                                | GM        |                             |
| AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG                                                          | 6         | PA; QL (120 EA per 30 days) |
| AUSTEDO PATIENT TITRATION KIT ORAL TABLET THERAPY PACK 6 & 9 & 12 MG                           | 6         | PA; QL (70 EA per 28 days)  |
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 18 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG | 6         | PA; QL (30 EA per 30 days)  |
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 24 MG                                          | 6         | PA; QL (60 EA per 30 days)  |
| AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG    | 6         | PA; QL (30 EA per 30 days)  |

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| Drug Name                                                                             | Drug Tier | Notes                      |
|---------------------------------------------------------------------------------------|-----------|----------------------------|
| AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG | 6         | PA                         |
| caffeine citrate intravenous solution 60 mg/3ml                                       | GM        |                            |
| caffeine citrate oral solution 20 mg/ml, 60 mg/3ml                                    | 2         |                            |
| cisatracurium besylate (pf) intravenous solution 10 mg/5ml, 200 mg/20ml               | GM        |                            |
| cisatracurium besylate intravenous solution 20 mg/10ml                                | GM        |                            |
| DOPRAM INTRAVENOUS SOLUTION 20 MG/ML                                                  | GM        |                            |
| edaravone intravenous solution 30 mg/100ml                                            | 6         | PA; Specialty Medical      |
| gabapentin (once-daily) oral tablet 300 mg, 450 mg, 600 mg, 750 mg, 900 mg            | 2         | ST                         |
| GRALISE ORAL 300 (9) & 600(24) MG                                                     | 4         | ST                         |
| GRALISE ORAL TABLET 300 MG, 450 MG, 600 MG, 750 MG, 900 MG                            | 4         | ST; Brand penalty applies  |
| HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG                                  | 4         | ST                         |
| INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG                                             | 6         | PA; QL (30 EA per 30 days) |
| INGREZZA ORAL CAPSULE SPRINKLE 40 MG, 60 MG, 80 MG                                    | 6         | PA; QL (30 EA per 30 days) |

| Drug Name                                                                           | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------|-----------|-----------------------|
| INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG                                       | 6         | PA                    |
| LENMELDY INTRAVENOUS SUSPENSION                                                     | 6         | PA; Specialty Medical |
| LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 330 MG, 82.5 MG              | 4         | Brand penalty applies |
| LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG     | 4         |                       |
| LYRICA ORAL SOLUTION 20 MG/ML                                                       | 4         |                       |
| NUDEXTA ORAL CAPSULE 20-10 MG                                                       | 4         | PA                    |
| ONPATTRO INTRAVENOUS SOLUTION 10 MG/5ML                                             | 6         | PA; Specialty Medical |
| pregabalin er oral tablet extended release 24 hour 165 mg, 330 mg, 82.5 mg          | 2         |                       |
| pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg | 2         |                       |
| pregabalin oral solution 20 mg/ml                                                   | 2         |                       |
| QUELICIN INJECTION SOLUTION 20 MG/ML                                                | GM        |                       |
| RADICAVA INTRAVENOUS SOLUTION 30 MG/100ML                                           | 6         | PA; Specialty Medical |
| RADICAVA ORS ORAL SUSPENSION 105 MG/5ML                                             | 6         | PA                    |

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| Drug Name                                                                                         | Drug Tier | Notes                             |
|---------------------------------------------------------------------------------------------------|-----------|-----------------------------------|
| RADICAVA ORS<br>STARTER KIT ORAL<br>SUSPENSION 105<br>MG/5ML                                      | 6         | PA                                |
| RILUTEK ORAL TABLET<br>50 MG                                                                      | 6         |                                   |
| riluzole oral tablet 50 mg                                                                        | 6         |                                   |
| ROCURONIUM<br>BROMIDE +RFID<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 100 MG/10ML           | GM        |                                   |
| rocuronium bromide<br>intravenous solution 10<br>mg/ml, 100 mg/10ml, 50<br>mg/5ml                 | GM        |                                   |
| ROCURONIUM<br>BROMIDE<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 100<br>MG/10ML, 75 MG/7.5ML | GM        |                                   |
| SAVELLA ORAL<br>TABLET 100 MG, 12.5<br>MG, 25 MG, 50 MG                                           | 4         | PA; QL (60<br>EA per 30<br>days)  |
| SAVELLA TITRATION<br>PACK ORAL 12.5 & 25 &<br>50 MG                                               | 4         | PA; QL (55<br>EA per 365<br>days) |
| succinylcholine chloride<br>solution 20 mg/ml<br>injection                                        | GM        |                                   |
| SUCCINYLBCHOLINE<br>CHLORIDE SOLUTION<br>20 MG/ML INJECTION                                       | GM        |                                   |
| succinylcholine chloride<br>solution prefilled syringe<br>100 mg/5ml injection                    | GM        |                                   |
| SUCCINYLBCHOLINE<br>CHLORIDE SOLUTION<br>PREFILLED SYRINGE<br>100 MG/5ML INJECTION                | GM        |                                   |

| Drug Name                                                                                          | Drug Tier | Notes                             |
|----------------------------------------------------------------------------------------------------|-----------|-----------------------------------|
| succinylcholine chloride<br>solution prefilled syringe<br>200 mg/10ml injection                    | GM        |                                   |
| SUCCINYLBCHOLINE<br>CHLORIDE SOLUTION<br>PREFILLED SYRINGE<br>200 MG/10ML<br>INJECTION             | GM        |                                   |
| succinylcholine cl +rfid<br>injection solution prefilled<br>syringe 100 mg/5ml, 200<br>mg/10ml     | GM        |                                   |
| TEGLUTIK ORAL<br>SUSPENSION 50<br>MG/10ML                                                          | 6         |                                   |
| tetrabenazine oral tablet<br>12.5 mg, 25 mg                                                        | 5         | PA                                |
| TIGLUTIK ORAL<br>SUSPENSION 50<br>MG/10ML                                                          | 6         |                                   |
| TONMYA SUBLINGUAL<br>TABLET SUBLINGUAL<br>2.8 MG                                                   | 4         |                                   |
| vecuronium bromide<br>intravenous solution<br>reconstituted 10 mg, 20<br>mg                        | GM        |                                   |
| WAINUA<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 45 MG/0.8ML                                   | 6         | PA; QL<br>(0.8 ML per<br>28 days) |
| WEGOVY<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 0.25<br>MG/0.5ML, 0.5<br>MG/0.5ML, 1 MG/0.5ML | 4         | PA; QL (2<br>ML per 28<br>days)   |
| WEGOVY<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 1.7<br>MG/0.75ML, 2.4<br>MG/0.75ML            | 4         | PA; QL (3<br>ML per 28<br>days)   |

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| Drug Name                                                                                                                                             | Drug Tier | Notes                            | Drug Name                                                        | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------|------------------------------------------------------------------|-----------|-----------------------------|
| XENAZINE ORAL<br>TABLET 12.5 MG, 25<br>MG                                                                                                             | 6         | PA                               | DENTA 5000 PLUS<br>SENSITIVE DENTAL<br>GEL 1.1-5 %               | 4         |                             |
| ZEPBOUND<br>SUBCUTANEOUS<br>SOLUTION 10<br>MG/0.5ML, 12.5<br>MG/0.5ML, 15<br>MG/0.5ML, 2.5<br>MG/0.5ML, 5 MG/0.5ML,<br>7.5 MG/0.5ML                   | 4         | PA; QL (2<br>ML per 28<br>days)  | DENTAGEL DENTAL<br>GEL 1.1 %                                     | 4         |                             |
| ZEPBOUND<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 10<br>MG/0.5ML, 12.5<br>MG/0.5ML, 15<br>MG/0.5ML, 2.5<br>MG/0.5ML, 5 MG/0.5ML,<br>7.5 MG/0.5ML | 4         | PA; QL (2<br>ML per 28<br>days)  | EASYGEL DENTAL GEL<br>0.4 %                                      | 4         |                             |
| <b>Central Nervous<br/>System Agents</b>                                                                                                              |           |                                  | EVOXAC ORAL<br>CAPSULE 30 MG                                     | 4         | Brand<br>penalty<br>applies |
| SKYCLARYS ORAL<br>CAPSULE 50 MG                                                                                                                       | 6         | PA; QL (90<br>EA per 30<br>days) | FIRST-MOUTHWASH<br>BLM MOUTH/THROAT<br>SUSPENSION                | 4         |                             |
| <b>Dental and Oral Agents<br/>- Drugs for Mouth and<br/>Throat Conditions</b>                                                                         |           |                                  | FLUORIDEX DAILY<br>RENEWAL<br>MOUTH/THROAT<br>CONCENTRATE 0.63 % | 4         |                             |
| ARESTIN DENTAL 1 MG                                                                                                                                   | GM        |                                  | FLUORIDEX DENTAL<br>PASTE 1.1 %                                  | 4         |                             |
| cevimeline hcl oral<br>capsule 30 mg                                                                                                                  | 2         |                                  | FLUORIDEX<br>ENHANCED<br>WHITENING DENTAL<br>PASTE 1.1 %         | 4         |                             |
| chlorhexidine gluconate<br>mouth/throat solution<br>0.12 %                                                                                            | 2         |                                  | FLUORIMAX 5000<br>DENTAL PASTE 1.1 %                             | 4         |                             |
| CLINPRO 5000 DENTAL<br>PASTE 1.1 %                                                                                                                    | 4         |                                  | FLUORIMAX 5000<br>SENSITIVE DENTAL<br>GEL 1.1-5 %                | 4         |                             |
| DEBACTEROL<br>MOUTH/THROAT<br>SOLUTION 30-50 %                                                                                                        | 4         |                                  | FRAICHE 5000 DENTAL<br>DENTAL GEL 1.1 %                          | 4         |                             |
| DENTA 5000 PLUS<br>DENTAL CREAM 1.1 %                                                                                                                 | 4         |                                  | JUST RIGHT 5000<br>DENTAL PASTE 1.1 %                            | 4         |                             |
|                                                                                                                                                       |           |                                  | KEPIVANCE<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 5.16<br>MG | 6         | PA;<br>Specialty<br>Medical |
|                                                                                                                                                       |           |                                  | KOURZEQ<br>MOUTH/THROAT<br>PASTE 0.1 %                           | 4         | Brand<br>penalty<br>applies |
|                                                                                                                                                       |           |                                  | lidocaine viscous hcl<br>mouth/throat solution 2 %               | 2         |                             |

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| Drug Name                                        | Drug Tier | Notes                 |
|--------------------------------------------------|-----------|-----------------------|
| ORALONE MOUTH/THROAT PASTE 0.1 %                 | 4         | Brand penalty applies |
| PERIDEX MOUTH/THROAT SOLUTION 0.12 %             | 4         | Brand penalty applies |
| periogard mouth/throat solution 0.12 %           | 2         |                       |
| pilocarpine hcl oral tablet 5 mg, 7.5 mg         | 2         |                       |
| PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE 1.1 %   | 4         |                       |
| PREVIDENT 5000 DRY MOUTH DENTAL GEL 1.1 %        | 4         |                       |
| PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL 1.1-5 % | 4         |                       |
| PREVIDENT 5000 KIDS DENTAL PASTE 1.1 %           | 4         |                       |
| PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE 1.1 %  | 4         |                       |
| PREVIDENT 5000 PLUS DENTAL CREAM 1.1 %           | 4         |                       |
| PREVIDENT 5000 SENSITIVE DENTAL GEL 1.1-5 %      | 4         |                       |
| PREVIDENT DENTAL GEL 1.1 %                       | 4         |                       |
| PREVIDENT MOUTH/THROAT SOLUTION 0.2 %            | 4         |                       |
| REMESENSE DENTAL 3 %                             | 4         |                       |
| SALAGEN ORAL TABLET 5 MG, 7.5 MG                 | 4         | Brand penalty applies |
| sf 5000 plus dental cream 1.1 %                  | 2         |                       |
| sf dental gel 1.1 %                              | 2         |                       |

| Drug Name                                                | Drug Tier | Notes                                             |
|----------------------------------------------------------|-----------|---------------------------------------------------|
| sod fluoride-potassium nitrate dental gel 1.1-5 %        | 2         |                                                   |
| sodium fluoride 5000 enamel dental gel 1.1-5 %           | 2         |                                                   |
| sodium fluoride 5000 plus dental cream 1.1 %             | 2         |                                                   |
| sodium fluoride 5000 ppm dental cream 1.1 %              | 2         |                                                   |
| sodium fluoride 5000 ppm dental gel 1.1 %                | 2         |                                                   |
| sodium fluoride 5000 ppm dental paste 1.1 %              | 2         |                                                   |
| sodium fluoride 5000 sensitive dental gel 1.1-5 %        | 2         |                                                   |
| sodium fluoride dental cream 1.1 %                       | 2         |                                                   |
| sodium fluoride dental gel 1.1 %                         | 2         |                                                   |
| sodium fluoride mouth/throat solution 0.2 %              | 2         |                                                   |
| triamcinolone acetone mouth/throat paste 0.1 %           | 2         |                                                   |
| <b>Dermatological Agents - Drugs for Skin Conditions</b> |           |                                                   |
| ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG       | 4         | PA                                                |
| ABSORICA ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG         | 4         | PA; Brand penalty applies                         |
| ABSORICA ORAL CAPSULE 25 MG, 35 MG                       | 4         | PA; Brand penalty applies; QL (60 EA per 30 days) |
| accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg         | 2         |                                                   |

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| Drug Name                                               | Drug Tier | Notes                 |
|---------------------------------------------------------|-----------|-----------------------|
| acitretin oral capsule 10 mg, 17.5 mg, 25 mg            | 2         |                       |
| ACZONE EXTERNAL GEL 5 %                                 | 4         | Brand penalty applies |
| adapalene external cream 0.1 %                          | 2         |                       |
| adapalene external gel 0.3 %                            | 2         |                       |
| ADBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML    | 5         | PA                    |
| ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | 5         | PA                    |
| ALA SCALP EXTERNAL LOTION 2 %                           | 4         |                       |
| ala-cort external cream 1 %                             | 2         |                       |
| alclometasone dipropionate external cream 0.05 %        | 2         |                       |
| alclometasone dipropionate external ointment 0.05 %     | 2         |                       |
| amcinonide external cream 0.1 %                         | 2         |                       |
| amcinonide external lotion 0.1 %                        | 2         |                       |
| amcinonide external ointment 0.1 %                      | 2         |                       |
| AMELUZ EXTERNAL GEL 10 %                                | GM        |                       |
| ammonium lactate external cream 12 %                    | 2         |                       |
| ammonium lactate external lotion 12 %                   | 2         |                       |
| amnestem oral capsule 10 mg, 20 mg, 30 mg, 40 mg        | 2         |                       |

| Drug Name                                               | Drug Tier | Notes |
|---------------------------------------------------------|-----------|-------|
| APEXICON E EXTERNAL CREAM 0.05 %                        | 4         |       |
| AQUACEL AG BURN EXTERNAL PAD 4"X5"                      | 4         |       |
| ARZOL SILVER NIT APPLICATORS EXTERNAL 75-25 %           | 4         |       |
| azelaic acid external gel 15 %                          | 2         |       |
| AZELEX EXTERNAL CREAM 20 %                              | 4         |       |
| betamethasone dipropionate aug external cream 0.05 %    | 2         |       |
| betamethasone dipropionate aug external gel 0.05 %      | 2         |       |
| betamethasone dipropionate aug external lotion 0.05 %   | 2         |       |
| betamethasone dipropionate aug external ointment 0.05 % | 2         |       |
| betamethasone dipropionate external cream 0.05 %        | 2         |       |
| betamethasone dipropionate external lotion 0.05 %       | 2         |       |
| betamethasone dipropionate external ointment 0.05 %     | 2         |       |
| betamethasone valerate external cream 0.1 %             | 2         |       |
| betamethasone valerate external lotion 0.1 %            | 2         |       |
| betamethasone valerate external ointment 0.1 %          | 2         |       |
| bp 10-1 external emulsion 10-1 %                        | 2         |       |

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| Drug Name                                                     | Drug Tier | Notes                 |
|---------------------------------------------------------------|-----------|-----------------------|
| brimonidine tartrate external gel 0.33 %                      | 2         | PA                    |
| calcipotriene external cream 0.005 %                          | 2         |                       |
| calcipotriene external ointment 0.005 %                       | 2         |                       |
| calcipotriene external solution 0.005 %                       | 2         |                       |
| calcipotriene-betameth diprop external ointment 0.005-0.064 % | 2         | ST                    |
| CALCITRENE EXTERNAL OINTMENT 0.005 %                          | 4         | Brand penalty applies |
| calcitriol external ointment 3 mcg/gm                         | 2         | ST                    |
| CAPEX EXTERNAL SHAMPOO 0.01 %                                 | 4         |                       |
| CEM-UREA EXTERNAL SOLUTION 45 %                               | 4         |                       |
| CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG                     | 5         | PA                    |
| claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg              | 2         |                       |
| clindacin etz external swab 1 %                               | 2         |                       |
| clindacin external foam 1 %                                   | 2         |                       |
| clindacin-p external swab 1 %                                 | 2         |                       |
| clindamycin phos (once-daily) external gel 1 %                | 2         |                       |
| clindamycin phos (twice-daily) external gel 1 %               | 2         |                       |
| clindamycin phosphate external foam 1 %                       | 2         |                       |
| clindamycin phosphate external lotion 1 %                     | 2         |                       |
| clindamycin phosphate external solution 1 %                   | 2         |                       |

| Drug Name                                            | Drug Tier | Notes                     |
|------------------------------------------------------|-----------|---------------------------|
| clindamycin phosphate external swab 1 %              | 2         |                           |
| clobetasol prop emollient base external cream 0.05 % | 2         |                           |
| clobetasol propionate e external cream 0.05 %        | 2         |                           |
| clobetasol propionate emulsion external foam 0.05 %  | 2         |                           |
| clobetasol propionate external cream 0.05 %          | 2         |                           |
| clobetasol propionate external foam 0.05 %           | 2         |                           |
| clobetasol propionate external gel 0.05 %            | 2         |                           |
| clobetasol propionate external lotion 0.05 %         | 2         |                           |
| clobetasol propionate external ointment 0.05 %       | 2         |                           |
| clobetasol propionate external shampoo 0.05 %        | 2         |                           |
| clobetasol propionate external solution 0.05 %       | 2         |                           |
| CLOBEX EXTERNAL LOTION 0.05 %                        | 4         | Brand penalty applies     |
| CLOBEX EXTERNAL SHAMPOO 0.05 %                       | 4         | Brand penalty applies     |
| clorcortolone pivalate external cream 0.1 %          | 2         |                           |
| clodan external shampoo 0.05 %                       | 2         |                           |
| CLODERM EXTERNAL CREAM 0.1 %                         | 4         | Brand penalty applies     |
| coal tar external solution 20 %                      | 2         |                           |
| CONDYLOX EXTERNAL GEL 0.5 %                          | 4         | ST; Brand penalty applies |

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| Drug Name                                       | Drug Tier | Notes                 |
|-------------------------------------------------|-----------|-----------------------|
| CORDRAN EXTERNAL TAPE 4 MCG/SQCM                | 4         |                       |
| CORTANE-B EXTERNAL LOTION 10-10-1 MG/ML         | 4         |                       |
| dapsone external gel 5 %                        | 2         |                       |
| DERMA-SMOOTHIE/FS BODY EXTERNAL OIL 0.01 %      | 4         | Brand penalty applies |
| DERMA-SMOOTHIE/FS SCALP EXTERNAL OIL 0.01 %     | 4         | Brand penalty applies |
| desonide external cream 0.05 %                  | 2         |                       |
| desonide external gel 0.05 %                    | 2         |                       |
| desonide external lotion 0.05 %                 | 2         |                       |
| desonide external ointment 0.05 %               | 2         |                       |
| DESOWEN EXTERNAL CREAM 0.05 %                   | 4         | Brand penalty applies |
| desoximetasone external cream 0.05 %, 0.25 %    | 2         |                       |
| desoximetasone external gel 0.05 %              | 2         |                       |
| desoximetasone external liquid 0.25 %           | 2         |                       |
| desoximetasone external ointment 0.05 %, 0.25 % | 2         |                       |
| diclofenac sodium external gel 3 %              | 2         |                       |
| diflorasone diacetate external cream 0.05 %     | 2         |                       |
| diflorasone diacetate external ointment 0.05 %  | 2         |                       |
| DIPROLENE EXTERNAL OINTMENT 0.05 %              | 4         | Brand penalty applies |

| Drug Name                                                                  | Drug Tier | Notes                 |
|----------------------------------------------------------------------------|-----------|-----------------------|
| doxepin hcl external cream 5 %                                             | 2         |                       |
| DRYSOL EXTERNAL SOLUTION 20 %                                              | 3         |                       |
| DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML, 300 MG/2ML     | 5         | PA                    |
| DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML | 5         | PA                    |
| EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR 250 MG/2ML                     | 5         | PA                    |
| EBGLYSS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MG/2ML                 | 5         | PA                    |
| ELIDEL EXTERNAL CREAM 1 %                                                  | 4         | Brand penalty applies |
| EPIFOAM EXTERNAL FOAM 1-1 %                                                | 4         |                       |
| ery external pad 2 %                                                       | 2         |                       |
| erythromycin external gel 2 %                                              | 2         |                       |
| erythromycin external solution 2 %                                         | 2         |                       |
| EUCRISA EXTERNAL OINTMENT 2 %                                              | 4         | PA                    |
| FINACEA EXTERNAL FOAM 15 %                                                 | 4         |                       |
| FINACEA EXTERNAL GEL 15 %                                                  | 4         | Brand penalty applies |
| fluocinolone acetonide body external oil 0.01 %                            | 2         |                       |

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| Drug Name                                             | Drug Tier | Notes |
|-------------------------------------------------------|-----------|-------|
| fluocinolone acetonide external cream 0.01 %, 0.025 % | 2         |       |
| fluocinolone acetonide external ointment 0.025 %      | 2         |       |
| fluocinolone acetonide external solution 0.01 %       | 2         |       |
| fluocinolone acetonide scalp external oil 0.01 %      | 2         |       |
| fluocinonide emulsified base external cream 0.05 %    | 2         |       |
| fluocinonide external cream 0.05 %                    | 2         |       |
| fluocinonide external gel 0.05 %                      | 2         |       |
| fluocinonide external ointment 0.05 %                 | 2         |       |
| fluocinonide external solution 0.05 %                 | 2         |       |
| fluorouracil external cream 5 %                       | 2         |       |
| fluorouracil external solution 2 %, 5 %               | 2         |       |
| flurandrenolide external cream 0.05 %                 | 2         |       |
| flurandrenolide external lotion 0.05 %                | 2         |       |
| fluticasone propionate external cream 0.05 %          | 2         |       |
| fluticasone propionate external lotion 0.05 %         | 2         |       |
| fluticasone propionate external ointment 0.005 %      | 2         |       |
| GORDOFILM EXTERNAL SOLUTION 16.7-16.7 %               | 4         |       |
| halcinonide external cream 0.1 %                      | 2         |       |

| Drug Name                                                          | Drug Tier | Notes                 |
|--------------------------------------------------------------------|-----------|-----------------------|
| HALCINONIDE EXTERNAL SOLUTION 0.1 %                                | 4         |                       |
| halobetasol propionate external cream 0.05 %                       | 2         |                       |
| halobetasol propionate external ointment 0.05 %                    | 2         |                       |
| HALOG EXTERNAL CREAM 0.1 %                                         | 4         | Brand penalty applies |
| HALOG EXTERNAL OINTMENT 0.1 %                                      | 4         |                       |
| HALOG EXTERNAL SOLUTION 0.1 %                                      | 4         |                       |
| hydrocortisone ace-pramoxine external cream 2.5-1 %                | 2         |                       |
| hydrocortisone external cream 1 %, 2.5 %                           | 2         |                       |
| hydrocortisone external lotion 2 %, 2.5 %                          | 2         |                       |
| hydrocortisone external ointment 1 %, 2.5 %                        | 2         |                       |
| HYDROCORTISONE EXTERNAL SOLUTION 2.5 %                             | 4         |                       |
| hydrocortisone valerate external cream 0.2 %                       | 2         |                       |
| hydrocortisone valerate external ointment 0.2 %                    | 2         |                       |
| HYFTOR EXTERNAL GEL 0.2 %                                          | 4         | PA                    |
| imiquimod external cream 5 %                                       | 2         |                       |
| isotretinoin oral capsule 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg | 2         |                       |
| ivermectin external cream 1 %                                      | 2         |                       |
| KENALOG EXTERNAL AEROSOL SOLUTION 0.147 MG/GM                      | 4         | Brand penalty applies |

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| Drug Name                                              | Drug Tier | Notes                      |
|--------------------------------------------------------|-----------|----------------------------|
| KERALYT EXTERNAL GEL 6 %                               | 4         |                            |
| KERALYT EXTERNAL SHAMPOO 6 %                           | 4         |                            |
| KERALYT SCALP EXTERNAL KIT 6 %                         | 4         |                            |
| KLISYRI (250 MG) EXTERNAL OINTMENT 1 %                 | 4         | PA                         |
| KLISYRI (350 MG) EXTERNAL OINTMENT 1 %                 | 4         | PA                         |
| lactic acid e external cream 10-3500 %-unt/30gm        | 2         |                            |
| LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED 20 % | GM        |                            |
| LITFULO ORAL CAPSULE 50 MG                             | 6         | PA; QL (30 EA per 30 days) |
| MEDIHONEY WOUND & BURN DRESSING EXTERNAL PASTE         | 4         |                            |
| MEDIHONEY WOUND/BURN DRESSING EXTERNAL PASTE           | 4         |                            |
| methoxsalen rapid oral capsule 10 mg                   | 2         |                            |
| metronidazole external cream 0.75 %                    | 2         |                            |
| metronidazole external gel 0.75 %, 1 %                 | 2         |                            |
| metronidazole external lotion 0.75 %                   | 2         |                            |
| mometasone furoate external cream 0.1 %                | 2         |                            |
| mometasone furoate external ointment 0.1 %             | 2         |                            |
| mometasone furoate external solution 0.1 %             | 2         |                            |

| Drug Name                                  | Drug Tier | Notes                      |
|--------------------------------------------|-----------|----------------------------|
| NEO-SYNALAR EXTERNAL CREAM 0.5-0.025 %     | 4         |                            |
| NUCORT EXTERNAL LOTION 2 %                 | 4         |                            |
| OLUX-E EXTERNAL FOAM 0.05 %                | 4         | Brand penalty applies      |
| OPZELURA EXTERNAL CREAM 1.5 %              | 4         | PA                         |
| pimecrolimus external cream 1 %            | 2         |                            |
| PODOCON-25 EXTERNAL SOLUTION 25 %          | 4         |                            |
| podofilox external gel 0.5 %               | 2         | ST                         |
| podofilox external solution 0.5 %          | 2         |                            |
| PRAMOSONE EXTERNAL CREAM 1-1 %, 1-2.5 %    | 4         |                            |
| PRAMOSONE EXTERNAL LOTION 1-1 %, 1-2.5 %   | 3         |                            |
| PRAMOSONE EXTERNAL OINTMENT 1-1 %, 1-2.5 % | 3         |                            |
| PRUDOXIN EXTERNAL CREAM 5 %                | 4         | Brand penalty applies      |
| PURAPLY EXTERNAL SHEET 6X9CM               | GM        |                            |
| PYROGALLIC ACID EXTERNAL OINTMENT 25-2 %   | 4         |                            |
| QBREXZA EXTERNAL PAD 2.4 %                 | 4         | PA; QL (30 EA per 30 days) |
| QUTENZA (2 PATCH) EXTERNAL KIT 8 %         | 6         | Specialty Medical          |

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| Drug Name                                          | Drug Tier | Notes                 | Drug Name                                                 | Drug Tier | Notes                        |
|----------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------|-----------|------------------------------|
| QUTENZA (4 PATCH) EXTERNAL KIT 8 %                 | 6         | Specialty Medical     | SALVAX EXTERNAL FOAM 6 %                                  | 4         |                              |
| QUTENZA EXTERNAL KIT 8 %                           | 6         | Specialty Medical     | SALYCIM EXTERNAL CREAM 6 %                                | 4         |                              |
| REGRANEX EXTERNAL GEL 0.01 %                       | 4         | PA                    | SALYNTRA EXTERNAL GEL 6 %                                 | 4         |                              |
| RETIN-A EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 %      | 4         | Brand penalty applies | SANTYL EXTERNAL OINTMENT 250 UNIT/GM                      | 4         |                              |
| RETIN-A EXTERNAL GEL 0.01 %, 0.025 %               | 4         | Brand penalty applies | SCALACORT DK EXTERNAL KIT 2 & 2-2 %                       | 4         |                              |
| RETIN-A MICRO EXTERNAL GEL 0.1 %                   | 4         | Brand penalty applies | SCENESSE SUBCUTANEOUS IMPLANT 16 MG                       | 6         | PA; Specialty Medical        |
| RETIN-A MICRO PUMP EXTERNAL GEL 0.1 %              | 4         | Brand penalty applies | selenium sulfide external lotion 2.5 %                    | 2         |                              |
| RHOFADE EXTERNAL CREAM 1 %                         | 4         | PA                    | selenium sulfide external shampoo 2.25 %, 2.3 %           | 2         |                              |
| salicylic acid external foam 6 %                   | 2         |                       | sodium sulfacetamide external shampoo 10 %                | 2         |                              |
| salicylic acid external gel 6 %                    | 2         |                       | sodium sulfacetamide wash external liquid 10 %            | 2         |                              |
| salicylic acid external shampoo 6 %                | 2         |                       | SOFDRA EXTERNAL GEL 12.45 %                               | 4         | PA; QL (40.2 ML per 30 days) |
| salicylic acid external solution 26 %              | 2         |                       | sss 10-5 external cream 10-5 %                            | 2         |                              |
| salicylic acid wart remover external liquid 27.5 % | 2         |                       | sulfacetamide sodium (acne) external lotion 10 %          | 2         |                              |
| salicylic acid-cleanser external kit 6 % cream     | 2         |                       | sulfacetamide sodium external liquid 10 %                 | 2         |                              |
| SALIMEZ EXTERNAL CREAM 6 %                         | 4         |                       | sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 % | 2         |                              |
| SALIMEZ FORTE EXTERNAL CREAM 10 %                  | 4         |                       | sulfacetamide sodium-sulfur external emulsion 10-1 %      | 2         |                              |
| SALVAX DUO PLUS EXTERNAL KIT 6 & 35 %              | 4         |                       |                                                           |           |                              |

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| Drug Name                                                               | Drug Tier | Notes                 |
|-------------------------------------------------------------------------|-----------|-----------------------|
| sulfacetamide sodium-sulfur external liquid 10-5 %                      | 2         |                       |
| sulfacetamide sodium-sulfur external lotion 10-5 %, 9.8-4.8 %           | 2         |                       |
| sulfacetamide sodium-sulfur external pad 9.8-4.8 %                      | 2         |                       |
| sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %, 9-4.25 % | 2         |                       |
| sulfacetamide-sulfur in urea external emulsion 10-5 %                   | 2         |                       |
| sulfamez wash external emulsion 10-1 %                                  | 2         |                       |
| SYNALAR EXTERNAL CREAM 0.025 %                                          | 4         | Brand penalty applies |
| SYNALAR EXTERNAL OINTMENT 0.025 %                                       | 4         | Brand penalty applies |
| SYNALAR EXTERNAL SOLUTION 0.01 %                                        | 4         | Brand penalty applies |
| tacrolimus external ointment 0.03 %, 0.1 %                              | 2         |                       |
| tazarotene external cream 0.05 %, 0.1 %                                 | 2         |                       |
| tazarotene external gel 0.05 %, 0.1 %                                   | 2         |                       |
| TAZORAC EXTERNAL CREAM 0.05 %, 0.1 %                                    | 4         | Brand penalty applies |
| TAZORAC EXTERNAL GEL 0.05 %, 0.1 %                                      | 4         | Brand penalty applies |
| TEXACORT EXTERNAL SOLUTION 2.5 %                                        | 4         |                       |

| Drug Name                                                               | Drug Tier | Notes                 |
|-------------------------------------------------------------------------|-----------|-----------------------|
| TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %                                  | 4         | Brand penalty applies |
| TOPICORT EXTERNAL GEL 0.05 %                                            | 4         | Brand penalty applies |
| TOPICORT EXTERNAL OINTMENT 0.25 %                                       | 4         | Brand penalty applies |
| TOPICORT SPRAY EXTERNAL LIQUID 0.25 %                                   | 4         | Brand penalty applies |
| tovet external foam 0.05 %                                              | 2         |                       |
| tretinoin external cream 0.025 %, 0.05 %, 0.1 %                         | 2         |                       |
| tretinoin external gel 0.01 %, 0.025 %                                  | 2         |                       |
| tretinoin microsphere external gel 0.04 %, 0.1 %                        | 2         |                       |
| tretinoin microsphere pump external gel 0.04 %, 0.1 %                   | 2         |                       |
| triamcinolone acetonide external aerosol solution 0.147 mg/gm           | 2         |                       |
| triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %            | 2         |                       |
| triamcinolone acetonide external lotion 0.025 %, 0.1 %                  | 2         |                       |
| triamcinolone acetonide external ointment 0.025 %, 0.05 %, 0.1 %, 0.5 % | 2         |                       |
| triamcinolone in absorbase external ointment 0.05 %                     | 2         |                       |
| triderm external cream 0.5 %                                            | 2         |                       |
| turpentine external spirit                                              | 2         |                       |

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| Drug Name                                       | Drug Tier | Notes                                         |
|-------------------------------------------------|-----------|-----------------------------------------------|
| urea external cream 40 %                        | 2         |                                               |
| urea external lotion 40 %                       | 2         |                                               |
| urea hydrating external foam 35 %               | 2         |                                               |
| urea nail external gel 45 %                     | 2         |                                               |
| UREMEZ-40 EXTERNAL CREAM 40 %                   | 4         |                                               |
| VECTICAL EXTERNAL OINTMENT 3 MCG/GM             | 4         | ST; Brand penalty applies                     |
| VEREGEN EXTERNAL OINTMENT 15 %                  | 4         |                                               |
| VIRASAL EXTERNAL LIQUID 27.5 %                  | 4         |                                               |
| VTAMA EXTERNAL CREAM 1 %                        | 4         | PA; QL (60 GM per 30 days)                    |
| VYJUVEK EXTERNAL GEL 5000000000 PFU/2.5ML       | 6         | PA; Specialty Medical; QL (10 ML per 28 days) |
| WINLEVI EXTERNAL CREAM 1 %                      | 4         | PA                                            |
| XERAC AC EXTERNAL SOLUTION 6.25 %               | 4         |                                               |
| XEROFORM OCCLUSIVE GAUZE PATCH EXTERNAL PAD 3 % | 4         |                                               |
| XEROFORM OIL EMULSION 2"X2" EXTERNAL PAD        | 4         |                                               |
| XEROFORM OIL EMULSION GAUZE EXTERNAL PAD        | 4         |                                               |
| XEROFORM OIL EMULSION STRIP EXTERNAL            | 4         |                                               |

| Drug Name                                        | Drug Tier | Notes                      |
|--------------------------------------------------|-----------|----------------------------|
| XEROFORM OIL ROLL 4"X9' EXTERNAL 3 %             | 4         |                            |
| XEROFORM PETROLAT GAUZE 1"X8" EXTERNAL           | 4         |                            |
| XEROFORM PETROLAT GAUZE 5"X9" EXTERNAL           | 4         |                            |
| XEROFORM PETROLAT PATCH 2"X2" EXTERNAL PAD       | 4         |                            |
| XEROFORM PETROLAT PATCH 4"X4" EXTERNAL PAD       | 4         |                            |
| XEROFORM PETROLATUM DRES 4"X4" EXTERNAL PAD 3 %  | 4         |                            |
| XEROFORM PETROLATUM DRES 5"X9" EXTERNAL PAD 3 %  | 4         |                            |
| XEROFORM PETROLATUM ROLL 4"X9' EXTERNAL          | 4         |                            |
| zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 2         |                            |
| ZITHRANOL EXTERNAL SHAMPOO 1 %                   | 4         |                            |
| ZONALON EXTERNAL CREAM 5 %                       | 4         | Brand penalty applies      |
| ZORYVE EXTERNAL CREAM 0.05 %, 0.15 %, 0.3 %      | 4         | PA; QL (60 GM per 30 days) |
| ZORYVE EXTERNAL FOAM 0.3 %                       | 4         | PA; QL (60 GM per 30 days) |
| <b>Diabetes - Antidiabetic Agents</b>            |           |                            |
| acarbose oral tablet 100 mg, 25 mg, 50 mg        | 2         |                            |

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| Drug Name                                                                    | Drug Tier | Notes                       |
|------------------------------------------------------------------------------|-----------|-----------------------------|
| ACTOPLUS MET ORAL TABLET 15-850 MG                                           | 4         | Brand penalty applies       |
| ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG                                        | 4         | Brand penalty applies       |
| ALOGLIPTIN BENZOATE ORAL TABLET 12.5 MG, 25 MG, 6.25 MG                      | 4         | PA; QL (30 EA per 30 days)  |
| ALOGLIPTIN-METFORMIN HCL ORAL TABLET 12.5-1000 MG, 12.5-500 MG               | 4         | PA; QL (60 EA per 30 days)  |
| ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG | 4         | PA; QL (30 EA per 30 days)  |
| BEXAGLIFLOZIN ORAL TABLET 20 MG                                              | 4         | PA                          |
| BRENZAVVY ORAL TABLET 20 MG                                                  | 4         | PA                          |
| BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML           | 3         | PA; QL (3.4 ML per 28 days) |
| BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML           | 3         | PA; QL (2.4 ML per 30 days) |
| BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML             | 3         | PA; QL (1.2 ML per 30 days) |
| CYCLOSET ORAL TABLET 0.8 MG                                                  | 4         |                             |
| DUETACT ORAL TABLET 30-2 MG, 30-4 MG                                         | 4         | Brand penalty applies       |

| Drug Name                                                                                        | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------------------------|-----------|----------------------------|
| FARXIGA ORAL TABLET 10 MG, 5 MG                                                                  | 3         | ST; QL (30 EA per 30 days) |
| glimepiride oral tablet 1 mg, 2 mg, 3 mg, 4 mg                                                   | 1         |                            |
| glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg                            | 2         |                            |
| glipizide oral tablet 10 mg, 2.5 mg, 5 mg                                                        | 1         |                            |
| glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg                            | 2         |                            |
| glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg                             | 2         |                            |
| GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 2.5 MG, 5 MG                            | 4         | Brand penalty applies      |
| glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg                                              | 2         |                            |
| glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg                                                      | 2         |                            |
| glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg                                | 2         |                            |
| GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG                                                            | 3         | PA; QL (30 EA per 30 days) |
| INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG                             | 4         | PA; QL (60 EA per 30 days) |
| INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG | 4         | PA; QL (60 EA per 30 days) |
| INVOKANA ORAL TABLET 100 MG, 300 MG                                                              | 4         | PA; QL (30 EA per 30 days) |

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| Drug Name                                                              | Drug Tier | Notes                                             |
|------------------------------------------------------------------------|-----------|---------------------------------------------------|
| JANUMET ORAL TABLET 50-1000 MG, 50-500 MG                              | 3         | ST; QL (60 EA per 30 days)                        |
| JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-500 MG | 3         | ST; QL (30 EA per 30 days)                        |
| JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG             | 3         | ST; QL (60 EA per 30 days)                        |
| JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG                               | 3         | ST; QL (30 EA per 30 days)                        |
| JARDIANCE ORAL TABLET 10 MG, 25 MG                                     | 3         | ST; QL (30 EA per 30 days)                        |
| JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG             | 3         | ST; QL (60 EA per 30 days)                        |
| JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG         | 3         | ST; QL (60 EA per 30 days)                        |
| JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG           | 3         | ST; QL (30 EA per 30 days)                        |
| KAZANO ORAL TABLET 12.5-1000 MG, 12.5-500 MG                           | 4         | PA; QL (60 EA per 30 days)                        |
| KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG         | 4         | PA; Brand penalty applies; QL (60 EA per 30 days) |
| KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG, 5-500 MG | 4         | PA; Brand penalty applies; QL (30 EA per 30 days) |

| Drug Name                                                                                                                    | Drug Tier | Notes                                             |
|------------------------------------------------------------------------------------------------------------------------------|-----------|---------------------------------------------------|
| liraglutide solution pen-injector 18 mg/3ml subcutaneous                                                                     | 2         | PA                                                |
| liraglutide solution pen-injector 18 mg/3ml subcutaneous                                                                     | 2         | PA; QL (6 ML per 30 days)                         |
| liraglutide solution pen-injector 18 mg/3ml subcutaneous                                                                     | 2         | PA; QL (9 ML per 30 days)                         |
| metformin hcl er oral tablet extended release 24 hour 500 mg, 750 mg                                                         | 1         |                                                   |
| metformin hcl oral solution 500 mg/5ml                                                                                       | 2         |                                                   |
| metformin hcl oral tablet 1000 mg, 500 mg, 850 mg                                                                            | 1         |                                                   |
| miglitol oral tablet 100 mg, 25 mg, 50 mg                                                                                    | 2         |                                                   |
| MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML | 3         | PA; QL (2 ML per 28 days)                         |
| nateglinide oral tablet 120 mg, 60 mg                                                                                        | 2         |                                                   |
| NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG                                                                                   | 4         | PA; QL (30 EA per 30 days)                        |
| ONGLYZA ORAL TABLET 2.5 MG, 5 MG                                                                                             | 4         | PA; Brand penalty applies; QL (30 EA per 30 days) |
| OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG                                                                   | 4         | PA; QL (30 EA per 30 days)                        |

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| Drug Name                                                                         | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------|-----------|----------------------------|
| OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML, 4 MG/3ML, 8 MG/3ML           | 3         | PA; QL (3 ML per 28 days)  |
| pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg                                  | 2         |                            |
| pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg                         | 2         |                            |
| pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg                   | 2         |                            |
| QTERN ORAL TABLET 10-5 MG                                                         | 4         | PA; QL (30 EA per 30 days) |
| QTERN ORAL TABLET 5-5 MG                                                          | 4         | PA; QL (1 EA per 1 day)    |
| repaglinide oral tablet 0.5 mg, 1 mg, 2 mg                                        | 2         |                            |
| RIOMET ORAL SOLUTION 500 MG/5ML                                                   | 4         | Brand penalty applies      |
| RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG                                            | 3         | PA; QL (30 EA per 30 days) |
| saxagliptin hcl oral tablet 2.5 mg, 5 mg                                          | 2         | PA; QL (30 EA per 30 days) |
| saxagliptin-metformin er oral tablet extended release 24 hour 2.5-1000 mg         | 2         | PA; QL (60 EA per 30 days) |
| saxagliptin-metformin er oral tablet extended release 24 hour 5-1000 mg, 5-500 mg | 2         | PA; QL (30 EA per 30 days) |
| SEGLUROMET ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 7.5-1000 MG, 7.5-500 MG           | 4         | PA; QL (60 EA per 30 days) |

| Drug Name                                                                                        | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------------------------|-----------|----------------------------|
| SOLQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML                                      | 4         | PA; QL (18 ML per 30 days) |
| STEGLATRO ORAL TABLET 15 MG, 5 MG                                                                | 4         | PA; QL (30 EA per 30 days) |
| STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG                                                        | 4         | PA; QL (30 EA per 30 days) |
| SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML                                  | 4         | ST                         |
| SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML                                   | 4         | ST                         |
| SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG                              | 3         | ST; QL (60 EA per 30 days) |
| SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG | 3         | ST; QL (60 EA per 30 days) |
| TRADJENTA ORAL TABLET 5 MG                                                                       | 3         | ST; QL (30 EA per 30 days) |
| TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG                      | 3         | PA; QL (30 EA per 30 days) |
| TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG                 | 3         | PA; QL (60 EA per 30 days) |

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| Drug Name                                                                                           | Drug Tier | Notes                                            |
|-----------------------------------------------------------------------------------------------------|-----------|--------------------------------------------------|
| TRULICITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML | 3         | PA; QL (4 ML per 28 days)                        |
| TZIELD INTRAVENOUS SOLUTION 2 MG/2ML                                                                | 6         | PA; Specialty Medical                            |
| VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS                                                | 4         | PA; Brand penalty applies; QL (6 ML per 30 days) |
| VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS                                                | 4         | PA; Brand penalty applies; QL (9 ML per 30 days) |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 5-500 MG                      | 3         | PA; QL (30 EA per 30 days)                       |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG                               | 3         | PA; QL (60 EA per 30 days)                       |
| XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML                                      | 4         | PA; QL (15 ML per 30 days)                       |
| <b>Diabetes - Glucose Monitoring</b>                                                                |           |                                                  |
| ACCU-CHEK FASTCLIX LANCET KIT KIT                                                                   | 1         |                                                  |
| ACCU-CHEK SOFTCLIX LANCET DEVICE KIT KIT                                                            | 1         |                                                  |
| ADVOCATE SAFETY LANCETS 21G                                                                         | 1         |                                                  |

| Drug Name                              | Drug Tier | Notes                              |
|----------------------------------------|-----------|------------------------------------|
| ADVOCATE SAFETY LANCETS 23G            | 1         |                                    |
| ADVOCATE SAFETY LANCETS 28G            | 1         |                                    |
| AUTOLET II CLINISAFE KIT               | 1         |                                    |
| CARESENS LANCETS 30G                   | 1         |                                    |
| CHOSEN LANCETS 30G                     | 1         |                                    |
| CHOSEN SAFETY LANCETS 28G              | 1         |                                    |
| CLEVER CHOICE COMFORT EZ               | 1         |                                    |
| COMFORT TOUCH TWIST LANCET 30G         | 1         |                                    |
| DEXCOM G6 RECEIVER DEVICE              | 3         | ST; QL (365 day supply per 1 fill) |
| DEXCOM G6 SENSOR                       | 3         | ST                                 |
| DEXCOM G6 TRANSMITTER                  | 3         | ST                                 |
| DEXCOM G7 RECEIVER DEVICE              | 3         | ST; QL (365 day supply per 1 fill) |
| DEXCOM G7 SENSOR                       | 3         | ST                                 |
| DROPSAFE ACTI-LANCE 23G                | 1         |                                    |
| FREESTYLE FREEDOM LITE KIT W/DEVICE    | 3         |                                    |
| FREESTYLE INSULINX TEST IN VITRO STRIP | 3         | QL (150 EA per 30 days)            |
| FREESTYLE LIBRE 14 DAY READER DEVICE   | 3         | ST; QL (365 day supply per 1 fill) |
| FREESTYLE LIBRE 14 DAY SENSOR          | 3         | ST                                 |

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| Drug Name                                   | Drug Tier | Notes                              |
|---------------------------------------------|-----------|------------------------------------|
| FREESTYLE LIBRE 2 PLUS SENSOR               | 3         | ST                                 |
| FREESTYLE LIBRE 2 READER DEVICE             | 3         | ST; QL (365 day supply per 1 fill) |
| FREESTYLE LIBRE 2 SENSOR                    | 3         | ST                                 |
| FREESTYLE LIBRE 3 PLUS SENSOR               | 3         | ST                                 |
| FREESTYLE LIBRE 3 READER DEVICE             | 3         | ST; QL (365 day supply per 1 fill) |
| FREESTYLE LIBRE 3 SENSOR                    | 3         | ST                                 |
| FREESTYLE LIBRE READER DEVICE               | 3         | ST; QL (365 day supply per 1 fill) |
| FREESTYLE LITE TEST IN VITRO STRIP          | 3         | QL (150 EA per 30 days)            |
| FREESTYLE PRECISION NEO SYSTEM KIT W/DEVICE | 3         |                                    |
| FREESTYLE PRECISION NEO TEST IN VITRO STRIP | 3         | QL (150 EA per 30 days)            |
| FREESTYLE TEST IN VITRO STRIP               | 3         | QL (150 EA per 30 days)            |
| GENTEEL LANCING KIT (BLUE) KIT              | 1         |                                    |
| LANCETS                                     | 1         |                                    |
| LANCETS 28G THIN                            | 1         |                                    |
| LANCETS SUPER THIN                          | 1         |                                    |
| MOBILE LANCETS 30G                          | 1         |                                    |
| ONETOUCH DELICA LANCETS 30G                 | 1         |                                    |
| ONETOUCH DELICA LANCETS 33G                 | 1         |                                    |

| Drug Name                                                       | Drug Tier | Notes                   |
|-----------------------------------------------------------------|-----------|-------------------------|
| ONETOUCH DELICA SAFETY LANCING                                  | 1         |                         |
| PERFECT POINT SAFETY LANCETS                                    | 1         |                         |
| PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP                     | 3         | QL (150 EA per 30 days) |
| TECHLITE LANCETS 26G                                            | 1         |                         |
| VERIFINE SAFE LANCET MINI 21G                                   | 1         |                         |
| VERIFINE SAFE LANCET MINI 23G                                   | 1         |                         |
| VERIFINE SAFE LANCET MINI 28G                                   | 1         |                         |
| VERIFINE SAFE LANCET MINI 30G                                   | 1         |                         |
| VIVAGUARD LANCETS 30G                                           | 1         |                         |
| VIVAGUARD SAFETY LANCETS 28G                                    | 1         |                         |
| <b>Diabetes - Glycemic Agents</b>                               |           |                         |
| BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE                         | 3         |                         |
| BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE                         | 3         |                         |
| diazoxide oral suspension 50 mg/ml                              | 2         |                         |
| GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED 1 MG          | GM        |                         |
| GLUCAGON EMERGENCY KIT INJECTION SOLUTION RECONSTITUTED 1 MG/ML | GM        |                         |
| glucagon emergency solution reconstituted 1 mg injection        | 2         |                         |

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| Drug Name                                                                         | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------|-----------|----------------------------|
| GLUCAGON EMERGENCY SOLUTION RECONSTITUTED 1 MG INJECTION                          | 3         | Brand penalty applies      |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML | 4         |                            |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML | 4         |                            |
| GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML                                        | 4         |                            |
| GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML, 1 MG/0.2ML        | 4         |                            |
| PROGLYCEM ORAL SUSPENSION 50 MG/ML                                                | 4         | Brand penalty applies      |
| ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.6 MG/0.6ML                        | 3         |                            |
| ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.6 MG/0.6ML                    | 3         |                            |
| <b>Diabetes - Insulins</b>                                                        |           |                            |
| ADMELOG INJECTION SOLUTION 100 UNIT/ML                                            | 4         | ST; QL (60 ML per 30 days) |
| ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                   | 4         | ST; QL (60 ML per 30 days) |

| Drug Name                                                                                                                                                                                                                                                     | Drug Tier | Notes                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| AFREZZA INHALATION POWDER 12 UNIT                                                                                                                                                                                                                             | 4         | QL (270 EA per 30 days)    |
| AFREZZA INHALATION POWDER 4 UNIT, 90 X 4 UNIT & 90X8 UNIT                                                                                                                                                                                                     | 4         | QL (540 EA per 30 days)    |
| AFREZZA INHALATION POWDER 60X4 & 60X8 & 60X12 UNIT, 8 UNIT, 90 X 8 UNIT & 90X12 UNIT                                                                                                                                                                          | 4         | QL (360 EA per 30 days)    |
| APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                                                                                                                                                                                                | 4         | ST; QL (60 ML per 30 days) |
| APIDRA VIAL INJECTION SOLUTION 100 UNIT/ML                                                                                                                                                                                                                    | 4         | ST; QL (60 ML per 30 days) |
| AQ INSULIN SYRINGE 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 1 ML                                                                                                                                                                                      | 3         |                            |
| BD ULTRA-FINE INSULIN SYRINGES 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML | 3         |                            |
| BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML                                                                                                                                                                      | 3         |                            |

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| Drug Name                                                                                                                                                                               | Drug Tier | Notes                      | Drug Name                                                                          | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|------------------------------------------------------------------------------------|-----------|----------------------------|
| DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML                   | 3         |                            | FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                         | 4         | ST; QL (60 ML per 30 days) |
| EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML                                                                                                                    | 3         |                            | HUMALOG INJECTION SOLUTION 100 UNIT/ML                                             | 3         | QL (60 ML per 30 days)     |
| EMBECTA INSULIN SYR ULTRAFINE 30G X 1/2" 0.3 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 3         |                            | HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML        | 3         | QL (60 ML per 30 days)     |
| EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML                                                                                                                              | 3         |                            | HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML | 3         | QL (60 ML per 30 days)     |
| EMBECTA INSULIN SYRINGE U-100 27G X 5/8" 1 ML, 28G X 1/2" 1 ML                                                                                                                          | 3         |                            | HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML                 | 3         | QL (60 ML per 30 days)     |
| EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML                                                                                                                                          | 3         |                            | HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML | 3         | QL (60 ML per 30 days)     |
| FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                                                                                                                          | 4         | ST; QL (60 ML per 30 days) | HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML                 | 3         | QL (60 ML per 30 days)     |
| FIASP INJECTION SOLUTION 100 UNIT/ML                                                                                                                                                    | 4         | ST; QL (60 ML per 30 days) | HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                | 3         | QL (60 ML per 30 days)     |
| FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                                                                                                               | 4         | ST; QL (60 ML per 30 days) | HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML        | 3         | QL (60 ML per 30 days)     |

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| Drug Name                                                                               | Drug Tier | Notes                      | Drug Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------------------|-----------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML          | 3         | QL (60 ML per 30 days)     | INSULIN ASPART PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4         | ST; QL (60 ML per 30 days) |
| HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                          | 3         | QL (60 ML per 30 days)     | INSULIN ASPART PROT & ASPART SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                                                                                                                                                                                                                                                                                                                                                                                                                               | 4         | ST; QL (60 ML per 30 days) |
| HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML                      | 3         | QL (60 ML per 30 days)     | INSULIN DEGLUDEC FLEXTouch SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML                                                                                                                                                                                                                                                                                                                                                                                                                 | 4         | QL (60 ML per 30 days)     |
| HUMULIN N VIAL SUBCUTANEOUS SUSPENSION 100 UNIT/ML                                      | 3         | QL (60 ML per 30 days)     | INSULIN DEGLUDEC SUBCUTANEOUS SOLUTION 100 UNIT/ML                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4         | QL (60 ML per 30 days)     |
| HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML                  | 3         | QL (60 ML per 30 days)     | INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 0.5 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/2" 0.3 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML | 3         |                            |
| HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML                                  | 3         | QL (60 ML per 30 days)     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                            |
| HUMULIN R VIAL INJECTION SOLUTION 100 UNIT/ML                                           | 3         | QL (60 ML per 30 days)     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                            |
| INSULIN ASP PROT & ASP FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | 4         | ST; QL (60 ML per 30 days) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                            |
| INSULIN ASPART FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML                   | 4         | ST; QL (60 ML per 30 days) | KIRSTY INJECTION SOLUTION 100 UNIT/ML                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 4         |                            |
| INSULIN ASPART INJECTION SOLUTION 100 UNIT/ML                                           | 4         | ST; QL (60 ML per 30 days) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |                            |

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| Drug Name                                                                                             | Drug Tier | Notes                            | Drug Name                                                                                             | Drug Tier | Notes                            |
|-------------------------------------------------------------------------------------------------------|-----------|----------------------------------|-------------------------------------------------------------------------------------------------------|-----------|----------------------------------|
| KIRSTY<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                                       | 4         |                                  | NOVOLIN 70/30 RELION<br>SUBCUTANEOUS<br>SUSPENSION (70-30)<br>100 UNIT/ML                             | 4         | ST; QL (60<br>ML per 30<br>days) |
| LANTUS SOLOSTAR<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                              | 3         | QL (60 ML<br>per 30<br>days)     | NOVOLIN 70/30 VIAL<br>SUBCUTANEOUS<br>SUSPENSION (70-30)<br>100 UNIT/ML                               | 4         | ST; QL (60<br>ML per 30<br>days) |
| LANTUS U-100 VIAL<br>SUBCUTANEOUS<br>SOLUTION 100 UNIT/ML                                             | 3         | QL (60 ML<br>per 30<br>days)     | NOVOLIN N RELION<br>SUBCUTANEOUS<br>SUSPENSION 100<br>UNIT/ML                                         | 4         | ST; QL (60<br>ML per 30<br>days) |
| LEVEMIR FLEXPEN<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                              | 3         | QL (60 ML<br>per 30<br>days)     | NOVOLIN N VIAL<br>SUBCUTANEOUS<br>SUSPENSION 100<br>UNIT/ML                                           | 4         | ST; QL (60<br>ML per 30<br>days) |
| LEVEMIR U-100 VIAL<br>SUBCUTANEOUS<br>SOLUTION 100 UNIT/ML                                            | 3         | QL (60 ML<br>per 30<br>days)     | NOVOLIN R RELION<br>INJECTION SOLUTION<br>100 UNIT/ML                                                 | 4         | ST; QL (60<br>ML per 30<br>days) |
| MERILOG SOLOSTAR<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                             | 4         |                                  | NOVOLIN R VIAL<br>INJECTION SOLUTION<br>100 UNIT/ML                                                   | 4         | ST; QL (60<br>ML per 30<br>days) |
| MERILOG<br>SUBCUTANEOUS<br>SOLUTION 100 UNIT/ML                                                       | 4         |                                  | NOVOLOG 70/30<br>FLEXPEN RELION<br>SUBCUTANEOUS<br>SUSPENSION PEN-<br>INJECTOR (70-30) 100<br>UNIT/ML | 4         | ST; QL (60<br>ML per 30<br>days) |
| MYXREDLIN<br>INTRAVENOUS<br>SOLUTION 100-0.9<br>UT/100ML-%                                            | GM        |                                  | NOVOLOG FLEXPEN<br>RELION<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                    | 4         | ST; QL (60<br>ML per 30<br>days) |
| NOVOLIN 70/30<br>FLEXPEN RELION<br>SUBCUTANEOUS<br>SUSPENSION PEN-<br>INJECTOR (70-30) 100<br>UNIT/ML | 4         | ST; QL (60<br>ML per 30<br>days) | NOVOLOG FLEXPEN<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 100 UNIT/ML                              | 4         | ST; QL (60<br>ML per 30<br>days) |
| NOVOLIN 70/30<br>FLEXPEN<br>SUBCUTANEOUS<br>SUSPENSION PEN-<br>INJECTOR (70-30) 100<br>UNIT/ML        | 4         | ST; QL (60<br>ML per 30<br>days) | NOVOLOG MIX 70/30<br>FLEXPEN<br>SUBCUTANEOUS<br>SUSPENSION PEN-<br>INJECTOR (70-30) 100<br>UNIT/ML    | 4         | ST; QL (60<br>ML per 30<br>days) |

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| Drug Name                                                                                                                                    | Drug Tier | Notes                      |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                                                                         | 4         | ST; QL (60 ML per 30 days) |
| NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML                                                                           | 4         | ST; QL (60 ML per 30 days) |
| NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML                                                                                  | 4         | ST; QL (60 ML per 30 days) |
| NOVOLOG RELION INJECTION SOLUTION 100 UNIT/ML                                                                                                | 4         | ST; QL (60 ML per 30 days) |
| NOVOLOG U-100 VIAL INJECTION SOLUTION 100 UNIT/ML                                                                                            | 4         | ST; QL (60 ML per 30 days) |
| TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML                                                                           | 3         | QL (60 ML per 30 days)     |
| TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML                                                                               | 3         | QL (60 ML per 30 days)     |
| TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML                                                                | 3         | QL (60 ML per 30 days)     |
| TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML                                                                                                    | 3         | QL (60 ML per 30 days)     |
| ULTIGUARD SAFEPAK SYR/NEEDLE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 3         |                            |

| Drug Name                                                                                                                                                                                     | Drug Tier | Notes |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| VERIFINE INSULIN SYRINGE 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 3         |       |
| <b>Electrolytes / Minerals / Metals / Vitamins</b>                                                                                                                                            |           |       |
| ACTIVE FE ORAL TABLET 75-1.25 MG                                                                                                                                                              | 4         |       |
| ACTIVITE ORAL TABLET 1 MG                                                                                                                                                                     | 4         |       |
| ADENOCAINE INTRAVENOUS SOLUTION PREFILLED SYRINGE                                                                                                                                             | GM        |       |
| AMINO ACID INFUSION IN D10W INTRAVENOUS SOLUTION 2.5 %, 3 %, 4 %                                                                                                                              | GM        |       |
| aminoamrms oral capsule                                                                                                                                                                       | 2         |       |
| aminoreliefrms oral capsule                                                                                                                                                                   | 2         |       |
| AMINOSYN II INTRAVENOUS SOLUTION 10 %, 15 %                                                                                                                                                   | GM        |       |
| AMINOSYN-PF 7% INTRAVENOUS SOLUTION 7 %                                                                                                                                                       | GM        |       |
| AMINOSYN-PF INTRAVENOUS SOLUTION 10 %                                                                                                                                                         | GM        |       |
| AQUASOL A INTRAMUSCULAR SOLUTION 50000 UNIT/ML                                                                                                                                                | GM        |       |

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| Drug Name                                                                                           | Drug Tier | Notes |
|-----------------------------------------------------------------------------------------------------|-----------|-------|
| ARGININE HCL INJECTION SOLUTION 6 GM/30ML                                                           | GM        |       |
| ARGYLE STERILE SALINE IRRIGATION SOLUTION 0.9 %                                                     | 4         |       |
| argyle sterile water irrigation solution                                                            | 2         |       |
| ASCOR INTRAVENOUS SOLUTION 25000 MG/50ML                                                            | GM        |       |
| ASCORBIC ACID INTRAVENOUS SOLUTION 15000 MG/30ML                                                    | GM        |       |
| ATABEX OB ORAL TABLET 29-1 MG                                                                       | 4         |       |
| bp vit 3 oral capsule 1 mg                                                                          | 2         |       |
| CALCIFOL ORAL WAFER 1342-1.6 MG                                                                     | 4         |       |
| CALCIUM CHLORIDE SOLUTION 10 % INTRAVENOUS                                                          | GM        |       |
| calcium chloride solution 10 % intravenous                                                          | GM        |       |
| CALCIUM GLUCONATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1000 MG/10ML                               | GM        |       |
| calcium gluconate-nacl intravenous solution 1-0.675 gm/50ml-%, 1-0.8 gm/100ml-%, 2-0.675 gm/100ml-% | GM        |       |
| CARBAGLU ORAL TABLET SOLUBLE 200 MG                                                                 | 6         | PA    |
| CARDIOPLEGIA DEL NIDO FORMULA PERFUSION SOLUTION                                                    | GM        |       |

| Drug Name                                         | Drug Tier | Notes                 |
|---------------------------------------------------|-----------|-----------------------|
| CARDIOPLEGIA IND PLAS/HIK/LIDO PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA IND PLASMA-TROMET PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA INDUCTION HIGH K PERFUSION SOLUTION  | GM        |                       |
| CARDIOPLEGIA INDUCTION LOW DEX PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA INDUCTION NON-ENR PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA MAIN LOW DEXTROSE PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA MAIN LOW TROMETHA PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA MAIN PLASMA-TROME PERFUSION SOLUTION | GM        |                       |
| CARDIOPLEGIA MAINTENANCE PERFUSION SOLUTION       | GM        |                       |
| CARDIOPLEGIA REPERFUSATE 4:1 PERFUSION SOLUTION   | GM        |                       |
| cardioplegic perfusion solution                   | GM        |                       |
| CARDIOPLEGIC SOLN W/ LIDOCAINE PERFUSION SOLUTION | GM        |                       |
| carglumic acid oral tablet soluble 200 mg         | 5         | PA                    |
| CARNITOR INTRAVENOUS SOLUTION 200 MG/ML           | GM        |                       |
| CARNITOR ORAL SOLUTION 1 GM/10ML                  | 4         | Brand penalty applies |

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| Drug Name                                                 | Drug Tier | Notes                 |
|-----------------------------------------------------------|-----------|-----------------------|
| CARNITOR ORAL TABLET 330 MG                               | 4         | Brand penalty applies |
| CARNITOR SF ORAL SOLUTION 1 GM/10ML                       | 4         | Brand penalty applies |
| CENTRATEX ORAL CAPSULE 106-1 MG                           | 4         |                       |
| CHEMET ORAL CAPSULE 100 MG                                | 4         |                       |
| CHROMAGEN ORAL CAPSULE                                    | 4         |                       |
| chromic chloride intravenous solution 40 mcg/10ml         | GM        |                       |
| CITRANATAL MEDLEY ORAL CAPSULE 27-1-200 MG                | 4         |                       |
| CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION 2.75 %  | GM        |                       |
| CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 % | GM        |                       |
| CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 %  | GM        |                       |
| CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 %       | GM        |                       |
| CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 %       | GM        |                       |
| CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION 8 %       | GM        |                       |
| CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION 8 %       | GM        |                       |

| Drug Name                                               | Drug Tier | Notes |
|---------------------------------------------------------|-----------|-------|
| CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 % | GM        |       |
| CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 %  | GM        |       |
| CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 %       | GM        |       |
| CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 %       | GM        |       |
| CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION 6 %        | GM        |       |
| CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION 8 %       | GM        |       |
| CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION 8 %       | GM        |       |
| CLINISOL SF INTRAVENOUS SOLUTION 15 %                   | GM        |       |
| CLINOLIPID INTRAVENOUS EMULSION 20 %                    | GM        |       |
| COBALEFOL ORAL CAPSULE 1 MG                             | 4         |       |
| corvita 150 oral tablet 150-1.25 mg                     | 2         |       |
| CORVITE 150 ORAL TABLET 150-1.25 MG                     | 4         |       |
| cupric chloride intravenous solution 0.4 mg/ml          | GM        |       |
| CURITY STERILE SALINE IRRIGATION SOLUTION 0.9 %         | 4         |       |
| cyanocobalamin injection solution 1000 mcg/ml           | 2         |       |

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| Drug Name                                                 | Drug Tier | Notes | Drug Name                                                                                                                               | Drug Tier | Notes                 |
|-----------------------------------------------------------|-----------|-------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML             | GM        |       | DEXTROSE SOLUTION 250 MG/ML INTRAVENOUS                                                                                                 | GM        |                       |
| cyanocobalamin nasal solution 500 mcg/0.1ml               | 2         |       | dextrose solution 250 mg/ml intravenous                                                                                                 | GM        |                       |
| cytra k crystals oral packet 3300-1002 mg                 | 2         |       | DEXTROSE SOLUTION 50 % INTRAVENOUS                                                                                                      | GM        |                       |
| DAVIMET-M ORAL TABLET CHEWABLE                            | 4         |       | dextrose solution 50 % intravenous                                                                                                      | GM        |                       |
| DECARA ORAL CAPSULE 1.25 MG (50000 UT)                    | 4         |       | DEXTROSE SOLUTION 70 % INTRAVENOUS                                                                                                      | GM        |                       |
| deferasirox granules oral packet 180 mg, 360 mg, 90 mg    | 6         | PA    | dextrose solution 70 % intravenous                                                                                                      | GM        |                       |
| deferasirox oral packet 180 mg, 360 mg, 90 mg             | 6         | PA    | dextrose-nacl intravenous solution 5-0.9 %                                                                                              | GM        |                       |
| deferasirox oral tablet 180 mg, 360 mg, 90 mg             | 5         | PA    | dextrose-sodium chloride intravenous solution 10-0.2 %, 10-0.45 %, 2.5-0.45 %, 5-0.2 %, 5-0.225 %, 5-0.3 %, 5-0.33 %, 5-0.45 %, 5-0.9 % | GM        |                       |
| deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg    | 5         | PA    | DIALYVITE 3000 ORAL TABLET 3 MG                                                                                                         | 4         |                       |
| deferiprone oral tablet 1000 mg, 500 mg                   | 6         | PA    | DIALYVITE 5000 ORAL TABLET 5 MG                                                                                                         | 4         |                       |
| DEL NIDO CARDIOPLEGIA PERFUSION SOLUTION                  | GM        |       | DIALYVITE ORAL TABLET                                                                                                                   | 4         |                       |
| DERMACINRX DAVIMET ORAL TABLET CHEWABLE                   | 4         |       | DIALYVITE/ZINC ORAL TABLET                                                                                                              | 4         |                       |
| DEXIFOL ORAL TABLET 5 MG                                  | 4         |       | DODEX INJECTION SOLUTION 1000 MCG/ML                                                                                                    | 4         |                       |
| DEXTROSE 5%/ELECTROLYTE #48 INTRAVENOUS SOLUTION          | GM        |       | DRISDOL ORAL CAPSULE 1.25 MG (50000 UT)                                                                                                 | 4         | Brand penalty applies |
| dextrose in lactated ringers intravenous solution 5 %     | GM        |       | EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ                                                                                         | 4         |                       |
| dextrose intravenous solution 10 %, 20 %, 30 %, 40 %, 5 % | GM        |       | effer-k oral tablet effervescent 25 meq                                                                                                 | 2         |                       |

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| Drug Name                                         | Drug Tier | Notes |
|---------------------------------------------------|-----------|-------|
| ELITE-OB ORAL TABLET 50-1.25 MG                   | 4         |       |
| ELLIOTTS B INTRATHECAL SOLUTION                   | GM        |       |
| ergocalciferol oral capsule 1.25 mg (50000 ut)    | 2         |       |
| EXJADE ORAL TABLET SOLUBLE 125 MG, 250 MG, 500 MG | 6         | PA    |
| EXTRANEAL INTRAPERITONEAL SOLUTION 7.5 %          | 4         |       |
| FERAHEME INTRAVENOUS SOLUTION 510 MG/17ML         | GM        |       |
| FERIVA 21/7 ORAL TABLET 75-1 MG                   | 4         |       |
| FERRIPROX ORAL SOLUTION 100 MG/ML                 | 6         | PA    |
| FERRIPROX ORAL TABLET 1000 MG, 500 MG             | 6         | PA    |
| FERRIPROX TWICE-A-DAY ORAL TABLET 1000 MG         | 6         | PA    |
| FERRLECIT INTRAVENOUS SOLUTION 12.5 MG/ML         | GM        |       |
| ferumoxitol intravenous solution 510 mg/17ml      | GM        |       |
| FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML       | 4         |       |
| FLORIVA PLUS ORAL SOLUTION 0.25 MG/ML             | 4         |       |
| FOLACHEW ORAL TABLET CHEWABLE                     | 4         |       |
| folate oral tablet 400 mcg                        | PV        |       |

| Drug Name                                                   | Drug Tier | Notes |
|-------------------------------------------------------------|-----------|-------|
| FOLETRA ORAL CAPSULE 1 MG                                   | 4         |       |
| FOLGARD OS ORAL TABLET 500-1.1 MG                           | 4         |       |
| folic acid injection solution 5 mg/ml                       | GM        |       |
| folic acid oral tablet 1 mg                                 | 2         |       |
| folic acid oral tablet 400 mcg, 800 mcg                     | PV        |       |
| FOLIVANE-PLUS ORAL CAPSULE                                  | 4         |       |
| folplex 2.2 oral tablet 2.2-25-0.5 mg                       | 2         |       |
| ft folic acid oral tablet 400 mcg, 800 mcg                  | PV        |       |
| FUSION PLUS ORAL CAPSULE                                    | 4         |       |
| GALZIN ORAL CAPSULE 25 MG, 50 MG                            | 3         |       |
| glucose (dextrose) intravenous solution 50 %                | GM        |       |
| GLUTATHIONE INJECTION SOLUTION 200 MG/ML, 6 GM/30ML         | GM        |       |
| GLUTATHIONE INTRAVENOUS SOLUTION 6 GM/30ML                  | GM        |       |
| GLYCINE INJECTION SOLUTION 50 MG/ML                         | GM        |       |
| HEMOCYTE PLUS ORAL CAPSULE 106-1 MG                         | 4         |       |
| hydroxocobalamin acetate intramuscular solution 1000 mcg/ml | GM        |       |
| INFED INJECTION SOLUTION 50 MG/ML                           | GM        |       |
| INFUVITE ADULT INTRAVENOUS SOLUTION                         | GM        |       |

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| Drug Name                                                                               | Drug Tier | Notes |
|-----------------------------------------------------------------------------------------|-----------|-------|
| INFUVITE PEDIATRIC INTRAVENOUS SOLUTION                                                 | GM        |       |
| INJECTAFER INTRAVENOUS SOLUTION 100 MG/2ML, 1000 MG/20ML, 750 MG/15ML                   | GM        |       |
| INTEGRA PLUS ORAL CAPSULE                                                               | 4         |       |
| INTRALIPID INTRAVENOUS EMULSION 20 %, 30 %                                              | GM        |       |
| iodine strong oral solution 5 %                                                         | 2         |       |
| IONOSOL-MB IN D5W INTRAVENOUS SOLUTION                                                  | GM        |       |
| IRON FOLATE PLUS ORAL CAPSULE                                                           | 4         |       |
| iron sucrose intravenous solution 20 mg/ml                                              | GM        |       |
| ISOLYTE-P IN D5W INTRAVENOUS SOLUTION                                                   | GM        |       |
| ISOLYTE-S INTRAVENOUS SOLUTION                                                          | GM        |       |
| ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION                                                   | GM        |       |
| JADENU ORAL TABLET 180 MG, 360 MG, 90 MG                                                | 6         | PA    |
| JADENU SPRINKLE ORAL PACKET 180 MG, 360 MG, 90 MG                                       | 6         | PA    |
| JYNARQUE ORAL TABLET 15 MG, 30 MG                                                       | 6         | PA    |
| JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 30 & 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG | 6         | PA    |

| Drug Name                                                                                                                                                                                                      | Drug Tier | Notes |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| KABIVEN INTRAVENOUS EMULSION 3.3-10.8-3.9 %                                                                                                                                                                    | GM        |       |
| kcl (0.149%) in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%                                                                                                                                      | GM        |       |
| kcl (0.298%) in nacl intravenous solution 40-0.9 meq/l-%                                                                                                                                                       | GM        |       |
| KCL (IN NACL 0.9%) INTRAVENOUS SOLUTION 40 MEQ/500ML                                                                                                                                                           | GM        |       |
| kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.225 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-% | GM        |       |
| kcl-lactated ringers-d5w intravenous solution 20 meq/l                                                                                                                                                         | GM        |       |
| KCL-LIDOCAINE-NACL INTRAVENOUS SOLUTION 10-10 MEQ-MG /100ML                                                                                                                                                    | GM        |       |
| KIONEX COMBINATION SUSPENSION 15 GM/60ML                                                                                                                                                                       | 2         |       |
| klor-con 10 oral tablet extended release 10 meq                                                                                                                                                                | 2         |       |
| klor-con m10 oral tablet extended release 10 meq                                                                                                                                                               | 2         |       |
| klor-con m15 oral tablet extended release 15 meq                                                                                                                                                               | 2         |       |
| klor-con m20 oral tablet extended release 20 meq                                                                                                                                                               | 2         |       |

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|----------------------------------------------|-----------|-----------------------|
| klor-con oral packet 20 meq                  | 2         |                       |
| klor-con oral tablet extended release 8 meq  | 2         |                       |
| klor-con/ef oral tablet effervescent 25 meq  | 2         |                       |
| K-PHOS NO 2 ORAL TABLET 305-700 MG           | 4         |                       |
| K-PHOS ORAL TABLET 500 MG                    | 4         |                       |
| K-PHOS-NEUTRAL ORAL TABLET 155-852-130 MG    | 4         |                       |
| K-PRIME ORAL TABLET EFFERVESCENT 25 MEQ      | 4         |                       |
| K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ    | 4         | Brand penalty applies |
| lactated ringers intravenous solution        | GM        |                       |
| lactated ringers irrigation solution         | 2         |                       |
| LEVOCARNITINE INJECTION SOLUTION 500 MG/ML   | GM        |                       |
| levocarnitine intravenous solution 200 mg/ml | GM        |                       |
| levocarnitine oral solution 1 gm/10ml        | 2         |                       |
| levocarnitine oral tablet 330 mg             | 2         |                       |
| levocarnitine sf oral solution 1 gm/10ml     | 2         |                       |
| LIPO INTRAMUSCULAR SOLUTION 50-50-25 MG/ML   | GM        |                       |
| LIPO-C INTRAMUSCULAR SOLUTION                | GM        |                       |

| Drug Name                                                                                          | Drug Tier | Notes                      |
|----------------------------------------------------------------------------------------------------|-----------|----------------------------|
| LOKELMA ORAL PACKET 10 GM, 5 GM                                                                    | 6         | PA; QL (90 EA per 30 days) |
| LUMAVEX ORAL CAPSULE                                                                               | 4         |                            |
| LYSINE HCL INJECTION SOLUTION 100 MG/ML                                                            | GM        |                            |
| magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%                                       | GM        |                            |
| magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml | GM        |                            |
| MAGNESIUM SULFATE SOLUTION 50 % INJECTION                                                          | GM        |                            |
| magnesium sulfate solution 50 % injection                                                          | GM        |                            |
| MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION 2-0.9 GM/50ML-%                                        | GM        |                            |
| manganese chloride intravenous solution 0.1 mg/ml                                                  | GM        |                            |
| METHYLCOBALAMIN INJECTION SOLUTION 150 MG/30ML, 30 MG/30ML, 300 MG/30ML                            | GM        |                            |
| METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED 10000 MCG, 50000 MCG                              | GM        |                            |
| MIC-L-CARNITINE INJECTION SOLUTION 25-50-50-50 MG/ML                                               | GM        |                            |
| MICROPLEGIA MSA-MSG PERFUSION SOLUTION                                                             | GM        |                            |

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| Drug Name                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------|-----------|-----------------------|
| MI-VITE RX ORAL TABLET 1 MG                                    | 4         |                       |
| M-NATAL PLUS ORAL TABLET 27-1 MG                               | 4         | QL (1 EA per 1 day)   |
| MONOFERRIC INTRAVENOUS SOLUTION 1000 MG/10ML                   | GM        |                       |
| MULTIGEN FOLIC ORAL TABLET 70-150-2-1 MG                       | 4         |                       |
| multiple electro type 1 ph 5.5 intravenous solution            | GM        |                       |
| multiple electro type 1 ph 7.4 intravenous solution            | GM        |                       |
| multi-vitamin/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml     | 2         |                       |
| multivitamin/fluoride oral suspension 0.25 mg/ml               | 2         |                       |
| MULTRY'S INTRAVENOUS SOLUTION 60-3-6-1000 MCG/ML               | GM        |                       |
| MYNEPHRON ORAL CAPSULE 1 MG                                    | 4         |                       |
| na ferric gluc cplx in sucrose intravenous solution 12.5 mg/ml | GM        |                       |
| NASCOBAL NASAL SOLUTION 500 MCG/0.1ML                          | 3         | Brand penalty applies |
| NEONATAL COMPLETE ORAL TABLET 27-1 MG                          | 4         | QL (1 EA per 1 day)   |
| NEONATAL COMPLETE ORAL TABLET 29-1 MG                          | 4         |                       |
| NEONATAL PLUS ORAL TABLET 27-1 MG                              | 4         | QL (1 EA per 1 day)   |
| NEPHPLEX RX ORAL TABLET                                        | 4         |                       |
| NEPHRON FA ORAL TABLET                                         | 4         |                       |

| Drug Name                                            | Drug Tier | Notes               |
|------------------------------------------------------|-----------|---------------------|
| NESTABS ORAL TABLET 32-1 MG                          | 4         |                     |
| NICOMIDE ORAL TABLET 750-27-2-0.5 MG                 | 4         |                     |
| nicotinamide oral tablet 750-27-2-0.5 mg             | 2         |                     |
| NORMOSOL-M IN D5W INTRAVENOUS SOLUTION               | GM        |                     |
| NORMOSOL-R IN D5W INTRAVENOUS SOLUTION               | GM        |                     |
| NORMOSOL-R INTRAVENOUS SOLUTION                      | GM        |                     |
| NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION               | GM        |                     |
| NUTRILIPID INTRAVENOUS EMULSION 20 %                 | GM        |                     |
| NUTRIVIT ORAL LIQUID                                 | 4         |                     |
| OMEGAVEN INTRAVENOUS EMULSION 10 GM/100ML, 5 GM/50ML | 6         | Specialty Medical   |
| ONE VITE WOMENS PLUS ORAL TABLET 27-1 MG             | 4         | QL (1 EA per 1 day) |
| ORACIT ORAL SOLUTION 490-640 MG/5ML                  | 3         |                     |
| ORAL CITRATE ORAL SOLUTION 490-640 MG/5ML            | 3         |                     |
| PAXLYTE ORAL CAPSULE                                 | 4         |                     |
| PERIKABIVEN INTRAVENOUS EMULSION 2.4-6.8-3.5-0.5 %   | GM        |                     |

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| Drug Name                                                       | Drug Tier | Notes |
|-----------------------------------------------------------------|-----------|-------|
| PHOSPHA 250 NEUTRAL ORAL TABLET 155-852-130 MG                  | 4         |       |
| phosphorous oral tablet 155-852-130 mg                          | 2         |       |
| phospho-trin 250 neutral oral tablet 155-852-130 mg             | 2         |       |
| PHOSPHO-TRIN K500 ORAL TABLET 500 MG                            | 4         |       |
| PHOXILLUM B22K4/0 EXTRACORPOREAL SOLUTION 22-4-1 MEQ-MMOL/L     | 4         |       |
| PHOXILLUM BK4/2.5 EXTRACORPOREAL SOLUTION 32-4-2.5-1 MEQ-MMOL/L | GM        |       |
| PHYSIOLYTE IRRIGATION SOLUTION                                  | 4         |       |
| PHYSIOSOL IRRIGATION IRRIGATION SOLUTION                        | 4         |       |
| phytonadione injection solution 1 mg/0.5ml, 10 mg/ml            | GM        |       |
| phytonadione oral tablet 5 mg                                   | 2         |       |
| PLASMA-LYTE 148 INTRAVENOUS SOLUTION                            | GM        |       |
| PLASMA-LYTE A INTRAVENOUS SOLUTION                              | GM        |       |
| PLEGISOL PERFUSION SOLUTION                                     | GM        |       |
| PLENAMINE INTRAVENOUS SOLUTION 15 %                             | GM        |       |
| pnv 27-ca/fe/fa oral tablet 60-1 mg                             | 2         |       |

| Drug Name                                                                        | Drug Tier | Notes |
|----------------------------------------------------------------------------------|-----------|-------|
| pnv prenatal plus multivit+dha oral 27-1 & 312 mg                                | 2         |       |
| POLY-VI-FLOR ORAL SUSPENSION 0.25 MG/ML                                          | 4         |       |
| POLY-VI-FLOR ORAL TABLET CHEWABLE 0.5 MG                                         | 4         |       |
| POLY-VI-FLOR/IRON ORAL SUSPENSION 0.25-7 MG/ML                                   | 4         |       |
| POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE 0.5-10 MG                                 | 4         |       |
| pot & sod cit-cit ac oral solution 550-500-334 mg/5ml                            | 2         |       |
| potassium acetate solution 2 meq/ml intravenous                                  | GM        |       |
| POTASSIUM ACETATE SOLUTION 2 MEQ/ML INTRAVENOUS                                  | GM        |       |
| potassium chloride crys er oral tablet extended release 10 meq, 15 meq, 20 meq   | 2         |       |
| potassium chloride er oral capsule extended release 10 meq, 8 meq                | 2         |       |
| potassium chloride er oral tablet extended release 10 meq, 15 meq, 20 meq, 8 meq | 2         |       |
| POTASSIUM CHLORIDE IN NACL INTRAVENOUS SOLUTION 20 MEQ/250ML                     | GM        |       |

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| Drug Name                                                                                                            | Drug Tier | Notes |
|----------------------------------------------------------------------------------------------------------------------|-----------|-------|
| potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%                      | GM        |       |
| potassium chloride intravenous solution 10 meq/100ml, 10 meq/50ml, 2 meq/ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml | GM        |       |
| POTASSIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MEQ/50ML                                               | GM        |       |
| potassium chloride oral packet 20 meq                                                                                | 2         |       |
| potassium chloride oral solution 10 %, 20 meq/15ml (10%), 40 meq/15ml (20%)                                          | 2         |       |
| potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)                 | 2         |       |
| potassium citrate-citric acid oral solution 1100-334 mg/5ml                                                          | 2         |       |
| potassium cl in dextrose 5% intravenous solution 20 meq/l                                                            | GM        |       |
| potassium phosphates(71 meq k) intravenous solution 45 mmole/15ml                                                    | GM        |       |
| POTASSIUM PHOSPHATES-NACL INTRAVENOUS SOLUTION 15 MMOL/100ML, 15 MMOL/250ML, 30 MMOL/500ML                           | GM        |       |

| Drug Name                                                    | Drug Tier | Notes               |
|--------------------------------------------------------------|-----------|---------------------|
| PREMASOL INTRAVENOUS SOLUTION 10 %                           | GM        |                     |
| PRENAISSANCE ORAL CAPSULE 29-1.25-325 MG                     | 4         |                     |
| prenatal oral tablet 27-1 mg                                 | 2         | QL (1 EA per 1 day) |
| prenatal plus vitamin/mineral oral tablet 27-1 mg            | 2         | QL (1 EA per 1 day) |
| PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION 22-4 MEQ/L       | GM        |                     |
| PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION 32-2.5 MEQ/L     | GM        |                     |
| PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION 32-2 MEQ/L         | GM        |                     |
| PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION 32-2-3.5 MEQ/L   | GM        |                     |
| PRISMASOL BGK 4/0/1.2 EXTRACORPOREAL SOLUTION 32-4-1.2 MEQ/L | GM        |                     |
| PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION 32-4-2.5 MEQ/L   | GM        |                     |
| PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION 32-1.2 MEQ/L    | GM        |                     |
| PROSOL INTRAVENOUS SOLUTION 20 %                             | GM        |                     |

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| Drug Name                                                | Drug Tier | Notes | Drug Name                                                                        | Drug Tier | Notes |
|----------------------------------------------------------|-----------|-------|----------------------------------------------------------------------------------|-----------|-------|
| PYRIDOXAL-5 PHOSPHATE INJECTION SOLUTION 100 MG/ML       | GM        |       | sod citrate-citric acid oral solution 1.5-1 gm/15ml, 3-2 gm/30ml, 500-334 mg/5ml | 2         |       |
| pyridoxine hcl solution 100 mg/ml injection              | GM        |       | sodium acetate intravenous solution 2 meq/ml                                     | GM        |       |
| PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION              | GM        |       | sodium bicarbonate solution 8.4 % intravenous                                    | GM        |       |
| QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML    | 4         |       | SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS                                    | GM        |       |
| REFRESH AA 15 PKU ORAL LIQUID                            | 4         |       | SODIUM BICARBONATE-DEXTROSE INTRAVENOUS SOLUTION 150-5 MEQ/L-%                   | GM        |       |
| REFRESH AA 15 TYR ORAL LIQUID                            | 4         |       | sodium chloride (pf) injection solution 0.9 %                                    | GM        |       |
| RELNATE DHA ORAL CAPSULE 28-1-200 MG                     | 4         |       | SODIUM CHLORIDE INJECTION SOLUTION 0.9 %                                         | GM        |       |
| RENAL ORAL CAPSULE 1 MG                                  | 4         |       | sodium chloride injection solution 2.5 meq/ml                                    | GM        |       |
| RENATABS ORAL TABLET 1 MG                                | 4         |       | sodium chloride intravenous solution 0.45 %, 3 %, 5 %                            | GM        |       |
| RENATABS WITH IRON ORAL 1 & 100 MG                       | 4         |       | sodium chloride irrigation solution 0.9 %                                        | 2         |       |
| ringers intravenous solution                             | GM        |       | SODIUM CHLORIDE SOLUTION 0.9 % INTRAVENOUS                                       | 2         |       |
| ringers irrigation irrigation solution                   | 2         |       | sodium chloride solution 0.9 % intravenous                                       | 2         |       |
| SAMSCA ORAL TABLET 15 MG, 30 MG                          | 6         | PA    | sodium citrate-citric acid oral solution 3000-2004 mg/30ml                       | 2         |       |
| SELECT-OB ORAL TABLET CHEWABLE 29-1 MG                   | 4         |       | sodium fluoride oral solution 1.1 (0.5 f) mg/ml                                  | PV        |       |
| SELENIOS ACID INTRAVENOUS SOLUTION 12 MCG/2ML, 60 MCG/ML | GM        |       |                                                                                  |           |       |
| SMOFLIPID INTRAVENOUS EMULSION 20 %                      | GM        |       |                                                                                  |           |       |

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| Drug Name                                                                           | Drug Tier | Notes |
|-------------------------------------------------------------------------------------|-----------|-------|
| sodium fluoride oral tablet 1.1 (0.5 f) mg, 2.2 (1 f) mg                            | PV        |       |
| sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg | PV        |       |
| sodium polystyrene sulfonate oral powder                                            | 2         |       |
| SOLUVITA ORAL SOLUTION 0.5 MG/ML                                                    | 4         |       |
| SPS (SODIUM POLYSTYRENE SULF) COMBINATION SUSPENSION 15 GM/60ML                     | 2         |       |
| SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION 30 GM/120ML                         | 2         |       |
| sterile water for irrigation irrigation solution                                    | 2         |       |
| STROVITE FORTE ORAL SYRUP                                                           | 4         |       |
| SUPERVITE ORAL LIQUID                                                               | 4         |       |
| SYPRINE ORAL CAPSULE 250 MG                                                         | 6         | PA    |
| TALIVA ORAL CAPSULE 1 MG                                                            | 4         |       |
| TARON FORTE ORAL CAPSULE                                                            | 4         |       |
| TAURINE INJECTION SOLUTION 50 MG/ML                                                 | GM        |       |
| THAM INTRAVENOUS SOLUTION 30 MEQ/100ML                                              | GM        |       |
| thiamine hcl injection solution 100 mg/ml, 200 mg/2ml                               | GM        |       |

| Drug Name                                                                                | Drug Tier | Notes |
|------------------------------------------------------------------------------------------|-----------|-------|
| THIAMINE HCL-NACL INTRAVENOUS SOLUTION 500-0.9 MG/100ML-%                                | GM        |       |
| TIS-U-SOL IRRIGATION SOLUTION                                                            | 4         |       |
| TM-VITE RX ORAL TABLET 1 MG                                                              | 4         |       |
| tolvaptan oral tablet 15 mg, 30 mg                                                       | 5         | PA    |
| tolvaptan oral tablet therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg | 5         | PA    |
| TPN ELECTROLYTES INTRAVENOUS CONCENTRATE                                                 | GM        |       |
| TRALEMENT INTRAVENOUS SOLUTION 300-55-60-3000 MCG/ML                                     | GM        |       |
| TRAVASOL INTRAVENOUS SOLUTION 10 %                                                       | GM        |       |
| tricitrates oral solution 550-500-334 mg/5ml                                             | 2         |       |
| trientine hcl oral capsule 250 mg, 500 mg                                                | 6         | PA    |
| TRINATE ORAL TABLET                                                                      | 4         |       |
| triphrocaps oral capsule 1 mg                                                            | 2         |       |
| TRISODIUM CITRATE/CRRT EXTRACORPOREAL SOLUTION                                           | 4         |       |
| TRI-VI-FLOR ORAL SUSPENSION 0.25 MG/ML                                                   | 4         |       |
| TRI-VI-FLORO ORAL SUSPENSION 0.25 MG/ML, 0.5 MG/ML                                       | 4         |       |

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| Drug Name                                                 | Drug Tier | Notes                 |
|-----------------------------------------------------------|-----------|-----------------------|
| TRI-VITAMIN WITH FLUORIDE ORAL SUSPENSION 0.25 MG/ML      | 4         |                       |
| tri-vite/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml     | 2         |                       |
| tromethamine solution 30 meq/100ml intravenous            | GM        |                       |
| TROMETHAMINE SOLUTION 30 MEQ/100ML INTRAVENOUS            | GM        |                       |
| TRONVITE ORAL TABLET 1 MG                                 | 4         |                       |
| TROPHAMINE INTRAVENOUS SOLUTION 10 %                      | GM        |                       |
| TRUE FOLIC ACID ORAL TABLET 400 MCG                       | PV        |                       |
| TRUE VITAMIN D3 ORAL CAPSULE 1.25 MG (50000 UT)           | 4         |                       |
| UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1080 MG) | 4         | Brand penalty applies |
| UROCIT-K 15 ORAL TABLET EXTENDED RELEASE 15 MEQ (1620 MG) | 4         | Brand penalty applies |
| UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)    | 4         | Brand penalty applies |
| VELTASSA ORAL PACKET 1 GM, 16.8 GM, 25.2 GM, 8.4 GM       | 4         | PA                    |
| VENOFER INTRAVENOUS SOLUTION 20 MG/ML                     | GM        |                       |
| virt-caps oral capsule 1 mg                               | 2         |                       |

| Drug Name                                                              | Drug Tier | Notes |
|------------------------------------------------------------------------|-----------|-------|
| VITAL-D RX ORAL TABLET 1 MG                                            | 4         |       |
| VITALIPID N INFANT INTRAVENOUS EMULSION                                | GM        |       |
| VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE 30-0.6-0.4-200 MG            | 4         |       |
| VITAMEZ ORAL CAPSULE 1 MG                                              | 4         |       |
| vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit | 2         |       |
| vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml                     | GM        |       |
| VITAPEARL ORAL CAPSULE EXTENDED RELEASE 30-1.4-200 MG                  | 4         |       |
| VITASURE ORAL TABLET 1 MG                                              | 4         |       |
| VITLIPID N ADULT INTRAVENOUS EMULSION                                  | GM        |       |
| VITLIPID N INFANT INTRAVENOUS EMULSION                                 | GM        |       |
| water for irrigation, sterile irrigation solution                      | 2         |       |
| weekly-d oral capsule 1.25 mg (50000 ut)                               | 2         |       |
| WESCAP-C DHA ORAL CAPSULE 53.5-38-1 MG                                 | 4         |       |
| WESCAP-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG                           | 4         |       |
| wescaps oral capsule 1 mg                                              | 2         |       |

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| Drug Name                                                        | Drug Tier | Notes                     |
|------------------------------------------------------------------|-----------|---------------------------|
| WESNATAL DHA COMPLETE ORAL 29-1-200 & 200 MG                     | 4         |                           |
| WESNATE DHA ORAL CAPSULE 28-1-200 MG                             | 4         |                           |
| wes-phos 250 neutral oral tablet 155-852-130 mg                  | 2         |                           |
| WESTAB PLUS ORAL TABLET 27-1 MG                                  | 4         | QL (1 EA per 1 day)       |
| wheat germ oil oral oil                                          | 2         |                           |
| yl folic acid oral tablet 400 mcg                                | PV        |                           |
| zinc chloride intravenous solution 1 mg/ml                       | GM        |                           |
| zinc sulfate intravenous solution 3 mg/ml                        | GM        |                           |
| <b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b> |           |                           |
| ACIPHEX ORAL TABLET DELAYED RELEASE 20 MG                        | 4         | Brand penalty applies     |
| CARAFATE ORAL SUSPENSION 1 GM/10ML                               | 3         |                           |
| CARAFATE ORAL TABLET 1 GM                                        | 4         |                           |
| cimetidine hcl oral solution 300 mg/5ml                          | 2         |                           |
| CYTOTEC ORAL TABLET 100 MCG, 200 MCG                             | 4         | Brand penalty applies     |
| DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG               | 4         | PA; Brand penalty applies |
| dexlansoprazole oral capsule delayed release 30 mg, 60 mg        | 2         | PA                        |

| Drug Name                                                        | Drug Tier | Notes                   |
|------------------------------------------------------------------|-----------|-------------------------|
| esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg | 2         | QL (60 EA per 30 days)  |
| esomeprazole magnesium oral tablet delayed release 20 mg         | 2         | QL (120 EA per 30 days) |
| esomeprazole sodium intravenous solution reconstituted 40 mg     | GM        |                         |
| famotidine (pf) intravenous solution 20 mg/2ml                   | GM        |                         |
| famotidine intravenous solution 200 mg/20ml, 40 mg/4ml           | GM        |                         |
| famotidine oral suspension reconstituted 40 mg/5ml               | 2         |                         |
| famotidine oral tablet 20 mg, 40 mg                              | 2         |                         |
| famotidine premixed intravenous solution 20-0.9 mg/50ml-%        | GM        |                         |
| FIRST-LANSOPRAZOLE ORAL SUSPENSION 3 MG/ML                       | 4         |                         |
| FIRST-OMEPRAZOLE ORAL SUSPENSION 2 MG/ML                         | 4         |                         |
| FIRST-PANTOPRAZOLE ORAL SUSPENSION 4 MG/ML                       | 4         |                         |
| lansoprazole oral capsule delayed release 15 mg, 30 mg           | 2         |                         |
| misoprostol oral tablet 100 mcg                                  | 2         | PV*                     |
| misoprostol tablet 200 mcg oral                                  | 2         |                         |
| misoprostol tablet 200 mcg oral                                  | 2         | PV*                     |

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| Drug Name                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------|-----------|-----------------------|
| NEXIUM I.V. INTRAVENOUS SOLUTION RECONSTITUTED 40 MG         | GM        |                       |
| nizatidine oral capsule 150 mg, 300 mg                       | 2         |                       |
| omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg  | 2         |                       |
| pantoprazole sodium intravenous solution reconstituted 40 mg | GM        |                       |
| pantoprazole sodium oral packet 40 mg                        | 2         |                       |
| pantoprazole sodium oral tablet delayed release 20 mg, 40 mg | 2         |                       |
| PEPCID ORAL TABLET 20 MG, 40 MG                              | 4         | Brand penalty applies |
| PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG                  | 4         | Brand penalty applies |
| PRILOSEC ORAL PACKET 10 MG, 2.5 MG                           | 4         |                       |
| PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED 40 MG            | GM        |                       |
| PROTONIX ORAL PACKET 40 MG                                   | 4         | Brand penalty applies |
| PROTONIX ORAL TABLET DELAYED RELEASE 20 MG, 40 MG            | 4         | Brand penalty applies |
| RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE 10 MG               | 4         |                       |

| Drug Name                                                                          | Drug Tier | Notes                                             |
|------------------------------------------------------------------------------------|-----------|---------------------------------------------------|
| rabeprazole sodium oral tablet delayed release 20 mg                               | 2         |                                                   |
| sucralfate oral suspension 1 gm/10ml                                               | 2         |                                                   |
| sucralfate oral tablet 1 gm                                                        | 2         |                                                   |
| VOQUEZNA ORAL TABLET 10 MG, 20 MG                                                  | 4         | PA; QL (30 EA per 30 days)                        |
| <b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b> |           |                                                   |
| alosetron hcl oral tablet 0.5 mg, 1 mg                                             | 2         |                                                   |
| alvimopan oral capsule 12 mg                                                       | GM        |                                                   |
| AMITIZA ORAL CAPSULE 24 MCG, 8 MCG                                                 | 4         | ST; Brand penalty applies; QL (60 EA per 30 days) |
| amoxicill-clarithro-lansopraz oral therapy pack 500 & 500 & 30 mg                  | 2         |                                                   |
| ANASPAZ ORAL TABLET DISPERSIBLE 0.125 MG                                           | 4         |                                                   |
| ATROPINE SULFATE INJECTION SOLUTION PREFILLED SYRINGE 0.8 MG/2ML                   | GM        |                                                   |
| atropine sulfate intravenous solution 0.4 mg/ml, 1 mg/ml                           | GM        |                                                   |
| ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1.2 MG/3ML                 | GM        |                                                   |
| BACILLEX ORAL CAPSULE 250 MG                                                       | 4         |                                                   |

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| Drug Name                                                            | Drug Tier | Notes                         |
|----------------------------------------------------------------------|-----------|-------------------------------|
| belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg | 2         |                               |
| BENTYL INTRAMUSCULAR SOLUTION 10 MG/ML                               | GM        |                               |
| bis subcit-metronid-tetracyc oral capsule 140-125-125 mg             | 2         |                               |
| bismuth/metronidaz/tetra cyclin oral capsule 140-125-125 mg          | 2         |                               |
| CHENODAL ORAL TABLET 250 MG                                          | 6         | PA; QL (90 EA per 30 days)    |
| chlordiazepoxide-clidinium oral capsule 5-2.5 mg                     | 2         |                               |
| clearlax oral powder 17 gm/scoop                                     | 2         | PV*; QL (1 fill per 365 days) |
| CLENPIQ ORAL SOLUTION 10-3.5-12 MG-GM -GM/175ML                      | 4         |                               |
| constulose oral solution 10 gm/15ml                                  | 2         |                               |
| cromolyn sodium oral concentrate 100 mg/5ml                          | 2         |                               |
| CTEXLI ORAL TABLET 250 MG                                            | 6         | PA; QL (90 EA per 30 days)    |
| CUVPOSA ORAL SOLUTION 1 MG/5ML                                       | 4         | Brand penalty applies         |
| dicyclomine hcl intramuscular solution 10 mg/ml                      | GM        |                               |
| dicyclomine hcl oral capsule 10 mg                                   | 1         |                               |
| dicyclomine hcl oral solution 10 mg/5ml                              | 2         |                               |

| Drug Name                                                      | Drug Tier | Notes                         |
|----------------------------------------------------------------|-----------|-------------------------------|
| dicyclomine hcl oral tablet 20 mg                              | 1         |                               |
| diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml            | 2         |                               |
| diphenoxylate-atropine oral tablet 2.5-0.025 mg                | 2         |                               |
| DONNATAL ORAL ELIXIR 16.2 MG/5ML                               | 4         |                               |
| DONNATAL ORAL TABLET 16.2 MG                                   | 4         |                               |
| ENTEREG ORAL CAPSULE 12 MG                                     | GM        |                               |
| enulose oral solution 10 gm/15ml                               | 2         |                               |
| ft clearlax oral powder 17 gm/scoop                            | 2         | PV*; QL (1 fill per 365 days) |
| GASTROCROM ORAL CONCENTRATE 100 MG/5ML                         | 4         | Brand penalty applies         |
| GATTEX SUBCUTANEOUS KIT 5 MG                                   | 6         | PA                            |
| gavilax oral powder 17 gm/scoop                                | 2         | PV*; QL (1 fill per 365 days) |
| gavilyte-c oral solution reconstituted 240 gm                  | 2         | PV*; QL (1 fill per 365 days) |
| gavilyte-g oral solution reconstituted 236 gm                  | 2         | PV*; QL (1 fill per 365 days) |
| gavilyte-n with flavor pack oral solution reconstituted 420 gm | 2         | PV*; QL (1 fill per 365 days) |
| generlac oral solution 10 gm/15ml                              | 2         |                               |
| gentlelax oral powder 17 gm/scoop                              | 2         | PV*; QL (1 fill per 365 days) |

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| Drug Name                                                                    | Drug Tier | Notes                                           |
|------------------------------------------------------------------------------|-----------|-------------------------------------------------|
| glycolax oral powder 17 gm/scoop                                             | 2         | PV*; QL (1 fill per 365 days)                   |
| glycopyrrolate injection solution 0.2 mg/ml, 0.4 mg/2ml, 1 mg/5ml, 4 mg/20ml | GM        |                                                 |
| GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML, 1 MG/5ML     | GM        |                                                 |
| glycopyrrolate oral solution 1 mg/5ml                                        | 2         |                                                 |
| glycopyrrolate oral tablet 1 mg, 2 mg                                        | 2         |                                                 |
| glycopyrrolate pf +rfid injection solution prefilled syringe 0.4 mg/2ml      | GM        |                                                 |
| glycopyrrolate pf injection solution prefilled syringe 0.2 mg/ml, 0.4 mg/2ml | GM        |                                                 |
| GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML            | GM        |                                                 |
| GLYRX-PF INJECTION SOLUTION 0.2 MG/ML, 0.4 MG/2ML                            | GM        |                                                 |
| GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML, 1 MG/5ML           | GM        |                                                 |
| GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM                                  | 4         | Brand penalty applies; QL (1 fill per 365 days) |
| healthylax oral packet 17 gm                                                 | 2         | PV*; QL (1 fill per 365 days)                   |
| HELIDAC THERAPY ORAL                                                         | 4         |                                                 |

| Drug Name                                                            | Drug Tier | Notes |
|----------------------------------------------------------------------|-----------|-------|
| hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg | 2         |       |
| hyoscyamine sulfate oral elixir 0.125 mg/5ml                         | 2         |       |
| hyoscyamine sulfate oral solution 0.125 mg/ml                        | 2         |       |
| hyoscyamine sulfate oral tablet 0.125 mg                             | 2         |       |
| hyoscyamine sulfate oral tablet dispersible 0.125 mg                 | 2         |       |
| hyoscyamine sulfate sl sublingual tablet sublingual 0.125 mg         | 2         |       |
| hyoscyamine sulfate sublingual tablet sublingual 0.125 mg            | 2         |       |
| hyosyne oral elixir 0.125 mg/5ml                                     | 2         |       |
| hyosyne oral solution 0.125 mg/ml                                    | 2         |       |
| IBSRELA ORAL TABLET 50 MG                                            | 4         | PA    |
| KRISTALOSE ORAL PACKET 10 GM, 20 GM                                  | 4         |       |
| lactulose encephalopathy oral solution 10 gm/15ml                    | 2         |       |
| lactulose oral packet 10 gm, 20 gm                                   | 2         |       |
| lactulose oral solution 10 gm/15ml, 20 gm/30ml                       | 2         |       |
| LEVBIID ORAL TABLET EXTENDED RELEASE 12 HOUR 0.375 MG                | 4         |       |
| LEVSIN ORAL TABLET 0.125 MG                                          | 4         |       |
| LEVSIN/SL SUBLINGUAL TABLET SUBLINGUAL 0.125 MG                      | 4         |       |

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| Drug Name                                        | Drug Tier | Notes                                             |
|--------------------------------------------------|-----------|---------------------------------------------------|
| LIBRAX ORAL CAPSULE 5-2.5 MG                     | 4         | Brand penalty applies                             |
| LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG    | 3         | QL (30 EA per 30 days)                            |
| LOMOTIL ORAL TABLET 2.5-0.025 MG                 | 4         | Brand penalty applies                             |
| loperamide hcl oral capsule 2 mg                 | 2         |                                                   |
| LOTRONEX ORAL TABLET 0.5 MG, 1 MG                | 4         | Brand penalty applies                             |
| lubiprostone oral capsule 24 mcg, 8 mcg          | 2         | QL (60 EA per 30 days)                            |
| methscopolamine bromide oral tablet 2.5 mg, 5 mg | 2         |                                                   |
| MIRALAX MIX-IN PAX ORAL PACKET 17 GM             | 4         | PV*; QL (1 fill per 365 days)                     |
| MIRALAX ORAL POWDER 17 GM/SCOOP                  | 4         | PV*; QL (1 fill per 365 days)                     |
| mm clearlax oral powder 17 gm/scoop              | 2         | PV*; QL (1 fill per 365 days)                     |
| MOTEGRITY ORAL TABLET 1 MG, 2 MG                 | 4         | ST; Brand penalty applies; QL (30 EA per 30 days) |
| MOTOFEN ORAL TABLET 1-0.025 MG                   | 4         |                                                   |
| MOVANTIK ORAL TABLET 12.5 MG, 25 MG              | 4         | QL (30 EA per 30 days)                            |
| MOVIPREP ORAL SOLUTION RECONSTITUTED 100 GM      | 4         | Brand penalty applies                             |

| Drug Name                                                          | Drug Tier | Notes                         |
|--------------------------------------------------------------------|-----------|-------------------------------|
| MYTESI ORAL TABLET DELAYED RELEASE 125 MG                          | 4         | PA                            |
| na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml  | 2         |                               |
| NULEV ORAL TABLET DISPERSIBLE 0.125 MG                             | 4         |                               |
| OMECLAMOX-PAK ORAL 500-500-20 MG                                   | 4         |                               |
| opium oral tincture 10 mg/ml (1%)                                  | 2         |                               |
| OSCIMIN ORAL TABLET 0.125 MG                                       | 4         |                               |
| OSCIMIN SUBLINGUAL TABLET SUBLINGUAL 0.125 MG                      | 4         |                               |
| PAXOTIN ORAL CAPSULE                                               | 4         |                               |
| pb-hyoscy-atropine-scopolamine oral elixir 16.2 mg/5ml             | 2         |                               |
| pb-hyoscy-atropine-scopolamine oral tablet 16.2 mg                 | 2         |                               |
| peg 3350 oral packet 17 gm                                         | 2         | PV*; QL (1 fill per 365 days) |
| peg 3350 oral powder 17 gm/scoop                                   | 2         | PV*; QL (1 fill per 365 days) |
| peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm     | 2         | PV*; QL (1 fill per 365 days) |
| peg-3350/electrolytes oral solution reconstituted 236 gm           | 2         | PV*; QL (1 fill per 365 days) |
| peg-3350/electrolytes/ascorb at oral solution reconstituted 100 gm | 2         |                               |

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| Drug Name                                                                | Drug Tier | Notes                         |
|--------------------------------------------------------------------------|-----------|-------------------------------|
| peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted 100 gm          | 2         |                               |
| PEG-PREP ORAL KIT 5-210 MG-GM                                            | 4         |                               |
| PHENOHYTRO ORAL ELIXIR 16.2 MG/5ML                                       | 4         |                               |
| PHENOHYTRO ORAL TABLET 16.2 MG                                           | 4         |                               |
| polyethylene glycol 3350 oral packet 17 gm                               | 2         | PV*; QL (1 fill per 365 days) |
| polyethylene glycol 3350 oral powder 17 gm/scoop                         | 2         | PV*; QL (1 fill per 365 days) |
| prucalopride succinate oral tablet 1 mg, 2 mg                            | 2         | QL (30 EA per 30 days)        |
| PYLERA ORAL CAPSULE 140-125-125 MG                                       | 4         | Brand penalty applies         |
| REBYOTA RECTAL SUSPENSION 150 ML                                         | 6         | PA; Specialty Medical         |
| RELISTOR ORAL TABLET 150 MG                                              | 4         | PA                            |
| RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML                               | 4         | PA                            |
| RELISTOR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 12 MG/0.6ML, 8 MG/0.4ML | 4         | PA                            |
| REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG                               | 6         | PA; QL (30 EA per 30 days)    |
| ROBINUL ORAL TABLET 1 MG                                                 | 4         | Brand penalty applies         |

| Drug Name                                                     | Drug Tier | Notes                         |
|---------------------------------------------------------------|-----------|-------------------------------|
| ROBINUL-FORTE ORAL TABLET 2 MG                                | 4         | Brand penalty applies         |
| SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG | 6         | PA                            |
| smooth lax oral powder 17 gm/scoop                            | 2         | PV*; QL (1 fill per 365 days) |
| SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML    | 4         | Brand penalty applies         |
| SUTAB ORAL TABLET 1479-225-188 MG                             | 4         |                               |
| SYMPROIC ORAL TABLET 0.2 MG                                   | 4         | QL (30 EA per 30 days)        |
| true laxative oral powder 17 gm/scoop                         | 2         | PV*; QL (1 fill per 365 days) |
| TRULANCE ORAL TABLET 3 MG                                     | 4         | ST; QL (30 EA per 30 days)    |
| URSO 250 ORAL TABLET 250 MG                                   | 4         | Brand penalty applies         |
| URSO FORTE ORAL TABLET 500 MG                                 | 4         | Brand penalty applies         |
| ursodiol oral capsule 300 mg                                  | 2         |                               |
| ursodiol oral tablet 250 mg, 500 mg                           | 2         |                               |
| VIBERZI ORAL TABLET 100 MG, 75 MG                             | 5         | PA                            |
| VOQUEZNA DUAL PAK ORAL THERAPY PACK 500-20 MG                 | 4         | PA; QL (112 EA per 365 days)  |

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| Drug Name                                                                          | Drug Tier | Notes                        |
|------------------------------------------------------------------------------------|-----------|------------------------------|
| VOQUEZNA TRIPLE PAK ORAL THERAPY PACK 500-500-20 MG                                | 4         | PA; QL (112 EA per 365 days) |
| XERMELO ORAL TABLET 250 MG                                                         | 6         | PA; QL (90 EA per 30 days)   |
| ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED 8.8 MG                                | 6         | PA                           |
| <b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b> |           |                              |
| ADZYNMA INTRAVENOUS KIT 1500 UNIT, 500 UNIT                                        | 6         | PA; Specialty Medical        |
| ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML                                         | 6         | PA; Specialty Medical        |
| AMMONUL INTRAVENOUS SOLUTION 10-10 %                                               | GM        |                              |
| betaine oral powder                                                                | 2         |                              |
| BRINEURA KIT 2 X 150 MG/5ML                                                        | 6         | PA; Specialty Medical        |
| BUPHENYL ORAL POWDER 3 GM/TSP                                                      | 6         |                              |
| BUPHENYL ORAL TABLET 500 MG                                                        | 6         |                              |
| CASGEVY INTRAVENOUS SUSPENSION                                                     | 6         | PA; Specialty Medical        |
| CERDELGA ORAL CAPSULE 84 MG                                                        | 6         | PA                           |
| CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT                               | 6         | PA; Specialty Medical        |

| Drug Name                                                                                                                           | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| CHOLBAM ORAL CAPSULE 250 MG, 50 MG                                                                                                  | 6         | PA                          |
| CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT | 3         |                             |
| CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML, 20 MG/ML, 30 MG/ML                                                                         | 6         | PA; Specialty Medical       |
| CYSTADANE ORAL POWDER                                                                                                               | 4         | Brand penalty applies       |
| CYSTAGON ORAL CAPSULE 150 MG, 50 MG                                                                                                 | 4         |                             |
| DUVYZAT ORAL SUSPENSION 8.86 MG/ML                                                                                                  | 6         | PA; QL (280 ML per 30 days) |
| ELAPRASE INTRAVENOUS SOLUTION 6 MG/3ML                                                                                              | 6         | PA; Specialty Medical       |
| ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED 200 UNIT                                                                                 | 6         | PA; Specialty Medical       |
| ELFABRIO INTRAVENOUS SOLUTION 20 MG/10ML, 5 MG/2.5ML                                                                                | 6         | PA; Specialty Medical       |
| EVRYSDI ORAL SOLUTION RECONSTITUTED 0.75 MG/ML                                                                                      | 6         | PA; QL (200 ML per 30 days) |
| EVRYSDI ORAL TABLET 5 MG                                                                                                            | 6         | PA; QL (30 EA per 30 days)  |

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| Drug Name                                                | Drug Tier | Notes                 | Drug Name                                            | Drug Tier | Notes                      |
|----------------------------------------------------------|-----------|-----------------------|------------------------------------------------------|-----------|----------------------------|
| FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG | 6         | PA; Specialty Medical | MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED 11.3 MG  | 6         | PA                         |
| GALAFOLD ORAL CAPSULE 123 MG                             | 6         | PA                    | NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML               | 6         | PA; Specialty Medical      |
| glycerol phenylbutyrate oral liquid 1.1 gm/ml            | 6         | PA                    | NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 6         | PA; Specialty Medical      |
| IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML                  | 6         | PA                    | nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg     | 5         | PA                         |
| JAVYGTOR ORAL PACKET 100 MG, 500 MG                      | 6         | PA                    | NITYR ORAL TABLET 10 MG, 2 MG, 5 MG                  | 6         | PA                         |
| JAVYGTOR ORAL TABLET 100 MG                              | 6         | PA                    | NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED 9.5 MG    | 6         | PA; Specialty Medical      |
| KANUMA INTRAVENOUS SOLUTION 20 MG/10ML                   | 6         | PA; Specialty Medical | OCALIVA ORAL TABLET 10 MG, 5 MG                      | 6         | PA; QL (30 EA per 30 days) |
| KUVAN ORAL PACKET 100 MG, 500 MG                         | 6         | PA                    | OLPRUVA (2 GM DOSE) ORAL THERAPY PACK 2 GM           | 6         |                            |
| KUVAN ORAL TABLET 100 MG                                 | 6         | PA                    | OLPRUVA (3 GM DOSE) ORAL THERAPY PACK 3 GM           | 6         |                            |
| LAMZEDE INTRAVENOUS SOLUTION RECONSTITUTED 10 MG         | 6         | PA; Specialty Medical | OLPRUVA (4 GM DOSE) ORAL THERAPY PACK 2 & 2 GM       | 6         |                            |
| LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG        | 6         | PA; Specialty Medical | OLPRUVA (5 GM DOSE) ORAL THERAPY PACK 2 & 3 GM       | 6         |                            |
| MEPSEVII INTRAVENOUS SOLUTION 10 MG/5ML                  | 6         | PA; Specialty Medical | OLPRUVA (6 GM DOSE) ORAL THERAPY PACK 3 & 3 GM       | 6         |                            |
| miglustat oral capsule 100 mg                            | 6         | PA                    | OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK 3 & 3.67 GM | 6         |                            |

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| Drug Name                                                                                                                                                | Drug Tier | Notes                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| OPFOLDA ORAL CAPSULE 65 MG                                                                                                                               | 6         | PA; QL (120 EA per 30 days) |
| ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG                                                                                                            | 6         | PA                          |
| ORFADIN ORAL SUSPENSION 4 MG/ML                                                                                                                          | 6         | PA                          |
| PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML, 20 MG/ML                                                                     | 6         | PA                          |
| PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT | 4         |                             |
| PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000-57500 UNIT, 24000-86250 UNIT, 4000-14375 UNIT, 8000-28750 UNIT                                      | 4         |                             |
| PHEBURANE ORAL PELLET 483 MG/GM                                                                                                                          | 6         |                             |
| POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED 105 MG                                                                                                      | 6         | PA; Specialty Medical       |
| RAVICTI ORAL LIQUID 1.1 GM/ML                                                                                                                            | 6         | PA                          |
| REVCIVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5ML                                                                                                              | 6         | PA; Specialty Medical       |

| Drug Name                                                                       | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------|-----------|-----------------------|
| sapropterin dihydrochloride oral packet 100 mg, 500 mg                          | 6         | PA                    |
| sapropterin dihydrochloride oral tablet 100 mg                                  | 6         | PA                    |
| sod benz-sod phenylacet intravenous solution 10-10 %                            | GM        |                       |
| sodium phenylbutyrate oral powder 3 gm/tsp                                      | 6         |                       |
| sodium phenylbutyrate oral tablet 500 mg                                        | 6         |                       |
| STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45ML, 28 MG/0.7ML, 40 MG/ML, 80 MG/0.8ML | 6         | PA                    |
| SUCRAID ORAL SOLUTION 8500 UNIT/ML                                              | 6         | PA                    |
| VIMIZIM INTRAVENOUS SOLUTION 5 MG/5ML                                           | 6         | PA; Specialty Medical |
| VIOKACE ORAL TABLET 10440-39150 UNIT, 20880-78300 UNIT                          | 4         |                       |
| VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED 0.4 MG, 0.56 MG, 1.2 MG             | 6         | PA                    |
| VPRIV INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT                               | 6         | PA; Specialty Medical |
| XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED 20 MG                              | 6         | PA; Specialty Medical |

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| Drug Name                                                                                                                                                                                    | Drug Tier | Notes | Drug Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| XENPOZYME INTRAVENOUS SOLUTION RECONSTITUTED 4 MG                                                                                                                                            | 6         | PA    | ZOLGENSMA INTRAVENOUS KIT 10X8.3 ML, 11X8.3 ML, 12X8.3 ML, 13X8.3 ML, 14X8.3 ML, 1X5.5ML & 10X8.3ML, 1X5.5ML & 11X8.3ML, 1X5.5ML & 12X8.3ML, 1X5.5ML & 13X8.3ML, 1X5.5ML & 2X8.3ML, 1X5.5ML & 3X8.3ML, 1X5.5ML & 4X8.3ML, 1X5.5ML & 5X8.3ML, 1X5.5ML & 6X8.3ML, 1X5.5ML & 7X8.3ML, 1X5.5ML & 8X8.3ML, 1X5.5ML & 9X8.3ML, 2X5.5ML & 10X8.3ML, 2X5.5ML & 11X8.3ML, 2X5.5ML & 12X8.3ML, 2X5.5ML & 1X8.3ML, 2X5.5ML & 2X8.3ML, 2X5.5ML & 3X8.3ML, 2X5.5ML & 4X8.3ML, 2X5.5ML & 5X8.3ML, 2X5.5ML & 6X8.3ML, 2X5.5ML & 7X8.3ML, 2X5.5ML & 8X8.3ML, 2X5.5ML & 9X8.3ML, 2X8.3 ML, 3X8.3 ML, 4X8.3 ML, 5X8.3 ML, 6X8.3 ML, 7X8.3 ML, 8X8.3 ML, 9X8.3 ML | 6         | PA; Specialty Medical |
| XURIDEN ORAL PACKET 2 GM                                                                                                                                                                     | 6         | PA    | <b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |                       |
| yargesa oral capsule 100 mg                                                                                                                                                                  | 6         | PA    | acetic acid irrigation solution 0.25 %                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2         |                       |
| ZAVESCA ORAL CAPSULE 100 MG                                                                                                                                                                  | 6         | PA    | AURYXIA ORAL TABLET 1 GM 210 MG(FE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4         |                       |
| zelvysia oral packet 100 mg, 500 mg                                                                                                                                                          | 6         | PA    | bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 2         |                       |
| ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT | 3         |       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |           |                       |

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| Drug Name                                                                      | Drug Tier | Notes                                                                |
|--------------------------------------------------------------------------------|-----------|----------------------------------------------------------------------|
| BI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED 150-5 MG                         | GM        |                                                                      |
| calcium acetate (phos binder) oral capsule 667 mg                              | 2         |                                                                      |
| calcium acetate (phos binder) oral tablet 667 mg                               | 2         |                                                                      |
| calcium acetate oral tablet 667 mg                                             | 2         |                                                                      |
| CERVIDIL VAGINAL INSERT 10 MG                                                  | 4         |                                                                      |
| CIALIS ORAL TABLET 10 MG, 20 MG                                                | 4         | PA; Brand penalty applies; QL (4 EA per 30 days); AL (Min 18 Years)  |
| CIALIS ORAL TABLET 5 MG                                                        | 4         | PA; Brand penalty applies; QL (30 EA per 30 days); AL (Min 18 Years) |
| darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg | 2         |                                                                      |
| DEPEN TITRATABS ORAL TABLET 250 MG                                             | 5         |                                                                      |
| DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG                     | 4         | Brand penalty applies                                                |
| DETROL ORAL TABLET 1 MG, 2 MG                                                  | 4         | Brand penalty applies                                                |
| ELMIRON ORAL CAPSULE 100 MG                                                    | 4         |                                                                      |

| Drug Name                                                                | Drug Tier | Notes                      |
|--------------------------------------------------------------------------|-----------|----------------------------|
| FERRIC CITRATE ORAL TABLET 1 GM 210 MG(Fe)                               | 4         |                            |
| fesoterodine fumarate er oral tablet extended release 24 hour 4 mg, 8 mg | 2         |                            |
| FILSPARI ORAL TABLET 200 MG, 400 MG                                      | 6         | PA; QL (30 EA per 30 days) |
| flavoxate hcl oral tablet 100 mg                                         | 2         |                            |
| FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG                    | 4         | Brand penalty applies      |
| GELNIQUE TRANSDERMAL GEL 10 %                                            | 4         |                            |
| GEMTESA ORAL TABLET 75 MG                                                | 4         |                            |
| glycine irrigation solution 1.5 %                                        | 2         |                            |
| glycine urologic irrigation solution 1.5 %                               | 2         |                            |
| INTRAROSA VAGINAL INSERT 6.5 MG                                          | 4         |                            |
| lanthanum carbonate oral tablet chewable 1000 mg, 500 mg, 750 mg         | 2         |                            |
| LITHOSTAT ORAL TABLET 250 MG                                             | 4         |                            |
| MB CAPS ORAL CAPSULE 120 MG                                              | 4         |                            |
| me/naphos/mb/hyo1 oral tablet 81.6 mg                                    | 2         |                            |
| mirabegron er oral tablet extended release 24 hour 25 mg, 50 mg          | 2         |                            |

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| Drug Name                                                                      | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------|-----------|-----------------------|
| MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML                             | 3         |                       |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG                    | 3         | Brand penalty applies |
| OXLUMO SUBCUTANEOUS SOLUTION 94.5 MG/0.5ML                                     | 6         | PA; Specialty Medical |
| oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg | 2         |                       |
| oxybutynin chloride oral solution 5 mg/5ml                                     | 2         |                       |
| oxybutynin chloride oral tablet 2.5 mg, 5 mg                                   | 2         |                       |
| penicillamine oral tablet 250 mg                                               | 5         |                       |
| phenazo oral tablet 200 mg                                                     | 2         |                       |
| phenazopyridine hcl oral tablet 100 mg, 200 mg                                 | 2         |                       |
| PHENYLEPHRINE HCL INTRACAVERNOSAL SOLUTION 2 MG/2ML                            | GM        |                       |
| PREPIDIL VAGINAL GEL 0.5 MG/3GM                                                | 4         |                       |
| PYRIDIUM ORAL TABLET 100 MG, 200 MG                                            | 4         |                       |
| QUAD-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED 150-10-0.1-1 MG                | GM        |                       |
| RENACIDIN IRRIGATION SOLUTION                                                  | 4         |                       |

| Drug Name                                                                 | Drug Tier | Notes                                        |
|---------------------------------------------------------------------------|-----------|----------------------------------------------|
| RENVELA ORAL PACKET 0.8 GM, 2.4 GM                                        | 4         | Brand penalty applies                        |
| RENVELA ORAL TABLET 800 MG                                                | 4         | Brand penalty applies                        |
| RIMSO-50 INTRAVESICAL SOLUTION 50 %                                       | GM        |                                              |
| sevelamer carbonate oral packet 0.8 gm, 2.4 gm                            | 2         |                                              |
| sevelamer carbonate oral tablet 800 mg                                    | 2         |                                              |
| sevelamer hcl oral tablet 400 mg, 800 mg                                  | 2         |                                              |
| sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg                       | 2         | PA; QL (4 EA per 30 days)                    |
| solifenacin succinate oral tablet 10 mg, 5 mg                             | 2         |                                              |
| SUPER BI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED 150-10 MG             | GM        |                                              |
| SUPER QUAD-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED 150-20-0.2-2 MG     | GM        |                                              |
| SUPER TRI-MIX INTRACAVERNOSAL SOLUTION RECONSTITUTED 150-10-100 MG-MG-MCG | GM        |                                              |
| tadalafil oral tablet 10 mg, 20 mg                                        | 2         | PA; QL (4 EA per 30 days); AL (Min 18 Years) |

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| Drug Name                                                                | Drug Tier | Notes                                         |
|--------------------------------------------------------------------------|-----------|-----------------------------------------------|
| tadalafil oral tablet 2.5 mg, 5 mg                                       | 2         | PA; QL (30 EA per 30 days); AL (Min 18 Years) |
| THIOLA EC ORAL TABLET DELAYED RELEASE 100 MG, 300 MG                     | 4         | PA; Brand penalty applies                     |
| THIOLA ORAL TABLET 100 MG                                                | 4         | PA; Brand penalty applies                     |
| tiopronin oral tablet 100 mg                                             | 2         | PA                                            |
| tiopronin oral tablet delayed release 100 mg, 300 mg                     | 2         | PA                                            |
| tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg | 2         |                                               |
| tolterodine tartrate oral tablet 1 mg, 2 mg                              | 2         |                                               |
| TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG                   | 4         | Brand penalty applies                         |
| tropium chloride er oral capsule extended release 24 hour 60 mg          | 2         |                                               |
| tropium chloride oral tablet 20 mg                                       | 2         |                                               |
| URELLE ORAL TABLET 81 MG                                                 | 4         |                                               |
| uretron d/s oral tablet 81.6 mg                                          | 2         |                                               |
| URIBEL ORAL CAPSULE 118 MG                                               | 4         |                                               |
| URIBEL ORAL TABLET 81.6 MG                                               | 4         |                                               |
| URIMAR-T ORAL CAPSULE 120 MG                                             | 4         |                                               |

| Drug Name                                                   | Drug Tier | Notes                                            |
|-------------------------------------------------------------|-----------|--------------------------------------------------|
| URIMAR-T ORAL TABLET 120 MG                                 | 4         |                                                  |
| URNEVA ORAL CAPSULE 120 MG                                  | 4         |                                                  |
| URO-458 ORAL TABLET 81 MG                                   | 4         |                                                  |
| UROGESIC-BLUE ORAL TABLET 81.6 MG                           | 4         |                                                  |
| URO-MP ORAL CAPSULE 118 MG                                  | 4         |                                                  |
| URO-SP ORAL CAPSULE 118 MG                                  | 4         |                                                  |
| VELPHORO ORAL TABLET CHEWABLE 500 MG                        | 6         |                                                  |
| VENXXIVA ORAL TABLET DELAYED RELEASE 100 MG, 300 MG         | 4         | PA; Brand penalty applies                        |
| VESICARE ORAL TABLET 10 MG, 5 MG                            | 4         | Brand penalty applies                            |
| VIAGRA ORAL TABLET 100 MG, 25 MG, 50 MG                     | 4         | PA; Brand penalty applies; QL (4 EA per 30 days) |
| VILAMIT MB ORAL CAPSULE 118 MG                              | 4         |                                                  |
| VILEVEV MB ORAL TABLET 81 MG                                | 4         |                                                  |
| <b>Genitourinary Agents - Drugs for Prostate Conditions</b> |           |                                                  |
| alfuzosin hcl er oral tablet extended release 24 hour 10 mg | 2         |                                                  |
| AVODART ORAL CAPSULE 0.5 MG                                 | 4         | Brand penalty applies                            |

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| Drug Name                                                  | Drug Tier | Notes                       |
|------------------------------------------------------------|-----------|-----------------------------|
| CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG | 3         |                             |
| dutasteride oral capsule 0.5 mg                            | 2         |                             |
| dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg         | 2         |                             |
| finasteride oral tablet 5 mg                               | 2         |                             |
| FLOMAX ORAL CAPSULE 0.4 MG                                 | 4         | Brand penalty applies       |
| JALYN ORAL CAPSULE 0.5-0.4 MG                              | 4         | Brand penalty applies       |
| PROSCAR ORAL TABLET 5 MG                                   | 4         | Brand penalty applies       |
| RAPAFLO ORAL CAPSULE 4 MG, 8 MG                            | 4         | Brand penalty applies       |
| silodosin oral capsule 4 mg, 8 mg                          | 2         |                             |
| tamsulosin hcl oral capsule 0.4 mg                         | 2         |                             |
| terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg         | 1         |                             |
| UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG       | 4         | Brand penalty applies       |
| <b>Hormonal Agents - Adrenal</b>                           |           |                             |
| AGAMREE ORAL SUSPENSION 40 MG/ML                           | 6         | PA; QL (300 ML per 30 days) |
| BETAMETHASONE COMBO INJECTION SUSPENSION 6 (3-3) MG/ML     | GM        |                             |

| Drug Name                                                                               | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------|-----------|-----------------------|
| BETAMETHASONE SOD PHOS & ACET SUSPENSION 6 (3-3) MG/ML INJECTION                        | GM        |                       |
| betamethasone sod phos & acet suspension 6 (3-3) mg/ml injection                        | GM        |                       |
| BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION 12 MG/2ML, 6 MG/ML                    | GM        |                       |
| CELESTONE SOLUSPAN INJECTION SUSPENSION 6 (3-3) MG/ML                                   | GM        |                       |
| CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG                                                   | 4         | Brand penalty applies |
| CORTISONE ACETATE ORAL TABLET 25 MG                                                     | 4         |                       |
| deflazacort oral suspension 22.75 mg/ml                                                 | 6         | PA                    |
| deflazacort oral tablet 18 mg, 30 mg, 36 mg, 6 mg                                       | 6         | PA                    |
| DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML, 40 MG/ML, 80 MG/ML                           | GM        |                       |
| dexameth sod phos (pf) +rfd injection solution prefilled syringe 10 mg/ml               | GM        |                       |
| DEXAMETH SOD PHOS-BUPIV-EPIN INJECTION SOLUTION PREFILLED SYRINGE 0.01-0.375 %-1:200000 | GM        |                       |
| dexamethasone intensol oral concentrate 1 mg/ml                                         | 2         |                       |
| dexamethasone oral elixir 0.5 mg/5ml                                                    | 2         |                       |

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| Drug Name                                                                             | Drug Tier | Notes |
|---------------------------------------------------------------------------------------|-----------|-------|
| dexamethasone oral solution 0.5 mg/5ml                                                | 2         |       |
| dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg             | 1         |       |
| dexamethasone oral tablet therapy pack 1.5 mg (21), 1.5 mg (35), 1.5 mg (51)          | 2         |       |
| dexamethasone sod phos (pf) injection solution prefilled syringe 10 mg/ml             | GM        |       |
| dexamethasone sod phos +rfid injection solution prefilled syringe 4 mg/ml             | GM        |       |
| DEXAMETHASONE SOD PHOS-BUPIV INJECTION SOLUTION PREFILLED SYRINGE 0.01-0.375 %        | GM        |       |
| DEXAMETHASONE SOD PHOS-NACL INTRAVENOUS SOLUTION 6-0.9 MG/25ML-%                      | GM        |       |
| dexamethasone sod phosphate pf injection solution 10 mg/ml                            | GM        |       |
| dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml | GM        |       |
| dexamethasone sodium phosphate injection solution prefilled syringe 4 mg/ml           | GM        |       |
| DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION                            | GM        |       |

| Drug Name                                                           | Drug Tier | Notes |
|---------------------------------------------------------------------|-----------|-------|
| dexamethasone sodium phosphate solution 10 mg/ml injection          | GM        |       |
| DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION           | GM        |       |
| dexamethasone sodium phosphate solution 4 mg/ml injection           | GM        |       |
| DEXONTO 0.4% IONTOPHORESIS SOLUTION 20 MG/5ML                       | GM        |       |
| EMFLAZA ORAL SUSPENSION 22.75 MG/ML                                 | 6         | PA    |
| EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG                       | 6         | PA    |
| fludrocortisone acetate oral tablet 0.1 mg                          | 2         |       |
| HEXATRIONE INTRA-ARTICULAR SUSPENSION 20 MG/ML                      | GM        |       |
| HIDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)                    | 4         |       |
| hydrocortisone oral tablet 10 mg, 20 mg, 5 mg                       | 2         |       |
| hydrocortisone sod suc (pf) injection solution reconstituted 100 mg | GM        |       |
| IONTOSONE 0.4% IONTOPHORESIS SOLUTION 20 MG/5ML                     | GM        |       |
| jaythari oral tablet 18 mg, 30 mg, 36 mg, 6 mg                      | 6         | PA    |
| KENALOG-10 INJECTION SUSPENSION 10 MG/ML                            | GM        |       |

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| Drug Name                                                 | Drug Tier | Notes                 | Drug Name                                                                                        | Drug Tier | Notes                 |
|-----------------------------------------------------------|-----------|-----------------------|--------------------------------------------------------------------------------------------------|-----------|-----------------------|
| KENALOG-40 INJECTION SUSPENSION 40 MG/ML                  | GM        |                       | methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg   | GM        |                       |
| KENALOG-80 INJECTION SUSPENSION 80 MG/ML                  | GM        |                       | METHYLPREDNISOLON E-BUPIVACAINE INJECTION SUSPENSION 40-5 MG/ML, 80-5 MG/ML                      | GM        |                       |
| LIDOCIDEX I INJECTION SOLUTION 5-10 MG/1.5ML              | GM        |                       | ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 30 MG                                          | 4         | Brand penalty applies |
| MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG                      | 4         | Brand penalty applies | PEDIAPRED ORAL SOLUTION 5 MG/5ML                                                                 | 4         | Brand penalty applies |
| MEDROL ORAL TABLET 2 MG                                   | 4         |                       | prednisolone oral solution 15 mg/5ml                                                             | 2         |                       |
| MEDROL ORAL TABLET THERAPY PACK 4 MG                      | 4         | Brand penalty applies | prednisolone oral tablet 5 mg                                                                    | 2         |                       |
| METHYLPREDNISOLON E ACETATE INJECTION SUSPENSION 50 MG/ML | GM        |                       | prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 5 mg/5ml | 2         |                       |
| methylprednisolone acetate suspension 40 mg/ml injection  | GM        |                       | prednisolone sodium phosphate oral tablet dispersible 10 mg, 15 mg, 30 mg                        | 2         |                       |
| METHYLPREDNISOLON E ACETATE SUSPENSION 40 MG/ML INJECTION | GM        |                       | prednisone intensol oral concentrate 5 mg/ml                                                     | 2         |                       |
| methylprednisolone acetate suspension 80 mg/ml injection  | GM        |                       | prednisone oral solution 5 mg/5ml                                                                | 2         |                       |
| METHYLPREDNISOLON E ACETATE SUSPENSION 80 MG/ML INJECTION | GM        |                       | prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg                                   | 1         |                       |
| methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg   | 2         |                       | prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)                 | 2         |                       |
| methylprednisolone oral tablet therapy pack 4 mg          | 2         |                       | pyquvi oral suspension 22.75 mg/ml                                                               | 6         | PA                    |

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| Drug Name                                                                        | Drug Tier | Notes |
|----------------------------------------------------------------------------------|-----------|-------|
| SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG     | GM        |       |
| SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 1000 MG, 125 MG, 40 MG, 500 MG | GM        |       |
| SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG, 2 GM, 500 MG               | GM        |       |
| TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG, 1.5 MG (21)                      | 4         |       |
| triamcinolone acetonide injection suspension 10 mg/ml                            | GM        |       |
| TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 80 MG/ML                            | GM        |       |
| triamcinolone acetonide suspension 40 mg/ml injection                            | GM        |       |
| TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION                            | GM        |       |
| TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION 40-5 MG/ML                        | GM        |       |
| ZILRETTA INTRA-ARTICULAR SUSPENSION RECONSTITUTED ER 32 MG                       | GM        |       |

| Drug Name                                                          | Drug Tier | Notes                          |
|--------------------------------------------------------------------|-----------|--------------------------------|
| <b>Hormonal Agents - Men's Health</b>                              |           |                                |
| ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)                 | 4         | PA; Brand penalty applies; GD* |
| danazol oral capsule 100 mg, 200 mg, 50 mg                         | 2         |                                |
| DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML, 200 MG/ML      | 4         | Brand penalty applies; GD*     |
| FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)                            | 4         | PA; Brand penalty applies; GD* |
| JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG                        | 4         | PA; GD*                        |
| KYZATREX ORAL CAPSULE 100 MG, 150 MG, 200 MG                       | 4         | PA; GD*                        |
| METHITEST ORAL TABLET 10 MG                                        | 4         | GD*                            |
| methyltestosterone oral capsule 10 mg                              | 2         | GD*                            |
| NATESTO NASAL GEL 5.5 MG/ACT                                       | 4         | PA; GD*                        |
| TESTIM TRANSDERMAL GEL 50 MG/5GM (1%)                              | 4         | PA; Brand penalty applies; GD* |
| TESTONE CIK INTRAMUSCULAR KIT 200 MG/ML                            | 4         | GD*                            |
| TESTOPEL IMPLANT PELLETT 75 MG                                     | GM        | PA; GD*                        |
| TESTOSTERONE CYPIONATE INJECTION SOLUTION 200 MG/ML                | 4         | GD*                            |
| testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml | 2         | GD*                            |

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| Drug Name                                                                                                                                                                     | Drug Tier | Notes                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------------|
| testosterone enanthate intramuscular solution 200 mg/ml                                                                                                                       | 2         | GD*                            |
| testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%) | 2         | PA; GD*                        |
| testosterone transdermal solution 30 mg/act                                                                                                                                   | 2         | PA; GD*                        |
| TLANDO ORAL CAPSULE 112.5 MG                                                                                                                                                  | 4         | PA; GD*                        |
| UNDECATREX ORAL CAPSULE 200 MG                                                                                                                                                | 4         | PA; GD*                        |
| VOGELXO PUMP TRANSDERMAL GEL 12.5 MG/ACT (1%)                                                                                                                                 | 4         | PA; Brand penalty applies; GD* |
| VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)                                                                                                                                        | 4         | PA; Brand penalty applies; GD* |
| <b>Hormonal Agents - Pituitary</b>                                                                                                                                            |           |                                |
| ACTHAR GEL SUBCUTANEOUS PEN-INJECTOR 40 UNIT/0.5ML, 80 UNIT/ML                                                                                                                | 6         | PA                             |
| ACTHAR INJECTION GEL 80 UNIT/ML                                                                                                                                               | 6         | PA                             |
| BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 2500 MCG/ML                                                                                                                   | 6         | PA                             |
| cabergoline oral tablet 0.5 mg                                                                                                                                                | 2         |                                |

| Drug Name                                                                   | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------|-----------|-----------------------|
| carboprost tromethamine intramuscular solution 250 mcg/ml                   | GM        |                       |
| carboprost tromethamine intramuscular solution prefilled syringe 250 mcg/ml | GM        |                       |
| cetrorelix acetate subcutaneous kit 0.25 mg                                 | 6         | PA                    |
| CETROTIDE SUBCUTANEOUS KIT 0.25 MG                                          | 6         | PA                    |
| CLOMID ORAL TABLET 50 MG                                                    | 4         |                       |
| clomiphene citrate oral tablet 50 mg                                        | 2         |                       |
| CORTROPHIN GEL SUBCUTANEOUS PREFILLED SYRINGE 40 UNIT/0.5ML, 80 UNIT/ML     | 6         | PA                    |
| CORTROPHIN INJECTION GEL 80 UNIT/ML                                         | 6         | PA                    |
| DDAVP INJECTION SOLUTION 4 MCG/ML                                           | GM        |                       |
| DDAVP ORAL TABLET 0.1 MG, 0.2 MG                                            | 4         | Brand penalty applies |
| DDAVP PF INJECTION SOLUTION 4 MCG/ML                                        | GM        |                       |
| desmopressin ace spray refrig nasal solution 0.01 %                         | 2         |                       |
| desmopressin acetate injection solution 4 mcg/ml                            | GM        |                       |
| DESMOPRESSIN ACETATE NASAL SOLUTION 1.5 MG/ML                               | 3         |                       |
| desmopressin acetate oral tablet 0.1 mg, 0.2 mg                             | 2         |                       |

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| Drug Name                                                               | Drug Tier | Notes                      | Drug Name                                                                                                                     | Drug Tier | Notes                      |
|-------------------------------------------------------------------------|-----------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| desmopressin acetate pf injection solution 4 mcg/ml                     | GM        |                            | GENOTROPIN MINIQUEL SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG | 6         | PA                         |
| desmopressin acetate spray nasal solution 0.01 %                        | 2         |                            | GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG                                                                                 | 6         | PA                         |
| EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED 2 MG                     | 6         | PA                         | HEMABATE INTRAMUSCULAR SOLUTION 250 MCG/ML                                                                                    | GM        |                            |
| EGRIFTA WR SUBCUTANEOUS KIT 11.6 MG                                     | 6         | PA                         | HUMATROPE INJECTION CARTRIDGE 12 MG, 24 MG, 6 MG                                                                              | 6         | PA                         |
| ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG                  | 6         | PA; Specialty Medical; GD* | INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML                                                                                      | 6         | PA                         |
| FENSOLVI (6 MONTH) SUBCUTANEOUS KIT 45 MG                               | 6         | PA; Specialty Medical      | ISTURISA ORAL TABLET 1 MG, 5 MG                                                                                               | 6         | PA                         |
| FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL  | 6         | PA; Specialty Medical      | lanreotide acetate subcutaneous solution 120 mg/0.5ml                                                                         | 5         | PA; Specialty Medical      |
| FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG                      | 6         | PA; Specialty Medical      | LEUPROLIDE ACETATE (3 MONTH) INTRAMUSCULAR INJECTABLE 22.5 MG                                                                 | 6         | PA; Specialty Medical; GD* |
| FYREMADEL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MCG/0.5ML         | 6         | PA                         | leuprolide acetate injection kit 1 mg/0.2ml                                                                                   | 6         | PA; GD*                    |
| ganirelix acetate subcutaneous solution prefilled syringe 250 mcg/0.5ml | 6         | PA                         | LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION 25-5 MG/ML                                                              | GM        |                            |
|                                                                         |           |                            | LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG, 7.5 MG                                                                      | 6         | PA; Specialty Medical; GD* |

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| Drug Name                                                                         | Drug Tier | Notes                               | Drug Name                                                                                                                    | Drug Tier | Notes                       |
|-----------------------------------------------------------------------------------|-----------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| LUPRON DEPOT (3-MONTH)<br>INTRAMUSCULAR KIT<br>11.25 MG, 22.5 MG                  | 6         | PA;<br>Specialty<br>Medical;<br>GD* | NORDITROPIN<br>FLEXPRO<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 10<br>MG/1.5ML, 15<br>MG/1.5ML, 30 MG/3ML,<br>5 MG/1.5ML | 5         | PA                          |
| LUPRON DEPOT (4-MONTH)<br>INTRAMUSCULAR KIT<br>30MG<br>INTRAMUSCULAR KIT<br>30 MG | 6         | PA;<br>Specialty<br>Medical;<br>GD* | NUTROPIN AQ NUSPIN<br>10 SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 10 MG/2ML                                                 | 6         | PA                          |
| LUPRON DEPOT (6-MONTH)<br>INTRAMUSCULAR KIT<br>45MG<br>INTRAMUSCULAR KIT<br>45 MG | 6         | PA;<br>Specialty<br>Medical;<br>GD* | NUTROPIN AQ NUSPIN<br>20 SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 20 MG/2ML                                                 | 6         | PA                          |
| LUPRON DEPOT-PED<br>(1-MONTH)<br>INTRAMUSCULAR KIT<br>11.25 MG, 15 MG, 7.5<br>MG  | 6         | PA;<br>Specialty<br>Medical         | NUTROPIN AQ NUSPIN<br>5 SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 5 MG/2ML                                                   | 6         | PA                          |
| LUPRON DEPOT-PED<br>(3-MONTH)<br>INTRAMUSCULAR KIT<br>11.25 MG, 30 MG             | 6         | PA;<br>Specialty<br>Medical         | octreotide acetate<br>injection solution 100<br>mcg/ml, 1000 mcg/ml,<br>200 mcg/ml, 50 mcg/ml,<br>500 mcg/ml                 | 5         | PA                          |
| LUPRON DEPOT-PED<br>(6-MONTH)<br>INTRAMUSCULAR KIT<br>45 MG                       | 6         | PA;<br>Specialty<br>Medical         | octreotide acetate<br>intramuscular kit 10 mg,<br>20 mg, 30 mg                                                               | 6         | PA;<br>Specialty<br>Medical |
| LUTRATE DEPOT<br>INTRAMUSCULAR<br>INJECTABLE 22.5 MG                              | 6         | PA;<br>Specialty<br>Medical;<br>GD* | octreotide acetate<br>subcutaneous solution<br>prefilled syringe 100<br>mcg/ml, 50 mcg/ml, 500<br>mcg/ml                     | 5         | PA                          |
| milophene oral tablet 50<br>mg                                                    | 2         |                                     | OMNITROPE<br>SUBCUTANEOUS<br>SOLUTION CARTRIDGE<br>10 MG/1.5ML, 5<br>MG/1.5ML                                                | 5         | PA                          |
| NGENLA<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 24<br>MG/1.2ML, 60 MG/1.2ML   | 6         | PA                                  | OMNITROPE<br>SUBCUTANEOUS<br>SOLUTION<br>RECONSTITUTED 5.8<br>MG                                                             | 5         | PA                          |

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| Drug Name                                                                                           | Drug Tier | Notes                       | Drug Name                                                                                                                                    | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------|-----------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| ORILISSA ORAL TABLET 150 MG                                                                         | 3         | PA; QL (30 EA per 30 days)  | SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 30 MG                                                                          | 6         | PA; Specialty Medical |
| ORILISSA ORAL TABLET 200 MG                                                                         | 3         | PA; QL (60 EA per 30 days)  | SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML                                                                               | 6         | PA                    |
| oxytocin +rfid injection solution 10 unit/ml                                                        | GM        |                             | SKYTROFA SUBCUTANEOUS CARTRIDGE 0.7 MG, 1.4 MG, 1.8 MG, 11 MG, 13.3 MG, 2.1 MG, 2.5 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG | 6         | PA                    |
| oxytocin solution 10 unit/ml injection                                                              | GM        |                             | SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML                                                              | 6         | PA                    |
| OXYTOCIN SOLUTION 10 UNIT/ML INJECTION                                                              | GM        |                             | SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML                                                                | 6         | PA; Specialty Medical |
| OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION 10 UNIT/500ML, 15 UNIT/250ML, 20 UNIT/L              | GM        |                             | SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG                                                               | 6         | PA                    |
| OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 15-0.9 UT/250ML-%, 30-0.9 UT/500ML-%, 40-0.9 UNIT/L-% | GM        |                             | SUPPRELIN LA SUBCUTANEOUS KIT 50 MG                                                                                                          | 6         | PA; Specialty Medical |
| PITOCIN INJECTION SOLUTION 10 UNIT/ML                                                               | GM        |                             | SYNAREL NASAL SOLUTION 2 MG/ML                                                                                                               | 6         | PA                    |
| RECORLEV ORAL TABLET 150 MG                                                                         | 6         | PA; QL (240 EA per 30 days) | TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED 500 MG                                                                                            | 6         | PA; Specialty Medical |
| SAIZEN INJECTION SOLUTION RECONSTITUTED 5 MG, 8.8 MG                                                | 6         | PA                          |                                                                                                                                              |           |                       |
| SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML                                    | 6         | PA                          |                                                                                                                                              |           |                       |
| SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG                                         | 6         | PA; Specialty Medical       |                                                                                                                                              |           |                       |

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| Drug Name                                                                                      | Drug Tier | Notes                               | Drug Name                                                                                             | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------------|-----------|-------------------------------------|-------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| TERLIVAZ<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 0.85<br>MG                                | 6         | Specialty<br>Medical                | VASOPRESSIN-<br>SODIUM CHLORIDE<br>INTRAVENOUS<br>SOLUTION 20-0.9<br>UT/100ML-%, 40-0.9<br>UT/100ML-% | GM        |                             |
| TRELSTAR MIXJECT<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED 11.25<br>MG, 22.5 MG, 3.75 MG | 6         | PA;<br>Specialty<br>Medical         | VASOSTRICT<br>INTRAVENOUS<br>SOLUTION 20 UNIT/ML,<br>20-5 UT/100ML-%, 40-5<br>UT/100ML-%              | GM        |                             |
| TRIPTODUR<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED ER<br>22.5 MG                        | 6         | PA;<br>Specialty<br>Medical         | ZOLADEX<br>SUBCUTANEOUS<br>IMPLANT 10.8 MG, 3.6<br>MG                                                 | 6         | PA;<br>Specialty<br>Medical |
| VABRINTY<br>SUBCUTANEOUS KIT<br>22.5 MG, 30 MG, 45 MG                                          | 6         | PA;<br>Specialty<br>Medical;<br>GD* | ZOMACTON<br>SUBCUTANEOUS<br>SOLUTION<br>RECONSTITUTED 10<br>MG, 5 MG                                  | 6         | PA                          |
| VAPRISOL<br>INTRAVENOUS<br>SOLUTION 20-5<br>MG/100ML-%                                         | GM        |                                     | <b>Hormonal Agents -<br/>Prostaglandins</b>                                                           |           |                             |
| vasopressin +rfid<br>intravenous solution 20<br>unit/ml                                        | GM        |                                     | KORLYM ORAL TABLET<br>300 MG                                                                          | 6         | PA                          |
| vasopressin intravenous<br>solution 20 unit/ml                                                 | GM        |                                     | MIFEPREX ORAL<br>TABLET 200 MG                                                                        | 4         | Brand<br>penalty<br>applies |
| VASOPRESSIN<br>INTRAVENOUS<br>SOLUTION PREFILLED<br>SYRINGE 5 UNIT/5ML                         | GM        |                                     | mifepristone oral tablet<br>300 mg                                                                    | 6         | PA                          |
| VASOPRESSIN-<br>DEXTROSE<br>INTRAVENOUS<br>SOLUTION 20-5<br>UT/100ML-%, 50-5<br>UT/50ML-%      | GM        |                                     | mifepristone tablet 200<br>mg oral                                                                    | 2         | GD*                         |
| VASOPRESSIN-<br>SODIUM CHLORIDE<br>INJECTION SOLUTION<br>PREFILLED SYRINGE<br>2-0.9 UNIT/2ML-% | GM        |                                     | mifepristone tablet 200<br>mg oral                                                                    | 2         | PV*                         |
|                                                                                                |           |                                     | <b>Hormonal Agents -<br/>Selective Estrogen<br/>Receptor Modifying<br/>Agents</b>                     |           |                             |
|                                                                                                |           |                                     | EVISTA ORAL TABLET<br>60 MG                                                                           | 4         | Brand<br>penalty<br>applies |
|                                                                                                |           |                                     | OSPHENA ORAL<br>TABLET 60 MG                                                                          | 4         |                             |

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| Drug Name                                                                      | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------|-----------|-----------------------|
| raloxifene hcl oral tablet 60 mg                                               | PV        |                       |
| <b>Hormonal Agents - Sex Hormones and Birth Control</b>                        |           |                       |
| abigale lo oral tablet 0.5-0.1 mg                                              | 2         |                       |
| abigale oral tablet 1-0.5 mg                                                   | 2         |                       |
| ACTIVEVELLA ORAL TABLET 1-0.5 MG                                               | 4         | Brand penalty applies |
| afirmelle oral tablet 0.1-20 mg-mcg                                            | PV        |                       |
| aftera oral tablet 1.5 mg                                                      | PV        |                       |
| AFTERPILL ORAL TABLET 1.5 MG                                                   | 4         |                       |
| ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | 4         | GD*                   |
| altavera oral tablet 0.15-30 mg-mcg                                            | PV        |                       |
| alyacen 1/35 oral tablet 1-35 mg-mcg                                           | PV        |                       |
| alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg                                 | PV        |                       |
| amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg                                       | 2         |                       |
| amethia oral tablet 0.15-0.03 & 0.01 mg                                        | PV        |                       |
| amethyst oral tablet 90-20 mcg                                                 | PV        |                       |
| ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG                                      | 4         |                       |
| ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR                                       | PV        |                       |
| apri oral tablet 0.15-30 mg-mcg                                                | PV        |                       |

| Drug Name                                     | Drug Tier | Notes                 |
|-----------------------------------------------|-----------|-----------------------|
| aranelle oral tablet 0.5/1/0.5-35 mg-mcg      | PV        |                       |
| ashlyna oral tablet 0.15-0.03 & 0.01 mg       | PV        |                       |
| aubra eq oral tablet 0.1-20 mg-mcg            | PV        |                       |
| aurovela 1.5/30 oral tablet 1.5-30 mg-mcg     | PV        |                       |
| aurovela 1/20 oral tablet 1-20 mg-mcg         | PV        |                       |
| aurovela 24 fe oral tablet 1-20 mg-mcg(24)    | PV        |                       |
| aurovela fe 1.5/30 oral tablet 1.5-30 mg-mcg  | PV        |                       |
| aurovela fe 1/20 oral tablet 1-20 mg-mcg      | PV        |                       |
| AVERI ORAL TABLET 0.15-0.03 MG                | PV        |                       |
| aviane oral tablet 0.1-20 mg-mcg              | PV        |                       |
| ayuna oral tablet 0.15-30 mg-mcg              | PV        |                       |
| azurette oral tablet 0.15-0.02/0.01 mg (21/5) | PV        |                       |
| BALCOLTRA ORAL TABLET 0.1-20 MG-MCG(21)       | 4         | Brand penalty applies |
| balziva oral tablet 0.4-35 mg-mcg             | PV        |                       |
| BEYAZ ORAL TABLET 3-0.02-0.451 MG             | 4         | Brand penalty applies |
| BIJUVA ORAL CAPSULE 0.5-100 MG, 1-100 MG      | 4         |                       |
| blisovi 24 fe oral tablet 1-20 mg-mcg(24)     | PV        |                       |
| blisovi fe 1.5/30 oral tablet 1.5-30 mg-mcg   | PV        |                       |
| blisovi fe 1/20 oral tablet 1-20 mg-mcg       | PV        |                       |

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| Drug Name                                                                                                              | Drug Tier | Notes                      | Drug Name                                                                                     | Drug Tier | Notes                      |
|------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|-----------------------------------------------------------------------------------------------|-----------|----------------------------|
| briellyn oral tablet 0.4-35 mcg                                                                                        | PV        |                            | dasetta 1/35 (28) oral tablet 1-35 mg-mcg                                                     | PV        |                            |
| camila oral tablet 0.35 mg                                                                                             | PV        |                            | dasetta 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg                                                | PV        |                            |
| camrese lo oral tablet 0.1-0.02 & 0.01 mg                                                                              | PV        |                            | daysee oral tablet 0.15-0.03 & 0.01 mg                                                        | PV        |                            |
| camrese oral tablet 0.15-0.03 & 0.01 mg                                                                                | PV        |                            | deblitane oral tablet 0.35 mg                                                                 | PV        |                            |
| charlotte 24 fe oral tablet chewable 1-20 mg-mcg(24)                                                                   | PV        |                            | DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML, 40 MG/ML                                    | 4         | Brand penalty applies; GD* |
| chateal eq oral tablet 0.15-30 mg-mcg                                                                                  | PV        |                            | delyla oral tablet 0.1-20 mg-mcg                                                              | PV        |                            |
| CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY                                                                | 4         |                            | DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML                                                      | GM        | GD*                        |
| CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | 4         | Brand penalty applies; GD* | DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML                                               | 4         | Brand penalty applies      |
| COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY                                           | 4         |                            | DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 150 MG/ML                             | 4         | Brand penalty applies      |
| COVARYX HS ORAL TABLET 0.625-1.25 MG                                                                                   | 4         |                            | DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML                 | PV        |                            |
| COVARYX ORAL TABLET 1.25-2.5 MG                                                                                        | 4         |                            | desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)                            | PV        |                            |
| CRINONE VAGINAL GEL 4 %, 8 %                                                                                           | 4         |                            | DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM | 4         | Brand penalty applies; GD* |
| cryselle-28 oral tablet 0.3-30 mg-mcg                                                                                  | PV        |                            | dolishale oral tablet 90-20 mcg                                                               | PV        |                            |
| curae oral tablet 1.5 mg                                                                                               | PV        |                            |                                                                                               |           |                            |
| cyred eq oral tablet 0.15-30 mg-mcg                                                                                    | PV        |                            |                                                                                               |           |                            |

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| Drug Name                                                                                                    | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| dotti transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 2         | GD*                   |
| drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg, 3-0.03-0.451 mg                                  | PV        |                       |
| drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg                                              | PV        |                       |
| DUAVEE ORAL TABLET 0.45-20 MG                                                                                | 4         |                       |
| econtra one-step oral tablet 1.5 mg                                                                          | PV        |                       |
| EEMT HS ORAL TABLET 0.625-1.25 MG                                                                            | 4         |                       |
| EEMT ORAL TABLET 1.25-2.5 MG                                                                                 | 4         |                       |
| ELESTRIN TRANSDERMAL GEL 0.52 MG/0.87 GM (0.06%)                                                             | 4         | GD*                   |
| elinest oral tablet 0.3-30 mg-mcg                                                                            | PV        |                       |
| ELLA ORAL TABLET 30 MG                                                                                       | PV        |                       |
| eluryng vaginal ring 0.12-0.015 mg/24hr                                                                      | PV        |                       |
| emzahh oral tablet 0.35 mg                                                                                   | PV        |                       |
| ENDOMETRIN VAGINAL INSERT 100 MG                                                                             | 3         | Brand penalty applies |
| enilloring vaginal ring 0.12-0.015 mg/24hr                                                                   | PV        |                       |
| enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg                                                              | PV        |                       |
| enskyce oral tablet 0.15-30 mg-mcg                                                                           | PV        |                       |

| Drug Name                                                                                                                | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| errin oral tablet 0.35 mg                                                                                                | PV        |                            |
| est estrogens-methyltest ds oral tablet 1.25-2.5 mg                                                                      | 2         |                            |
| est estrogens-methyltest hs oral tablet 0.625-1.25 mg                                                                    | 2         |                            |
| est estrogens-methyltest oral tablet 1.25-2.5 mg                                                                         | 2         |                            |
| estarylla oral tablet 0.25-35 mg-mcg                                                                                     | PV        |                            |
| ESTRACE ORAL TABLET 0.5 MG, 1 MG, 2 MG                                                                                   | 4         | Brand penalty applies; GD* |
| ESTRACE VAGINAL CREAM 0.01 %                                                                                             | 2         | Brand penalty applies      |
| estradiol oral tablet 0.5 mg, 1 mg, 2 mg                                                                                 | 1         | GD*                        |
| estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 0.75 mg/1.25 gm (0.06%), 1 mg/gm, 1.25 mg/1.25gm | 2         | GD*                        |
| estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr         | 2         | GD*                        |
| estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 2         | GD*                        |
| estradiol vaginal cream 0.01 %                                                                                           | 2         |                            |
| estradiol vaginal tablet 10 mcg                                                                                          | 2         |                            |

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| Drug Name                                                                   | Drug Tier | Notes                      |
|-----------------------------------------------------------------------------|-----------|----------------------------|
| estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml           | 2         | GD*                        |
| estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg               | 2         |                            |
| estratest f.s. oral tablet 1.25-2.5 mg                                      | 2         |                            |
| ESTRATEST H.S. ORAL TABLET 0.625-1.25 MG                                    | 4         |                            |
| ESTRING VAGINAL RING 7.5 MCG/24HR                                           | 2         |                            |
| ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%)                            | 4         | Brand penalty applies; GD* |
| estrogens conjugated oral tablet 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg | 2         |                            |
| ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg          | PV        |                            |
| etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr              | PV        |                            |
| EVAMIST TRANSDERMAL SOLUTION 1.53 MG/SPRAY                                  | 4         | GD*                        |
| falmina oral tablet 0.1-20 mg-mcg                                           | PV        |                            |
| feirza 1.5/30 oral tablet 1.5-30 mg-mcg                                     | PV        |                            |
| feirza 1/20 oral tablet 1-20 mg-mcg                                         | PV        |                            |
| FEMLYV ORAL TABLET DISPERSIBLE 1-0.02 MG                                    | PV        |                            |
| FEMRING VAGINAL RING 0.05 MG/24HR, 0.1 MG/24HR                              | 2         |                            |

| Drug Name                                                 | Drug Tier | Notes |
|-----------------------------------------------------------|-----------|-------|
| finzala oral tablet chewable 1-20 mg-mcg(24)              | PV        |       |
| FIRST-PROGESTERONE VGS VAGINAL SUPPOSITORY 100 MG, 200 MG | 4         |       |
| fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg            | 2         |       |
| galbriela oral tablet chewable 0.8-25 mg-mcg              | PV        |       |
| gallifrey oral tablet 5 mg                                | 2         |       |
| gemmily oral capsule 1-20 mg-mcg(24)                      | PV        |       |
| hailey 1.5/30 oral tablet 1.5-30 mg-mcg                   | PV        |       |
| hailey 24 fe oral tablet 1-20 mg-mcg(24)                  | PV        |       |
| hailey fe 1.5/30 oral tablet 1.5-30 mg-mcg                | PV        |       |
| hailey fe 1/20 oral tablet 1-20 mg-mcg                    | PV        |       |
| haloette vaginal ring 0.12-0.015 mg/24hr                  | PV        |       |
| heather oral tablet 0.35 mg                               | PV        |       |
| her style oral tablet 1.5 mg                              | PV        |       |
| iclevia oral tablet 0.15-0.03 mg                          | PV        |       |
| incassia oral tablet 0.35 mg                              | PV        |       |
| introvale oral tablet 0.15-0.03 mg                        | PV        |       |
| isibloom oral tablet 0.15-30 mg-mcg                       | PV        |       |
| jaimiess oral tablet 0.15-0.03 & 0.01 mg                  | PV        |       |
| jasmiel oral tablet 3-0.02 mg                             | PV        |       |

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| Drug Name                                        | Drug Tier | Notes | Drug Name                                                                                       | Drug Tier | Notes |
|--------------------------------------------------|-----------|-------|-------------------------------------------------------------------------------------------------|-----------|-------|
| jencycla oral tablet 0.35 mg                     | PV        |       | larin 24 fe oral tablet 1-20 mg-mcg(24)                                                         | PV        |       |
| jinteli oral tablet 1-5 mg-mcg                   | 2         |       | larin fe 1.5/30 oral tablet 1.5-30 mg-mcg                                                       | PV        |       |
| jolessa oral tablet 0.15-0.03 mg                 | PV        |       | larin fe 1/20 oral tablet 1-20 mg-mcg                                                           | PV        |       |
| joyeaux oral tablet 0.1-20 mg-mcg(21)            | PV        |       | layolis fe oral tablet chewable 0.8-25 mg-mcg                                                   | PV        |       |
| juleber oral tablet 0.15-30 mg-mcg               | PV        |       | leena oral tablet 0.5/1/0.5-35 mg-mcg                                                           | PV        |       |
| junel 1.5/30 oral tablet 1.5-30 mg-mcg           | PV        |       | lessina oral tablet 0.1-20 mg-mcg                                                               | PV        |       |
| junel 1/20 oral tablet 1-20 mg-mcg               | PV        |       | levonest oral tablet 50-30/75-40/ 125-30 mcg                                                    | PV        |       |
| junel fe 1.5/30 oral tablet 1.5-30 mg-mcg        | PV        |       | levonorgest-eth est & eth est oral tablet 42-21-21-7 days                                       | PV        |       |
| junel fe 1/20 oral tablet 1-20 mg-mcg            | PV        |       | levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg, 0.15-0.03 mg | PV        |       |
| junel fe 24 oral tablet 1-20 mg-mcg(24)          | PV        |       | levonorgest-eth estradiol-iron oral tablet 0.1-20 mg-mcg(21)                                    | PV        |       |
| kaitlib fe oral tablet chewable 0.8-25 mg-mcg    | PV        |       | levonorgestrel oral tablet 1.5 mg                                                               | PV        |       |
| kalliga oral tablet 0.15-30 mg-mcg               | PV        |       | levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg, 90-20 mcg              | PV        |       |
| kariva oral tablet 0.15-0.02/0.01 mg (21/5)      | PV        |       | levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg                               | PV        |       |
| kelnor 1/35 oral tablet 1-35 mg-mcg              | PV        |       | levora 0.15/30 (28) oral tablet 0.15-30 mg-mcg                                                  | PV        |       |
| kelnor 1/50 oral tablet 1-50 mg-mcg              | PV        |       | LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY                                   | GM        | PV    |
| kurvelo oral tablet 0.15-30 mg-mcg               | PV        |       |                                                                                                 |           |       |
| KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG | GM        | PV    |                                                                                                 |           |       |
| larin 1.5/30 oral tablet 1.5-30 mg-mcg           | PV        |       |                                                                                                 |           |       |
| larin 1/20 oral tablet 1-20 mg-mcg               | PV        |       |                                                                                                 |           |       |

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| Drug Name                                                                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG / 10 MCG                                                                | PV        |                       |
| LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG                                                                 | 4         | Brand penalty applies |
| LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG                                                                     | 4         | Brand penalty applies |
| LOESTRIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG                                                                   | 4         | Brand penalty applies |
| LOESTRIN FE 1/20 ORAL TABLET 1-20 MG-MCG                                                                       | 4         | Brand penalty applies |
| lojaimiess oral tablet 0.1-0.02 & 0.01 mg                                                                      | PV        |                       |
| loryna oral tablet 3-0.02 mg                                                                                   | PV        |                       |
| low-ogestrel oral tablet 0.3-30 mg-mcg                                                                         | PV        |                       |
| lo-zumandimine oral tablet 3-0.02 mg                                                                           | PV        |                       |
| luizza 1.5/30 oral tablet 1.5-30 mg-mcg                                                                        | PV        |                       |
| luizza 1/20 oral tablet 1-20 mg-mcg                                                                            | PV        |                       |
| luteria oral tablet 0.1-20 mg-mcg                                                                              | PV        |                       |
| lyleq oral tablet 0.35 mg                                                                                      | PV        |                       |
| lyllana transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 2         | GD*                   |
| lyza oral tablet 0.35 mg                                                                                       | PV        |                       |
| marlissa oral tablet 0.15-30 mg-mcg                                                                            | PV        |                       |
| medroxyprogesterone acetate intramuscular suspension 150 mg/ml                                                 | PV        |                       |

| Drug Name                                                                        | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------|-----------|-----------------------|
| medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml | PV        |                       |
| medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg                      | 1         |                       |
| megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 625 mg/5ml, 800 mg/20ml | 2         |                       |
| megestrol acetate oral tablet 20 mg, 40 mg                                       | 2         |                       |
| meleya oral tablet 0.35 mg                                                       | PV        |                       |
| MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG                             | 3         |                       |
| MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24HR                                    | 3         | GD*                   |
| merzee oral capsule 1-20 mg-mcg(24)                                              | PV        |                       |
| mibelas 24 fe oral tablet chewable 1-20 mg-mcg(24)                               | PV        |                       |
| microgestin 1.5/30 oral tablet 1.5-30 mg-mcg                                     | PV        |                       |
| microgestin 1/20 oral tablet 1-20 mg-mcg                                         | PV        |                       |
| microgestin fe 1.5/30 oral tablet 1.5-30 mg-mcg                                  | PV        |                       |
| microgestin fe 1/20 oral tablet 1-20 mg-mcg                                      | PV        |                       |
| mili oral tablet 0.25-35 mg-mcg                                                  | PV        |                       |
| mimvey oral tablet 1-0.5 mg                                                      | 2         |                       |
| MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)                             | 4         | Brand penalty applies |

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| Drug Name                                                                                                                          | Drug Tier | Notes | Drug Name                                                                                                                | Drug Tier | Notes |
|------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| MINIVELLE<br>TRANSDERMAL PATCH<br>TWICE WEEKLY 0.025<br>MG/24HR, 0.0375<br>MG/24HR, 0.05<br>MG/24HR, 0.075<br>MG/24HR, 0.1 MG/24HR | 3         | GD*   | norelgestromin-eth<br>estradiol transdermal<br>patch weekly 150-35<br>mcg/24hr                                           | PV        |       |
| minzoya oral tablet 0.1-<br>20 mg-mcg(21)                                                                                          | PV        |       | norethin ace-eth estrad-<br>fe oral capsule 1-20 mg-<br>mcg(24)                                                          | PV        |       |
| MIRENA (52 MG)<br>INTRAUTERINE<br>INTRAUTERINE<br>DEVICE 20 MCG/DAY                                                                | GM        | PV    | norethin ace-eth estrad-<br>fe oral tablet 1-20 mg-<br>mcg, 1.5-30 mg-mcg                                                | PV        |       |
| MIUDELLA<br>INTRAUTERINE<br>COPPER<br>INTRAUTERINE<br>INTRAUTERINE<br>DEVICE                                                       | GM        | PV    | norethin ace-eth estrad-<br>fe oral tablet chewable 1-<br>20 mg-mcg(24)                                                  | PV        |       |
| mono-lynyah oral tablet<br>0.25-35 mg-mcg                                                                                          | PV        |       | norethindrone acetate<br>oral tablet 5 mg                                                                                | 2         |       |
| my choice oral tablet 1.5<br>mg                                                                                                    | PV        |       | norethindrone acet-<br>ethinyl est oral tablet 1-<br>20 mg-mcg, 1.5-30 mg-<br>mcg                                        | PV        |       |
| my way oral tablet 1.5<br>mg                                                                                                       | PV        |       | norethindrone oral tablet<br>0.35 mg                                                                                     | PV        |       |
| MYFEMBREE ORAL<br>TABLET 40-1-0.5 MG                                                                                               | 3         | PA    | norethindrone-eth<br>estradiol oral tablet 0.5-<br>2.5 mg-mcg, 1-5 mg-mcg                                                | 2         |       |
| NATAZIA ORAL TABLET<br>3/2-2/2-3/1 MG                                                                                              | PV        |       | norethindron-ethinyl<br>estradiol oral tablet 1-<br>20/1-30/1-35 mg-mcg                                                  | PV        |       |
| necon 0.5/35 (28) oral<br>tablet 0.5-35 mg-mcg                                                                                     | PV        |       | norethin-eth estradiol-fe<br>oral tablet chewable 0.4-<br>35 mg-mcg, 0.8-25 mg-<br>mcg                                   | PV        |       |
| new day oral tablet 1.5<br>mg                                                                                                      | PV        |       | norgestimate-eth<br>estradiol oral tablet 0.25-<br>35 mg-mcg                                                             | PV        |       |
| NEXPLANON<br>SUBCUTANEOUS<br>IMPLANT 68 MG                                                                                         | GM        | PV    | norgestimate-ethinyl<br>estradiol triphasic oral<br>tablet 0.18/0.215/0.25<br>mg-25 mcg,<br>0.18/0.215/0.25 mg-35<br>mcg | PV        |       |
| NEXTSTELLIS ORAL<br>TABLET 3-14.2 MG                                                                                               | PV        |       | norlyroc oral tablet 0.35<br>mg                                                                                          | PV        |       |
| nikki oral tablet 3-0.02<br>mg                                                                                                     | PV        |       |                                                                                                                          |           |       |
| nora-be oral tablet 0.35<br>mg                                                                                                     | PV        |       |                                                                                                                          |           |       |

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| Drug Name                                            | Drug Tier | Notes                 |
|------------------------------------------------------|-----------|-----------------------|
| nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg        | PV        |                       |
| nortrel 1/35 (21) oral tablet 1-35 mg-mcg            | PV        |                       |
| nortrel 1/35 (28) oral tablet 1-35 mg-mcg            | PV        |                       |
| nortrel 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg       | PV        |                       |
| NUVARING VAGINAL RING 0.12-0.015 MG/24HR             | 4         | Brand penalty applies |
| nylia 1/35 oral tablet 1-35 mg-mcg                   | PV        |                       |
| nylia 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg         | PV        |                       |
| ocella oral tablet 3-0.03 mg                         | PV        |                       |
| opcicon one-step oral tablet 1.5 mg                  | PV        |                       |
| OPILL ORAL TABLET 0.075 MG                           | PV        |                       |
| option 2 oral tablet 1.5 mg                          | PV        |                       |
| ORIAHNN ORAL CAPSULE THERAPY PACK 300-1-0.5 & 300 MG | 3         | PA                    |
| orquidea oral tablet 0.35 mg                         | PV        |                       |
| PARAGARD INTRAUTERINE COPPER INTRAUTERINE DEVICE     | GM        | PV                    |
| philith oral tablet 0.4-35 mg-mcg                    | PV        |                       |
| pimtrea oral tablet 0.15-0.02/0.01 mg (21/5)         | PV        |                       |
| PLAN B ONE-STEP ORAL TABLET 1.5 MG                   | 4         |                       |

| Drug Name                                                             | Drug Tier | Notes                 |
|-----------------------------------------------------------------------|-----------|-----------------------|
| portia-28 oral tablet 0.15-30 mg-mcg                                  | PV        |                       |
| PREMARIN INJECTION SOLUTION RECONSTITUTED 25 MG                       | GM        |                       |
| PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG       | 4         | Brand penalty applies |
| PREMARIN VAGINAL CREAM 0.625 MG/GM                                    | 2         |                       |
| PREMPHASE ORAL TABLET 0.625-5 MG                                      | 4         |                       |
| PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG | 4         |                       |
| progesterone intramuscular oil 50 mg/ml                               | 2         |                       |
| progesterone oral capsule 100 mg, 200 mg                              | 2         |                       |
| progesterone vaginal insert 100 mg                                    | 2         |                       |
| PROMETRIUM ORAL CAPSULE 100 MG, 200 MG                                | 4         | Brand penalty applies |
| PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG                               | 4         | Brand penalty applies |
| react oral tablet 1.5 mg                                              | PV        |                       |
| reclipsen oral tablet 0.15-30 mg-mcg                                  | PV        |                       |
| rivelsa oral tablet 42-21-21-7 days                                   | PV        |                       |
| rosyrah oral tablet 42-21-21-7 days                                   | PV        |                       |
| SAFYRAL ORAL TABLET 3-0.03-0.451 MG                                   | 4         | Brand penalty applies |

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| Drug Name                                           | Drug Tier | Notes                 |
|-----------------------------------------------------|-----------|-----------------------|
| setlakin oral tablet 0.15-0.03 mg                   | PV        |                       |
| sharobel oral tablet 0.35 mg                        | PV        |                       |
| simliya oral tablet 0.15-0.02/0.01 mg (21/5)        | PV        |                       |
| simpesse oral tablet 0.15-0.03 & 0.01 mg            | PV        |                       |
| SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG      | GM        | PV                    |
| SLYND ORAL TABLET 4 MG                              | PV        |                       |
| sprintec 28 oral tablet 0.25-35 mg-mcg              | PV        |                       |
| sronyx oral tablet 0.1-20 mg-mcg                    | PV        |                       |
| syeda oral tablet 3-0.03 mg                         | PV        |                       |
| take action oral tablet 1.5 mg                      | PV        |                       |
| tarina 24 fe oral tablet 1-20 mg-mcg(24)            | PV        |                       |
| tarina fe 1/20 eq oral tablet 1-20 mg-mcg           | PV        |                       |
| taysofy oral capsule 1-20 mg-mcg(24)                | PV        |                       |
| TAYTULLA ORAL CAPSULE 1-20 MG-MCG(24)               | 4         | Brand penalty applies |
| tilia fe oral tablet 1-20/1-30/1-35 mg-mcg          | PV        |                       |
| tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg | PV        |                       |
| tri-legest fe oral tablet 1-20/1-30/1-35 mg-mcg     | PV        |                       |
| tri-lynyah oral tablet 0.18/0.215/0.25 mg-35 mcg    | PV        |                       |

| Drug Name                                              | Drug Tier | Notes                 |
|--------------------------------------------------------|-----------|-----------------------|
| tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-25 mcg | PV        |                       |
| tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg    | PV        |                       |
| tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg      | PV        |                       |
| tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg  | PV        |                       |
| tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg         | PV        |                       |
| tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg        | PV        |                       |
| tri-sprintec oral tablet 0.18/0.215/0.25 mg-35 mcg     | PV        |                       |
| trivora (28) oral tablet 50-30/75-40/ 125-30 mcg       | PV        |                       |
| tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg   | PV        |                       |
| tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg      | PV        |                       |
| turqoz oral tablet 0.3-30 mg-mcg                       | PV        |                       |
| TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24HR        | PV        |                       |
| TYBLUME ORAL TABLET CHEWABLE 0.1-20 MG-MCG             | PV        |                       |
| tydemy oral tablet 3-0.03-0.451 mg                     | PV        |                       |
| VAGIFEM VAGINAL TABLET 10 MCG                          | 2         | Brand penalty applies |

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| Drug Name                                                                                                                | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| valtya 1/35 oral tablet 1-35 mg-mcg                                                                                      | PV        |                            |
| valtya 1/50 oral tablet 1-50 mg-mcg                                                                                      | PV        |                            |
| velivet oral tablet 0.1/0.125/0.15 -0.025 mg                                                                             | PV        |                            |
| vestura oral tablet 3-0.02 mg                                                                                            | PV        |                            |
| vienva oral tablet 0.1-20 mg-mcg                                                                                         | PV        |                            |
| viorele oral tablet 0.15-0.02/0.01 mg (21/5)                                                                             | PV        |                            |
| VIVELLE-DOT<br>TRANSDERMAL PATCH<br>TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | 4         | Brand penalty applies; GD* |
| volnea oral tablet 0.15-0.02/0.01 mg (21/5)                                                                              | PV        |                            |
| vyfemla oral tablet 0.4-35 mg-mcg                                                                                        | PV        |                            |
| vylibra oral tablet 0.25-35 mg-mcg                                                                                       | PV        |                            |
| wera oral tablet 0.5-35 mg-mcg                                                                                           | PV        |                            |
| wymzya fe oral tablet chewable 0.4-35 mg-mcg                                                                             | PV        |                            |
| xarah fe oral tablet 1-20/1-30/1-35 mg-mcg                                                                               | PV        |                            |
| xelria fe oral tablet chewable 0.4-35 mg-mcg                                                                             | PV        |                            |
| xulane transdermal patch weekly 150-35 mcg/24hr                                                                          | PV        |                            |
| YASMIN 28 ORAL TABLET 3-0.03 MG                                                                                          | 4         | Brand penalty applies      |
| YAZ ORAL TABLET 3-0.02 MG                                                                                                | 4         | Brand penalty applies      |

| Drug Name                                                                                                                 | Drug Tier | Notes                 |
|---------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| yuvaferm vaginal tablet 10 mcg                                                                                            | 2         |                       |
| zafemy transdermal patch weekly 150-35 mcg/24hr                                                                           | PV        |                       |
| zovia 1/35 (28) oral tablet 1-35 mg-mcg                                                                                   | PV        |                       |
| zumandimine oral tablet 3-0.03 mg                                                                                         | PV        |                       |
| <b>Hormonal Agents - Thyroid</b>                                                                                          |           |                       |
| ADTHYZA ORAL TABLET 120 MG, 130 MG, 15 MG, 16.25 MG, 30 MG, 32.5 MG, 60 MG, 65 MG, 90 MG, 97.5 MG                         | 4         |                       |
| ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG                                     | 3         |                       |
| CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG                                                                                 | 4         | Brand penalty applies |
| euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg        | 2         |                       |
| EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 45 MG, 60 MG, 90 MG                                                 | 3         |                       |
| EVEXITHROID ORAL TABLET 75 MG                                                                                             | 4         |                       |
| levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg | 2         |                       |

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| Drug Name                                                                                                                               | Drug Tier | Notes |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| levothyroxine sodium intravenous solution 100 mcg/5ml, 100 mcg/ml, 200 mcg/5ml, 500 mcg/5ml                                             | GM        |       |
| levothyroxine sodium intravenous solution reconstituted 100 mcg, 200 mcg, 500 mcg                                                       | GM        |       |
| LEVOTHYROXINE SODIUM ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG | 4         |       |
| levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg | 2         |       |
| levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg                       | 2         |       |
| liomny oral tablet 25 mcg, 5 mcg, 50 mcg                                                                                                | 2         |       |
| liothyronine sodium intravenous solution 10 mcg/ml                                                                                      | GM        |       |
| liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg                                                                                   | 2         |       |
| methimazole oral tablet 10 mg, 5 mg                                                                                                     | 2         |       |
| NIVA THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG                                                                             | 3         |       |

| Drug Name                                                                                                                                               | Drug Tier | Notes |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg                                                                                               | 2         |       |
| propylthiouracil oral tablet 50 mg                                                                                                                      | 2         |       |
| RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG                                                                                               | 3         |       |
| SODIUM IODIDE I-131 ORAL SOLUTION 1000 MCI/ML                                                                                                           | GM        |       |
| SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG                            | 3         |       |
| thyroid oral tablet 15 mg                                                                                                                               | 2         |       |
| thyroid tablet 120 mg oral                                                                                                                              | 2         |       |
| thyroid tablet 120 mg oral                                                                                                                              | 4         |       |
| thyroid tablet 30 mg oral                                                                                                                               | 2         |       |
| thyroid tablet 30 mg oral                                                                                                                               | 4         |       |
| thyroid tablet 60 mg oral                                                                                                                               | 2         |       |
| thyroid tablet 60 mg oral                                                                                                                               | 4         |       |
| thyroid tablet 90 mg oral                                                                                                                               | 2         |       |
| thyroid tablet 90 mg oral                                                                                                                               | 4         |       |
| TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 37.5 MCG, 44 MCG, 50 MCG, 62.5 MCG, 75 MCG, 88 MCG | 4         |       |

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| Drug Name                                                                                                                    | Drug Tier | Notes                    |
|------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------|
| unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg | 2         |                          |
| <b>Immunological Agents -<br/>Drugs for Immune<br/>System Stimulation or<br/>Suppression</b>                                 |           |                          |
| ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML                                                              | 6         | PA                       |
| ACTEMRA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML                                                             | 6         | PA;<br>Specialty Medical |
| ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML                                                                 | 6         | PA                       |
| ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML                                                                                | 6         | PA                       |
| ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML                                                 | 5         | PA                       |
| ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML, 40 MG/0.4ML                                             | 5         | PA                       |
| ADALIMUMAB-RYVK (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML                                                           | 5         | PA                       |

| Drug Name                                                                          | Drug Tier | Notes                    |
|------------------------------------------------------------------------------------|-----------|--------------------------|
| ALFERON N INJECTION SOLUTION 5000000 UNIT/ML                                       | 6         | PA;<br>Specialty Medical |
| AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML | 5         | PA                       |
| AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML                       | 5         | PA                       |
| AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML     | 5         | PA                       |
| ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED                                        | GM        |                          |
| ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED                                          | 6         | Specialty Medical        |
| ANTIVENIN MICRURUS FULVIUS INTRAVENOUS SOLUTION RECONSTITUTED                      | GM        |                          |
| ARAVAL ORAL TABLET 10 MG, 20 MG                                                    | 4         | Brand penalty applies    |
| ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG                                | 6         | PA                       |
| ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 5 MG               | 4         |                          |

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| Drug Name                                                        | Drug Tier | Notes                 | Drug Name                                                                 | Drug Tier | Notes                 |
|------------------------------------------------------------------|-----------|-----------------------|---------------------------------------------------------------------------|-----------|-----------------------|
| ATGAM INTRAVENOUS SOLUTION 50 MG/ML                              | 6         | PA; Specialty Medical | BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML | PV        |                       |
| AURANOFIN ORAL CAPSULE 3 MG                                      | 3         |                       | BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 160 MG/ML, 320 MG/2ML         | 6         | PA                    |
| AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                 | 5         | PA; Specialty Medical | BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML, 320 MG/2ML     | 6         | PA                    |
| AVTOZMA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML | 6         | PA; Specialty Medical | BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML                       | 6         | PA; Specialty Medical |
| AZASAN ORAL TABLET 100 MG, 75 MG                                 | 4         | Brand penalty applies | CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED 500 MG            | GM        |                       |
| azathioprine oral tablet 100 mg, 50 mg, 75 mg                    | 2         |                       | CELLCEPT ORAL CAPSULE 250 MG                                              | 3         |                       |
| azathioprine sodium injection solution reconstituted 100 mg      | GM        |                       | CELLCEPT ORAL SUSPENSION RECONSTITUTED 200 MG/ML                          | 3         |                       |
| BABYBIG INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                | 6         | Specialty Medical     | CELLCEPT ORAL TABLET 500 MG                                               | 3         |                       |
| BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG       | 6         | PA; Specialty Medical | CIMZIA (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML           | 5         | PA                    |
| BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML           | 6         | PA                    | CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML           | 5         | PA                    |
| BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML       | 6         | PA                    | CIMZIA SUBCUTANEOUS KIT 2 X 200 MG                                        | 5         | PA; Specialty Medical |
| BERINERT INTRAVENOUS KIT 500 UNIT                                | 6         | PA; Specialty Medical |                                                                           |           |                       |

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| Drug Name                                                                         | Drug Tier | Notes                 | Drug Name                                                                                           | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------------------------------------------|-----------|-----------------------|
| CIMZIA-STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML                       | 5         | PA                    | CUTAQUIG SUBCUTANEOUS SOLUTION 1 GM/6ML, 1.65 GM/10ML, 2 GM/12ML, 3.3 GM/20ML, 4 GM/24ML, 8 GM/48ML | 6         | PA                    |
| CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT                               | 6         | PA; Specialty Medical | CUVITRU SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML, 8 GM/40ML                 | 6         | PA                    |
| COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML          | 6         | PA                    | cyclosporine intravenous solution 50 mg/ml                                                          | GM        |                       |
| COSENTYX 150 MG/ML INTRAVENOUS SOLUTION 125 MG/5ML                                | 6         | PA; Specialty Medical | cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg                                             | 2         |                       |
| COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML | 6         | PA                    | cyclosporine modified oral solution 100 mg/ml                                                       | 2         |                       |
| COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML        | 6         | PA                    | cyclosporine oral capsule 100 mg, 25 mg                                                             | 2         |                       |
| COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML             | 6         | PA                    | CYTOGAM INTRAVENOUS SOLUTION 50 MG/ML                                                               | 6         | PA; Specialty Medical |
| COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML                  | 6         | PA                    | ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML                                                | 5         | PA                    |
| CROFAB INTRAVENOUS SOLUTION RECONSTITUTED                                         | GM        |                       | ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML                                                            | 5         | PA                    |
|                                                                                   |           |                       | ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML                                | 5         | PA                    |
|                                                                                   |           |                       | ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML                                       | 5         | PA                    |

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| Drug Name                                                                                                                                          | Drug Tier | Notes                            | Drug Name                                                                                                                     | Drug Tier | Notes                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| ENSPRYNG<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 120 MG/ML                                                                                | 6         | PA                               | GAMMAGARD<br>INJECTION SOLUTION<br>1 GM/10ML, 10<br>GM/100ML, 2.5<br>GM/25ML, 20<br>GM/200ML, 30<br>GM/300ML, 5 GM/50ML       | 6         | PA;<br>Specialty<br>Medical |
| ENTYVIO<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 300<br>MG                                                                                      | 6         | PA;<br>Specialty<br>Medical      | GAMMAGARD S/D<br>LESS IGA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 10<br>GM, 5 GM                                          | 6         | PA;<br>Specialty<br>Medical |
| ENTYVIO PEN<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 108<br>MG/0.68ML                                                                         | 6         | PA                               | GAMMAKED<br>INJECTION SOLUTION<br>1 GM/10ML, 10<br>GM/100ML, 20<br>GM/200ML, 5 GM/50ML                                        | 6         | PA;<br>Specialty<br>Medical |
| ENVARSUS XR ORAL<br>TABLET EXTENDED<br>RELEASE 24 HOUR<br>0.75 MG, 1 MG, 4 MG                                                                      | 4         |                                  | GAMMAPLEX<br>INTRAVENOUS<br>SOLUTION 10<br>GM/100ML, 10<br>GM/200ML, 20<br>GM/200ML, 20<br>GM/400ML, 5<br>GM/100ML, 5 GM/50ML | 6         | PA;<br>Specialty<br>Medical |
| everolimus oral tablet<br>0.25 mg, 0.5 mg, 0.75<br>mg, 1 mg                                                                                        | 6         |                                  | GAMUNEX-C<br>INJECTION SOLUTION<br>1 GM/10ML, 10<br>GM/100ML, 2.5<br>GM/25ML, 20<br>GM/200ML, 40<br>GM/400ML, 5 GM/50ML       | 6         | PA;<br>Specialty<br>Medical |
| FIRAZYR<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 30 MG/3ML                                                                                 | 6         | PA; QL (36<br>ML per 30<br>days) | gengraf oral capsule 100<br>mg, 25 mg                                                                                         | 2         |                             |
| FLEBOGAMMA DIF<br>INTRAVENOUS<br>SOLUTION 10<br>GM/100ML, 10<br>GM/200ML, 2.5<br>GM/50ML, 20<br>GM/200ML, 20<br>GM/400ML, 5<br>GM/100ML, 5 GM/50ML | 6         | PA;<br>Specialty<br>Medical      | gengraf oral solution 100<br>mg/ml                                                                                            | 2         |                             |
| GAMASTAN<br>INTRAMUSCULAR<br>SOLUTION                                                                                                              | 6         | PA;<br>Specialty<br>Medical      | HADLIMA PUSHTOUCH<br>SUBCUTANEOUS<br>SOLUTION AUTO-<br>INJECTOR 40<br>MG/0.4ML, 40 MG/0.8ML                                   | 5         | PA                          |
| GAMIFANT<br>INTRAVENOUS<br>SOLUTION 10 MG/2ML,<br>100 MG/20ML, 50<br>MG/10ML                                                                       | 6         | PA;<br>Specialty<br>Medical      |                                                                                                                               |           |                             |

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| Drug Name                                                                                                  | Drug Tier | Notes                | Drug Name                                                                                            | Drug Tier | Notes                            |
|------------------------------------------------------------------------------------------------------------|-----------|----------------------|------------------------------------------------------------------------------------------------------|-----------|----------------------------------|
| HADLIMA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 40 MG/0.4ML,<br>40 MG/0.8ML                       | 5         | PA                   | HYPERTET<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 250 UNIT/ML                               | GM        |                                  |
| HAEGARDA<br>SUBCUTANEOUS<br>SOLUTION<br>RECONSTITUTED 2000<br>UNIT, 3000 UNIT                              | 6         | PA                   | HYQVIA<br>SUBCUTANEOUS KIT<br>10 GM/100ML, 2.5<br>GM/25ML, 20<br>GM/200ML, 30<br>GM/300ML, 5 GM/50ML | 6         | PA                               |
| HEPAGAM B<br>INJECTION SOLUTION<br>312 UNIT/ML                                                             | 6         | Specialty<br>Medical | icatibant acetate<br>subcutaneous solution<br>prefilled syringe 30<br>mg/3ml                         | 5         | PA; QL (36<br>ML per 30<br>days) |
| HIZENTRA<br>SUBCUTANEOUS<br>SOLUTION 1 GM/5ML,<br>10 GM/50ML, 2<br>GM/10ML, 4 GM/20ML                      | 6         | PA                   | ILARIS<br>SUBCUTANEOUS<br>SOLUTION 150 MG/ML                                                         | 6         | PA                               |
| HIZENTRA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 1 GM/5ML, 10<br>GM/50ML, 2 GM/10ML, 4<br>GM/20ML | 6         | PA                   | ILUMYA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 100 MG/ML                                    | 6         | PA                               |
| HYPERHEP B<br>INTRAMUSCULAR<br>SOLUTION 220 UNIT/ML                                                        | 6         | Specialty<br>Medical | IMAAVY INTRAVENOUS<br>SOLUTION 1200<br>MG/6.5ML                                                      | 6         | PA;<br>Specialty<br>Medical      |
| HYPERHEP B<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 110<br>UNIT/0.5ML                             | 6         | Specialty<br>Medical | IMOGAM RABIES-HT<br>INJECTION SOLUTION<br>300 UNIT/2ML                                               | GM        |                                  |
| HYPERRAB INJECTION<br>SOLUTION 1500<br>UNIT/5ML, 300 UNIT/ML,<br>900 UNIT/3ML                              | GM        |                      | IMULDOSA<br>INTRAVENOUS<br>SOLUTION 130<br>MG/26ML                                                   | 6         | PA;<br>Specialty<br>Medical      |
| HYPERRHO<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 1500 UNIT                                       | 6         | Specialty<br>Medical | IMULDOSA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 45 MG/0.5ML,<br>90 MG/ML                   | 6         | PA                               |
| HYPERRHO MINI-DOSE<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 250 UNIT                              | 6         | Specialty<br>Medical | IMURAN ORAL TABLET<br>50 MG                                                                          | 4         | Brand<br>penalty<br>applies      |
|                                                                                                            |           |                      | INFLECTRA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 100<br>MG                                      | 5         | PA;<br>Specialty<br>Medical      |

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| Drug Name                                                                    | Drug Tier | Notes                       | Drug Name                                                                                   | Drug Tier | Notes             |
|------------------------------------------------------------------------------|-----------|-----------------------------|---------------------------------------------------------------------------------------------|-----------|-------------------|
| INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                         | 6         | PA; Specialty Medical       | METHOTREXATE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 125 MG/5ML                            | 3         |                   |
| JOENJA ORAL TABLET 70 MG                                                     | 6         | PA; QL (60 EA per 30 days)  | METHOTREXATE INTRAVENOUS SOLUTION 1000 MG/40ML                                              | 6         | Specialty Medical |
| KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML                                      | 6         | PA; Specialty Medical       | methotrexate sodium (pf) injection solution 1 gm/40ml, 1000 mg/40ml, 250 mg/10ml, 50 mg/2ml | 2         |                   |
| KEDRAB INJECTION SOLUTION 1500 UNIT/10ML, 300 UNIT/2ML                       | GM        |                             | methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml                               | 2         |                   |
| KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML     | 6         | PA                          | methotrexate sodium injection solution reconstituted 1 gm                                   | 6         | Specialty Medical |
| KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML | 6         | PA                          | methotrexate sodium oral tablet 2.5 mg                                                      | 2         |                   |
| KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML                | 6         | PA                          | MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT             | 6         | Specialty Medical |
| KYMRIAH INTRAVENOUS SUSPENSION 250000000 CELLS, 600000000 CELLS              | 6         | PA; Specialty Medical       | mycophenolate mofetil hcl intravenous solution reconstituted 500 mg                         | GM        |                   |
| leflunomide oral tablet 10 mg, 20 mg                                         | 2         |                             | mycophenolate mofetil intravenous solution reconstituted 500 mg                             | GM        |                   |
| LUPKYNIS ORAL CAPSULE 7.9 MG                                                 | 6         | PA; QL (180 EA per 30 days) | mycophenolate mofetil oral capsule 250 mg                                                   | 2         |                   |
|                                                                              |           |                             | mycophenolate mofetil oral suspension reconstituted 200 mg/ml                               | 2         |                   |
|                                                                              |           |                             | mycophenolate mofetil oral tablet 500 mg                                                    | 2         |                   |
|                                                                              |           |                             | mycophenolate sodium oral tablet delayed release 180 mg, 360 mg                             | 2         |                   |

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| Drug Name                                                                                                                    | Drug Tier | Notes                      |
|------------------------------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| mycophenolic acid oral tablet delayed release 180 mg, 360 mg                                                                 | 2         |                            |
| MYFORTIC ORAL TABLET DELAYED RELEASE 180 MG, 360 MG                                                                          | 4         |                            |
| MYHIBBIN ORAL SUSPENSION 200 MG/ML                                                                                           | 4         |                            |
| NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML                                                                                   | 6         | Specialty Medical          |
| NEORAL ORAL CAPSULE 100 MG, 25 MG                                                                                            | 3         |                            |
| NEORAL ORAL SOLUTION 100 MG/ML                                                                                               | 3         |                            |
| NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG                                                                            | GM        |                            |
| OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 5 GM/100ML, 5 GM/50ML | 6         | PA; Specialty Medical      |
| OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG                                                                                        | 6         | PA; QL (30 EA per 30 days) |
| OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML & 200 MG/2ML                                               | 6         | PA                         |

| Drug Name                                                                             | Drug Tier | Notes                      |
|---------------------------------------------------------------------------------------|-----------|----------------------------|
| OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML & 200 MG/2ML    | 6         | PA                         |
| OMVOH INTRAVENOUS SOLUTION 300 MG/15ML                                                | 6         | PA; Specialty Medical      |
| OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML                                   | 6         | PA                         |
| OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML                               | 6         | PA                         |
| ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML                       | 6         | PA                         |
| ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG                                     | 6         | PA; Specialty Medical      |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML | 6         | PA                         |
| ORLADEYO ORAL CAPSULE 110 MG, 150 MG                                                  | 6         | PA; QL (30 EA per 30 days) |
| OTEZLA ORAL TABLET 20 MG, 30 MG                                                       | 5         | PA                         |
| OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG, 4 X 10 & 51 X20 MG                   | 5         | PA                         |

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| Drug Name                                                                                             | Drug Tier | Notes                 | Drug Name                                                                     | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------------------------------|-----------|-----------------------|-------------------------------------------------------------------------------|-----------|-----------------------|
| OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG                                                  | 5         | PA                    | PYZCHIVA INTRAVENOUS SOLUTION 130 MG/26ML                                     | 5         | PA; Specialty Medical |
| OTEZLA/OTEZLA XR INITIATION PK ORAL TABLET THERAPY PACK 10&20&30&(ER)75 MG                            | 5         | PA                    | PYZCHIVA SUBCUTANEOUS SOLUTION 45 MG/0.5ML                                    | 5         | PA                    |
| OTULFI INTRAVENOUS SOLUTION 130 MG/26ML                                                               | 5         | PA; Specialty Medical | PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.5ML, 90 MG/ML            | 5         | PA                    |
| OTULFI SUBCUTANEOUS SOLUTION 45 MG/0.5ML                                                              | 5         | PA                    | PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML        | 5         | PA                    |
| OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML                                  | 5         | PA                    | RAPAMUNE ORAL SOLUTION 1 MG/ML                                                | 3         |                       |
| PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML | 6         | PA; Specialty Medical | RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG                                       | 3         |                       |
| PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML                        | 6         | PA; Specialty Medical | REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                            | 6         | PA; Specialty Medical |
| PROGRAF INTRAVENOUS SOLUTION 5 MG/ML                                                                  | GM        |                       | RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG                           | 5         | PA; Specialty Medical |
| PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG                                                               | 3         |                       | REZUROCK ORAL TABLET 200 MG                                                   | 6         | PA                    |
| PROVENGE INTRAVENOUS SUSPENSION 50000000 CELLS                                                        | 6         | PA; Specialty Medical | RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT | 6         | Specialty Medical     |
|                                                                                                       |           |                       | RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML                  | 6         | Specialty Medical     |

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| Drug Name                                                              | Drug Tier | Notes                      | Drug Name                                                                        | Drug Tier | Notes                 |
|------------------------------------------------------------------------|-----------|----------------------------|----------------------------------------------------------------------------------|-----------|-----------------------|
| RIDAURA ORAL CAPSULE 3 MG                                              | 3         |                            | SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.5ML                       | 6         | PA                    |
| RINVOQ LQ ORAL SOLUTION 1 MG/ML                                        | 5         | PA                         | SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 80 MG/0.8ML         | 5         | PA                    |
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG, 45 MG        | 5         | PA                         | SIMLANDI (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML              | 5         | PA                    |
| RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT                  | 6         | PA; Specialty Medical      | SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML                      | 5         | PA                    |
| SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML              | 6         | PA; QL (36 ML per 30 days) | SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML | 5         | PA                    |
| SANDIMMUNE INTRAVENOUS SOLUTION 50 MG/ML                               | GM        |                            | SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML                                      | 5         | PA; Specialty Medical |
| SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG                                  | 3         |                            | SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 50 MG/0.5ML               | 5         | PA                    |
| SANDIMMUNE ORAL SOLUTION 100 MG/ML                                     | 3         |                            | SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML           | 5         | PA                    |
| SAPHNELO INTRAVENOUS SOLUTION 300 MG/2ML                               | 6         | PA; Specialty Medical      | SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 20 MG                         | GM        |                       |
| SELARSDI INTRAVENOUS SOLUTION 130 MG/26ML                              | 5         | PA; Specialty Medical      | sirolimus oral solution 1 mg/ml                                                  | 2         |                       |
| SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5ML                             | 5         | PA; Specialty Medical      | sirolimus oral tablet 0.5 mg, 1 mg, 2 mg                                         | 2         |                       |
| SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | 5         | PA                         |                                                                                  |           |                       |

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| Drug Name                                                               | Drug Tier | Notes                      |
|-------------------------------------------------------------------------|-----------|----------------------------|
| SKYRIZI INTRAVENOUS SOLUTION 600 MG/10ML                                | 5         | PA; Specialty Medical      |
| SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML               | 5         | PA                         |
| SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML, 360 MG/2.4ML      | 5         | PA                         |
| SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML               | 5         | PA                         |
| SOTYKTU ORAL TABLET 6 MG                                                | 6         | PA; QL (60 EA per 30 days) |
| SPEVIGO INTRAVENOUS SOLUTION 450 MG/7.5ML                               | 6         | PA; Specialty Medical      |
| SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML   | 6         | PA                         |
| STEQUEYMA INTRAVENOUS SOLUTION 130 MG/26ML                              | 5         | PA; Specialty Medical      |
| STEQUEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | 5         | PA                         |
| SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML                   | 6         | PA; Specialty Medical      |
| tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg                              | 2         |                            |

| Drug Name                                                                         | Drug Tier | Notes                     |
|-----------------------------------------------------------------------------------|-----------|---------------------------|
| TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML                                         | 6         | PA; QL (4 ML per 28 days) |
| TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML            | 6         | PA; QL (4 ML per 28 days) |
| TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML                                | 6         | PA                        |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.25ML, 40 MG/0.5ML, 80 MG/ML | 6         | PA                        |
| temsirolimus intravenous solution 25 mg/ml                                        | 6         | PA; Specialty Medical     |
| THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED 25 MG                            | GM        |                           |
| TOFIDENCE INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML                | 6         | PA; Specialty Medical     |
| TORISEL INTRAVENOUS SOLUTION 25 MG/ML                                             | 6         | PA; Specialty Medical     |
| TREMFYA INTRAVENOUS SOLUTION 200 MG/20ML                                          | 5         | PA; Specialty Medical     |
| TREMFYA ONE-PRESS SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML                    | 5         | PA                        |

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| Drug Name                                                                      | Drug Tier | Notes                 | Drug Name                                                                                        | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------|-----------|-----------------------|--------------------------------------------------------------------------------------------------|-----------|-----------------------|
| TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 200 MG/2ML          | 5         | PA                    | WEZLANA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML                            | 5         | PA                    |
| TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 200 MG/2ML          | 5         | PA                    | WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML, 15000 UNIT/13ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML | 6         | Specialty Medical     |
| TREMFYA-CD/UC INDUCTION SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML         | 5         | PA                    | XELJANZ ORAL SOLUTION 1 MG/ML                                                                    | 5         | PA                    |
| TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG                                 | 3         |                       | XELJANZ ORAL TABLET 10 MG, 5 MG                                                                  | 5         | PA                    |
| TYENNE INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML                | 6         | PA; Specialty Medical | XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG                                     | 5         | PA                    |
| UPLIZNA INTRAVENOUS SOLUTION 100 MG/10ML                                       | 6         | PA; Specialty Medical | XEMBIFY SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML                         | 6         | PA                    |
| USTEKINUMAB-AEKN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | 5         | PA                    | YESINTEK INTRAVENOUS SOLUTION 130 MG/26ML                                                        | 5         | PA; Specialty Medical |
| WEZLANA INTRAVENOUS SOLUTION 130 MG/26ML                                       | 5         | PA; Specialty Medical | YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5ML                                                       | 5         | PA                    |
| WEZLANA SUBCUTANEOUS SOLUTION 45 MG/0.5ML                                      | 5         | PA                    | YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML                           | 5         | PA                    |
|                                                                                |           |                       | ZINPLAVA INTRAVENOUS SOLUTION 1000 MG/40ML                                                       | GM        |                       |
|                                                                                |           |                       | ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG                                              | 6         |                       |

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| Drug Name                                                                                  | Drug Tier | Notes                        | Drug Name                                                                             | Drug Tier | Notes |
|--------------------------------------------------------------------------------------------|-----------|------------------------------|---------------------------------------------------------------------------------------|-----------|-------|
| <b>Immunological Agents -<br/>Drugs for Vaccination</b>                                    |           |                              | BEXSERO<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                 | PV        |       |
| ABRYSVO<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED 120<br>MCG/0.5ML                     | PV        | PV*; AL<br>(Min 50<br>Years) | BIOTHRAX<br>INTRAMUSCULAR<br>SUSPENSION                                               | GM        |       |
| ACAM2000 INJECTION<br>SOLUTION<br>RECONSTITUTED                                            | PV        |                              | BOOSTRIX<br>INTRAMUSCULAR<br>SUSPENSION 5-2.5-<br>18.5 LF-MCG/0.5                     | PV        |       |
| ACTHIB<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED                                       | PV        | AL (Max 6<br>Years)          | BOOSTRIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>5-2.5-18.5 LF-MCG/0.5 | PV        |       |
| ADACEL<br>INTRAMUSCULAR<br>SUSPENSION 5-2-15.5<br>LF-MCG/0.5                               | PV        |                              | CAPVAXIVE<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 0.5 ML                    | PV        |       |
| ADACEL<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>5-2-15.5 LF-MCG/0.5          | PV        |                              | COMIRNATY 5-11<br>YEARS<br>INTRAMUSCULAR<br>SUSPENSION 10<br>MCG/0.3ML                | PV        |       |
| AFLURIA<br>INTRAMUSCULAR<br>SUSPENSION                                                     | PV        |                              | COMIRNATY<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>30 MCG/0.3ML         | PV        |       |
| AFLURIA<br>PRESERVATIVE FREE<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML | PV        |                              | DAPTACEL<br>INTRAMUSCULAR<br>SUSPENSION 23-15-5                                       | PV        |       |
| AREXVY<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED 120<br>MCG/0.5ML                    | PV        | AL (Min 50<br>Years)         | DENGVAXIA<br>SUBCUTANEOUS<br>SUSPENSION<br>RECONSTITUTED                              | 4         | PV*   |
| BCG VACCINE<br>INJECTION SOLUTION<br>RECONSTITUTED 50<br>MG                                | GM        |                              | ENGRIX-B INJECTION<br>SUSPENSION 20<br>MCG/ML                                         | PV        |       |

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| Drug Name                                                                            | Drug Tier | Notes                                      | Drug Name                                                                                     | Drug Tier | Notes                                      |
|--------------------------------------------------------------------------------------|-----------|--------------------------------------------|-----------------------------------------------------------------------------------------------|-----------|--------------------------------------------|
| ENGERIX-B INJECTION<br>SUSPENSION<br>PREFILLED SYRINGE<br>10 MCG/0.5ML, 20<br>MCG/ML | PV        |                                            | FLUZONE<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                         | PV        |                                            |
| ERVEBO<br>INTRAMUSCULAR<br>SUSPENSION                                                | 4         |                                            | GARDASIL 9<br>INTRAMUSCULAR<br>SUSPENSION 0.5 ML                                              | PV        | AL (Min 9<br>Years and<br>Max 27<br>Years) |
| FLUAD<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                  | PV        | AL (Min 65<br>Years)                       | GARDASIL 9<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                      | PV        | AL (Min 9<br>Years and<br>Max 27<br>Years) |
| FLUARIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                | PV        |                                            | HAVRIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>1440 EL U/ML, 720 EL<br>U/0.5ML | PV        |                                            |
| FLUBLOK<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 0.5 ML                     | PV        |                                            | HEPLISAV-B<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 20<br>MCG/0.5ML                  | PV        | AL (Min 18<br>Years)                       |
| FLUCELVAX<br>INTRAMUSCULAR<br>SUSPENSION                                             | PV        |                                            | HIBERIX INJECTION<br>SOLUTION<br>RECONSTITUTED 10<br>MCG                                      | PV        | AL (Max 6<br>Years)                        |
| FLUCELVAX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML              | PV        |                                            | IMOVAX RABIES<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED 2.5<br>UNIT/ML                  | GM        |                                            |
| FLULAVAL<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML               | PV        |                                            | INFANRIX<br>INTRAMUSCULAR<br>SUSPENSION 25-58-10                                              | PV        |                                            |
| FLUMIST NASAL<br>LIQUID                                                              | PV        | AL (Min 2<br>Years and<br>Max 49<br>Years) | IPOLE INJECTION<br>SUSPENSION                                                                 | PV        | AL (Max 17<br>Years)                       |
| FLUZONE HIGH-DOSE<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML      | PV        | AL (Min 65<br>Years)                       | IXCHIQ<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED                                          | 4         | AL (Min 18<br>Years)                       |

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| Drug Name                                                                                        | Drug Tier | Notes                | Drug Name                                                                | Drug Tier | Notes               |
|--------------------------------------------------------------------------------------------------|-----------|----------------------|--------------------------------------------------------------------------|-----------|---------------------|
| IXIARO<br>INTRAMUSCULAR<br>SUSPENSION                                                            | GM        |                      | PEDIARIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE             | PV        |                     |
| JYNNEOS<br>SUBCUTANEOUS<br>SUSPENSION 0.5 ML                                                     | 4         |                      | PEDVAX HIB<br>INTRAMUSCULAR<br>SUSPENSION 7.5<br>MCG/0.5ML               | PV        | AL (Max 6<br>Years) |
| KINRIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                             | PV        |                      | PENMENVY<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED                 | PV        |                     |
| MENACTRA<br>INTRAMUSCULAR<br>SOLUTION                                                            | PV        |                      | PENTACEL<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED                 | PV        |                     |
| MENQUADFI<br>INTRAMUSCULAR<br>SOLUTION 0.5 ML                                                    | PV        |                      | PNEUMOVAX 23<br>INJECTION SOLUTION<br>25 MCG/0.5ML                       | PV        |                     |
| MENVEO<br>INTRAMUSCULAR<br>SOLUTION                                                              | PV        |                      | PNEUMOVAX 23<br>INJECTION SOLUTION<br>PREFILLED SYRINGE<br>25 MCG/0.5ML  | PV        |                     |
| MENVEO<br>INTRAMUSCULAR<br>SOLUTION<br>RECONSTITUTED                                             | PV        |                      | PREHEVBRIO<br>INTRAMUSCULAR<br>SUSPENSION 10<br>MCG/ML                   | PV        |                     |
| M-M-R II INJECTION<br>SOLUTION<br>RECONSTITUTED                                                  | PV        |                      | PREVNAR 13<br>INTRAMUSCULAR<br>SUSPENSION                                | PV        |                     |
| MNEXSPIKE<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>10 MCG/0.2ML                    | PV        |                      | PREVNAR 20<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML | PV        |                     |
| MRESVIA<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>50 MCG/0.5ML                      | PV        | AL (Min 50<br>Years) | PRIORIX<br>SUBCUTANEOUS<br>SUSPENSION<br>RECONSTITUTED                   | PV        |                     |
| NUVAXOVID COVID-19<br>VACCINE<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE 5<br>MCG/0.5ML | PV        |                      | PROQUAD<br>SUBCUTANEOUS<br>SUSPENSION<br>RECONSTITUTED                   | PV        |                     |

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| Drug Name                                                                                  | Drug Tier | Notes                                                     | Drug Name                                                                                       | Drug Tier | Notes |
|--------------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------|-------|
| QUADRACEL<br>INTRAMUSCULAR<br>SUSPENSION                                                   | PV        |                                                           | STAMARIL INJECTION<br>SUSPENSION<br>RECONSTITUTED                                               | GM        |       |
| QUADRACEL<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                    | PV        |                                                           | TDVAX<br>INTRAMUSCULAR<br>SUSPENSION 2-2<br>LF/0.5ML                                            | PV        |       |
| RABAVERT<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED                                   | GM        |                                                           | TENIVAC<br>INTRAMUSCULAR<br>SUSPENSION 5-2<br>LF/0.5ML                                          | PV        |       |
| RECOMBIVAX HB<br>INJECTION<br>SUSPENSION 10<br>MCG/ML, 40 MCG/ML, 5<br>MCG/0.5ML           | PV        |                                                           | TETANUS-DIPHThERIA<br>TOXOIDS TD<br>INTRAMUSCULAR<br>SUSPENSION 2-2<br>LF/0.5ML                 | PV        |       |
| RECOMBIVAX HB<br>INJECTION<br>SUSPENSION<br>PREFILLED SYRINGE<br>10 MCG/ML, 5<br>MCG/0.5ML | PV        |                                                           | TICOVAC<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>1.2 MCG/0.25ML, 2.4<br>MCG/0.5ML | GM        |       |
| ROTARIX ORAL<br>SUSPENSION                                                                 | PV        | AL (Max 8<br>Months)                                      | TRUMENBA<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>0.5 ML                          | PV        |       |
| ROTATEQ ORAL<br>SOLUTION                                                                   | PV        | AL (Max 8<br>Months)                                      | TWINRIX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>720-20 ELU-MCG/ML                | PV        |       |
| SHINGRIX<br>INTRAMUSCULAR<br>SUSPENSION<br>RECONSTITUTED 50<br>MCG/0.5ML                   | PV        | QL (2 fill<br>per 1<br>lifetime);<br>AL (Min 50<br>Years) | TYPHIM VI<br>INTRAMUSCULAR<br>SOLUTION 25<br>MCG/0.5ML                                          | GM        |       |
| SPIKEVAX 6M-11Y<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>25 MCG/0.25ML       | PV        |                                                           | TYPHIM VI<br>INTRAMUSCULAR<br>SOLUTION PREFILLED<br>SYRINGE 25<br>MCG/0.5ML                     | GM        |       |
| SPIKEVAX<br>INTRAMUSCULAR<br>SUSPENSION<br>PREFILLED SYRINGE<br>50 MCG/0.5ML               | PV        |                                                           |                                                                                                 |           |       |

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| Drug Name                                                                  | Drug Tier | Notes                             |
|----------------------------------------------------------------------------|-----------|-----------------------------------|
| VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML                   | PV        |                                   |
| VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 UNIT/0.5ML, 50 UNIT/ML | PV        |                                   |
| VARIVAX INJECTION SUSPENSION RECONSTITUTED 1350 PFU/0.5ML                  | PV        |                                   |
| VAXCHORA ORAL SUSPENSION RECONSTITUTED                                     | 4         | AL (Min 2 Years and Max 64 Years) |
| VAXELIS INTRAMUSCULAR SUSPENSION                                           | PV        |                                   |
| VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE                         | PV        |                                   |
| VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML              | PV        |                                   |
| VIMKUNYA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 40 MCG/0.8ML           | 4         |                                   |
| VIVOTIF ORAL CAPSULE DELAYED RELEASE                                       | 4         | QL (4 EA per 365 days)            |
| YF-VAX SUBCUTANEOUS SUSPENSION RECONSTITUTED                               | GM        |                                   |

| Drug Name                                               | Drug Tier | Notes                 |
|---------------------------------------------------------|-----------|-----------------------|
| <b>Inflammatory Bowel Disease Agents</b>                |           |                       |
| ANA-LEX RECTAL KIT 2-2 %                                | 4         |                       |
| ANALPRAM HC EXTERNAL CREAM 1-1 %                        | 4         | Brand penalty applies |
| ANALPRAM HC EXTERNAL CREAM 2.5-1 %                      | 4         |                       |
| ANALPRAM HC EXTERNAL LOTION 2.5-1 %                     | 4         |                       |
| ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %              | 4         |                       |
| ANALPRAM-HC EXTERNAL CREAM 1-1 %                        | 4         | Brand penalty applies |
| ANALPRAM-HC EXTERNAL LOTION 2.5-1 %                     | 4         |                       |
| ANUSOL-HC EXTERNAL CREAM 2.5 %                          | 4         | Brand penalty applies |
| APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM   | 4         | Brand penalty applies |
| AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE 500 MG   | 4         | Brand penalty applies |
| AZULFIDINE ORAL TABLET 500 MG                           | 4         | Brand penalty applies |
| balsalazide disodium oral capsule 750 mg                | 2         |                       |
| budesonide er oral tablet extended release 24 hour 9 mg | 5         | PA                    |

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| Drug Name                                              | Drug Tier | Notes                 |
|--------------------------------------------------------|-----------|-----------------------|
| budesonide oral capsule delayed release particles 3 mg | 5         |                       |
| budesonide rectal foam 2 mg, 2 mg/act                  | 2         |                       |
| CANASA RECTAL SUPPOSITORY 1000 MG                      | 4         | Brand penalty applies |
| COLAZAL ORAL CAPSULE 750 MG                            | 4         | Brand penalty applies |
| CORTENEMA RECTAL ENEMA 100 MG/60ML                     | 4         | Brand penalty applies |
| CORTIFOAM EXTERNAL FOAM 10 %                           | 3         |                       |
| DELZICOL ORAL CAPSULE DELAYED RELEASE 400 MG           | 4         | Brand penalty applies |
| DIPENTUM ORAL CAPSULE 250 MG                           | 3         |                       |
| hydrocortisone (perianal) external cream 1 %, 2.5 %    | 2         |                       |
| hydrocortisone ace-pramoxine external cream 1-1 %      | 2         |                       |
| hydrocortisone rectal enema 100 mg/60ml                | 2         |                       |
| hydrocort-pramoxine (perianal) external cream 2.5-1 %  | 2         |                       |
| LIALDA ORAL TABLET DELAYED RELEASE 1.2 GM              | 4         | Brand penalty applies |
| lidocaine-hydrocort (perianal) external cream 3-0.5 %  | 2         |                       |
| LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL 2.8-0.55 %     | 4         |                       |

| Drug Name                                                                     | Drug Tier | Notes                 |
|-------------------------------------------------------------------------------|-----------|-----------------------|
| lidocaine-hydrocortisone ace rectal kit 1-3 %, 2-2 %, 3-0.5 %, 3-1 %, 3-2.5 % | 2         |                       |
| LIDOCORT EXTERNAL CREAM 3-0.5 %                                               | 4         |                       |
| mesalamine er oral capsule extended release 24 hour 0.375 gm                  | 2         |                       |
| mesalamine er oral capsule extended release 500 mg                            | 2         |                       |
| mesalamine oral capsule delayed release 400 mg                                | 2         |                       |
| mesalamine oral tablet delayed release 1.2 gm, 800 mg                         | 2         |                       |
| mesalamine rectal enema 4 gm                                                  | 2         |                       |
| mesalamine rectal suppository 1000 mg                                         | 2         |                       |
| mesalamine-cleanser rectal kit 4 gm                                           | 2         |                       |
| PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG                                  | 4         |                       |
| PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG                                  | 4         | Brand penalty applies |
| PROCTOCORT EXTERNAL CREAM 1 %                                                 | 4         | Brand penalty applies |
| PROCTOFOAM HC EXTERNAL FOAM 1-1 %                                             | 4         |                       |
| procto-med hc external cream 2.5 %                                            | 2         |                       |
| PROCTOSOL HC EXTERNAL CREAM 2.5 %                                             | 4         | Brand penalty applies |

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| Drug Name                                                     | Drug Tier | Notes                     |
|---------------------------------------------------------------|-----------|---------------------------|
| PROCTOZONE-HC EXTERNAL CREAM 2.5 %                            | 4         | Brand penalty applies     |
| ROWASA RECTAL KIT 4 GM                                        | 4         | Brand penalty applies     |
| sulfasalazine oral tablet 500 mg                              | 2         |                           |
| sulfasalazine oral tablet delayed release 500 mg              | 2         |                           |
| TARPEYO ORAL CAPSULE DELAYED RELEASE 4 MG                     | 6         | PA                        |
| UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG              | 6         | PA                        |
| UCERIS RECTAL FOAM 2 MG/ACT                                   | 4         | Brand penalty applies     |
| <b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b> |           |                           |
| ACTONEL ORAL TABLET 150 MG, 35 MG                             | 4         | ST; Brand penalty applies |
| alendronate sodium oral solution 70 mg/75ml                   | 2         |                           |
| alendronate sodium oral tablet 10 mg                          | 1         |                           |
| alendronate sodium oral tablet 35 mg, 70 mg                   | 1         | QL (4 EA per 28 days)     |
| ATELVIA ORAL TABLET DELAYED RELEASE 35 MG                     | 4         | ST; Brand penalty applies |
| BINOSTO ORAL TABLET EFFERVESCENT 70 MG                        | 4         | ST                        |
| BONSITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML     | 6         | PA                        |

| Drug Name                                                                 | Drug Tier | Notes                                        |
|---------------------------------------------------------------------------|-----------|----------------------------------------------|
| calcitonin (salmon) injection solution 200 unit/ml                        | 2         |                                              |
| calcitonin (salmon) nasal solution 200 unit/act                           | 2         |                                              |
| EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 105 MG/1.17ML             | 6         | PA; Specialty Medical                        |
| FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML                  | 6         | PA                                           |
| FOSAMAX ORAL TABLET 70 MG                                                 | 4         | Brand penalty applies; QL (4 EA per 28 days) |
| FOSAMAX PLUS D ORAL TABLET 70-2800 MG-UNIT, 70-5600 MG-UNIT               | 4         |                                              |
| ibandronate sodium intravenous solution 3 mg/3ml                          | GM        |                                              |
| ibandronate sodium oral tablet 150 mg                                     | 2         |                                              |
| JUBBONTI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML                 | 5         | Specialty Medical                            |
| MIACALCIN INJECTION SOLUTION 200 UNIT/ML                                  | 3         | Brand penalty applies                        |
| pamidronate disodium intravenous solution 30 mg/10ml, 6 mg/ml, 90 mg/10ml | GM        |                                              |
| PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML                   | 6         | Specialty Medical                            |

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| Drug Name                                                                   | Drug Tier | Notes                | Drug Name                                                               | Drug Tier | Notes                           |
|-----------------------------------------------------------------------------|-----------|----------------------|-------------------------------------------------------------------------|-----------|---------------------------------|
| RECLAST<br>INTRAVENOUS<br>SOLUTION 5 MG/100ML                               | 6         | Specialty<br>Medical | doxercalciferol oral<br>capsule 0.5 mcg, 1 mcg,<br>2.5 mcg              | 2         | PA                              |
| risedronate sodium oral<br>tablet 150 mg, 30 mg, 35<br>mg, 5 mg             | 2         | ST                   | HECTOROL<br>INTRAVENOUS<br>SOLUTION 4 MCG/2ML                           | GM        |                                 |
| risedronate sodium oral<br>tablet delayed release 35<br>mg                  | 2         | ST                   | paricalcitol intravenous<br>solution 2 mcg/ml, 5<br>mcg/ml              | GM        |                                 |
| teriparatide solution pen-<br>injector 560 mcg/2.24ml<br>subcutaneous       | 5         | PA                   | paricalcitol oral capsule 1<br>mcg, 2 mcg, 4 mcg                        | 2         | ST                              |
| TERIPARATIDE<br>SOLUTION PEN-<br>INJECTOR 560<br>MCG/2.24ML<br>SUBCUTANEOUS | 6         | PA                   | PARSABIV<br>INTRAVENOUS<br>SOLUTION 10 MG/2ML,<br>2.5 MG/0.5ML, 5 MG/ML | 6         | Specialty<br>Medical            |
| TYMLOS<br>SUBCUTANEOUS<br>SOLUTION PEN-<br>INJECTOR 3120<br>MCG/1.56ML      | 6         | PA                   | RAYALDEE ORAL<br>CAPSULE EXTENDED<br>RELEASE 30 MCG                     | 6         | PA                              |
| zoledronic acid<br>intravenous concentrate<br>4 mg/5ml                      | 5         | Specialty<br>Medical | ROCALtrol ORAL<br>CAPSULE 0.25 MCG,<br>0.5 MCG                          | 4         | Brand<br>penalty<br>applies     |
| zoledronic acid<br>intravenous solution 4<br>mg/100ml, 5 mg/100ml           | 5         | Specialty<br>Medical | ROCALtrol ORAL<br>SOLUTION 1 MCG/ML                                     | 4         | Brand<br>penalty<br>applies     |
| <b>Metabolic Bone<br/>Disease Agents - Other</b>                            |           |                      | SENSIPAR ORAL<br>TABLET 30 MG, 60 MG,<br>90 MG                          | 6         | PA                              |
| calcitriol intravenous<br>solution 1 mcg/ml                                 | GM        |                      | ZEMPLAR<br>INTRAVENOUS<br>SOLUTION 2 MCG/ML, 5<br>MCG/ML                | GM        |                                 |
| calcitriol oral capsule<br>0.25 mcg, 0.5 mcg                                | 2         |                      | ZEMPLAR ORAL<br>CAPSULE 1 MCG, 2<br>MCG                                 | 4         | ST; Brand<br>penalty<br>applies |
| calcitriol oral solution 1<br>mcg/ml                                        | 2         |                      | <b>Metabolic Bone<br/>Disease Agents</b>                                |           |                                 |
| cinacalcet hcl oral tablet<br>30 mg, 60 mg, 90 mg                           | 5         | PA                   | BILDYOS<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 60 MG/ML       | 5         | Specialty<br>Medical            |
| doxercalciferol<br>intravenous solution 4<br>mcg/2ml                        | GM        |                      |                                                                         |           |                                 |

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| Drug Name                                                                 | Drug Tier | Notes                | Drug Name                                                 | Drug Tier | Notes |
|---------------------------------------------------------------------------|-----------|----------------------|-----------------------------------------------------------|-----------|-------|
| BILPREVDA<br>SUBCUTANEOUS<br>SOLUTION 120<br>MG/1.7ML                     | 5         | Specialty<br>Medical | ACACIA<br>SUBCUTANEOUS<br>SOLUTION 1:20                   | GM        |       |
| BOMYNTRA<br>SUBCUTANEOUS<br>SOLUTION 120<br>MG/1.7ML                      | 5         | Specialty<br>Medical | ACETADOTE<br>INTRAVENOUS<br>SOLUTION 200 MG/ML            | GM        |       |
| BOMYNTRA<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 120<br>MG/1.7ML | 5         | Specialty<br>Medical | acetylcysteine<br>intravenous solution 200<br>mg/ml       | GM        |       |
| CONEXXENCE<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 60 MG/ML      | 5         | Specialty<br>Medical | adenosine (diagnostic)<br>intravenous solution 3<br>mg/ml | GM        |       |
| OSENVELT<br>SUBCUTANEOUS<br>SOLUTION 120<br>MG/1.7ML                      | 5         | Specialty<br>Medical | AEROCHAMBER<br>HOLDING CHAMBER<br>DEVICE                  | 2         |       |
| OSPOMYV<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 60 MG/ML         | 5         | Specialty<br>Medical | AEROCHAMBER MINI<br>CHAMBER DEVICE                        | 2         |       |
| STOBOCLO<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 60 MG/ML        | 5         | Specialty<br>Medical | AEROCHAMBER MV                                            | 2         |       |
| WYOST<br>SUBCUTANEOUS<br>SOLUTION 120<br>MG/1.7ML                         | 5         | Specialty<br>Medical | AEROCHAMBER PLS<br>FLOVU MTHPIECE<br>DEVICE               | 2         |       |
| XGEVA<br>SUBCUTANEOUS<br>SOLUTION 120<br>MG/1.7ML                         | 6         | Specialty<br>Medical | AEROCHAMBER PLUS<br>FLO-VU                                | 2         |       |
| <b>Miscellaneous<br/>Therapeutic Agents</b>                               |           |                      | AEROCHAMBER PLUS<br>FLO-VU INTERM<br>DEVICE               | 2         |       |
| ACACIA POLLEN<br>INJECTION SOLUTION<br>1:40                               | GM        |                      | AEROCHAMBER PLUS<br>FLO-VU LARGE DEVICE                   | 2         |       |
|                                                                           |           |                      | AEROCHAMBER PLUS<br>FLO-VU MEDIUM<br>DEVICE               | 2         |       |
|                                                                           |           |                      | AEROCHAMBER PLUS<br>FLO-VU SMALL DEVICE                   | 2         |       |
|                                                                           |           |                      | AEROCHAMBER PLUS<br>FLOW VU                               | 2         |       |
|                                                                           |           |                      | AEROCHAMBER<br>W/FLOWSIGNAL                               | 2         |       |
|                                                                           |           |                      | AEROCHAMBER2GO<br>ANTI-STATIC DEVICE                      | 2         |       |
|                                                                           |           |                      | ALBUKED 25<br>INTRAVENOUS<br>SOLUTION 25 %                | GM        |       |

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| Drug Name                                                            | Drug Tier | Notes |
|----------------------------------------------------------------------|-----------|-------|
| ALBUKED 5<br>INTRAVENOUS<br>SOLUTION 5 %                             | GM        |       |
| ALBUMIN HUMAN<br>INTRAVENOUS<br>SOLUTION 25 %, 5 %                   | GM        |       |
| ALBUMINEX<br>INTRAVENOUS<br>SOLUTION 25 %, 5 %                       | GM        |       |
| ALBUMIN-ZLB<br>INTRAVENOUS<br>SOLUTION 25 %, 5 %                     | GM        |       |
| ALBURX<br>INTRAVENOUS<br>SOLUTION 5 %                                | GM        |       |
| ALBUTEIN<br>INTRAVENOUS<br>SOLUTION 25 %, 5 %                        | GM        |       |
| ALDER<br>SUBCUTANEOUS<br>SOLUTION 1:20                               | GM        |       |
| ALFALFA INJECTION<br>SOLUTION 1:20                                   | GM        |       |
| ALMOND<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20                 | GM        |       |
| ALPHA-LIPOIC ACID<br>INJECTION SOLUTION<br>25 MG/ML                  | GM        |       |
| ALTERNARIA<br>ALTERNAT<br>(DIAGNOST)<br>INJECTION SOLUTION<br>1:20   | GM        |       |
| ALTERNARIA<br>ALTERNATA<br>INJECTION SOLUTION<br>1:20 , 24000 PNU/ML | GM        |       |
| AMERICAN BEECH<br>POLLEN<br>SUBCUTANEOUS<br>SOLUTION 1:20            | GM        |       |

| Drug Name                                                      | Drug Tier | Notes                |
|----------------------------------------------------------------|-----------|----------------------|
| AMERICAN BEECH<br>SUBCUTANEOUS<br>SOLUTION 1:20                | GM        |                      |
| AMERICAN<br>COCKROACH<br>SUBCUTANEOUS<br>SOLUTION 1:20         | GM        |                      |
| AMERICAN ELM<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20     | GM        |                      |
| AMERICAN ELM<br>INJECTION SOLUTION<br>1:20                     | GM        |                      |
| AMERICAN ELM<br>SUBCUTANEOUS<br>SOLUTION 1:20                  | GM        |                      |
| AMERICAN LOBSTER<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20 | GM        |                      |
| AMERICAN SYCAMORE<br>INJECTION SOLUTION<br>1:20                | GM        |                      |
| AMERICAN SYCAMORE<br>SUBCUTANEOUS<br>SOLUTION 1:20             | GM        |                      |
| AMIDATE<br>INTRAVENOUS<br>SOLUTION 2 MG/ML                     | GM        |                      |
| AMMONIA N 13<br>INTRAVENOUS<br>SOLUTION 3.75-260<br>MCI/ML     | GM        |                      |
| AMPHADASE<br>INJECTION SOLUTION<br>150 UNIT/ML                 | GM        |                      |
| ANDEXXA<br>INTRAVENOUS<br>SOLUTION<br>RECONSTITUTED 200<br>MG  | 6         | Specialty<br>Medical |

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| Drug Name                                                       | Drug Tier | Notes                                |
|-----------------------------------------------------------------|-----------|--------------------------------------|
| ANESTHESIA S/I-40A<br>INTRAVENOUS KIT 200<br>MG/20ML            | GM        |                                      |
| ANESTHESIA S/I-40H<br>INTRAVENOUS KIT 200<br>MG/20ML            | GM        |                                      |
| ANESTHESIA S/I-40S<br>INTRAVENOUS KIT 200<br>MG/20ML            | GM        |                                      |
| APPLE (DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:40                | GM        |                                      |
| AQINJECT PEN<br>NEEDLE 31G X 5 MM ,<br>32G X 4 MM               | 3         |                                      |
| AQNEURSA ORAL<br>PACKET 1 GM                                    | 6         | PA; QL<br>(120 EA<br>per 30<br>days) |
| ARIZONA CYPRESS<br>SUBCUTANEOUS<br>SOLUTION 1:20                | GM        |                                      |
| arnica flower tincture                                          | 2         |                                      |
| ARTISS EXTERNAL KIT<br>10 ML, 2 ML, 4 ML                        | GM        |                                      |
| ARTISS EXTERNAL<br>SOLUTION                                     | GM        |                                      |
| ASPEN POLLEN<br>INJECTION SOLUTION<br>1:20                      | GM        |                                      |
| ASPERGILLUS<br>FUMIGAT (DIAGNOST)<br>INJECTION SOLUTION<br>1:20 | GM        |                                      |
| ASPERGILLUS<br>FUMIGATUS<br>INJECTION SOLUTION<br>1:10 , 1:20   | GM        |                                      |
| ASSURE ID DUO PRO<br>PEN NEEDLES 31G X 5<br>MM                  | 3         |                                      |
| ASSURE ID PRO PEN<br>NEEDLES 30G X 5 MM                         | 3         |                                      |

| Drug Name                                                                                                                           | Drug Tier | Notes |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| ATLANTIC COD<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20                                                                          | GM        |       |
| ATLANTIC SALMON<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20                                                                       | GM        |       |
| ATLANTIC/EASTERN<br>OYSTER(DIAGN)<br>INJECTION SOLUTION<br>1:20                                                                     | GM        |       |
| AUM INSULIN SAFETY<br>PEN NEEDLE 31G X 4<br>MM                                                                                      | 3         |       |
| AUM MINI INSULIN PEN<br>NEEDLE 32G X 4 MM ,<br>32G X 5 MM , 32G X 6<br>MM , 32G X 8 MM , 33G<br>X 4 MM , 33G X 5 MM ,<br>33G X 6 MM | 3         |       |
| AUM PEN NEEDLE 32G<br>X 5 MM , 33G X 4 MM ,<br>33G X 5 MM , 33G X 6<br>MM                                                           | 3         |       |
| AUM READYGARD DUO<br>PEN NEEDLE 32G X 4<br>MM                                                                                       | 3         |       |
| AUM SAFETY PEN<br>NEEDLE 31G X 4 MM ,<br>31G X 5 MM                                                                                 | 3         |       |
| AUREOBASIDIUM<br>PULLULANS<br>INJECTION SOLUTION<br>1:20                                                                            | GM        |       |
| BACTERIOSTATIC<br>WATER(BENZ ALC)<br>INJECTION SOLUTION                                                                             | GM        |       |
| BAHIA<br>SUBCUTANEOUS<br>SOLUTION 1:20                                                                                              | GM        |       |
| BALD CYPRESS<br>SUBCUTANEOUS<br>SOLUTION 1:20                                                                                       | GM        |       |

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| Drug Name                                        | Drug Tier | Notes |
|--------------------------------------------------|-----------|-------|
| BANANA (DIAGNOSTIC) INJECTION SOLUTION 1:40      | GM        |       |
| BAYBERRY (WAX MYRTLE) SUBCUTANEOUS SOLUTION 1:20 | GM        |       |
| BD AUTOSHIELD DUO PEN NEEDLES 30G X 5 MM         | 3         |       |
| BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM         | 3         |       |
| BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM          | 3         |       |
| BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM          | 3         |       |
| BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM        | 3         |       |
| BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM         | 3         |       |
| BD ULTRA-FINE PEN NEEDLES 32G X 4 MM             | 3         |       |
| BD VERITOR SYSTEM GROUP A STRP IN VITRO KIT      | GM        |       |
| BEEF (DIAGNOSTIC) INJECTION SOLUTION 1:20        | GM        |       |
| BERMUDA GRASS INJECTION SOLUTION 10000 BAU/ML    | GM        |       |
| BERMUDA GRASS SUBCUTANEOUS SOLUTION 10000 BAU/ML | GM        |       |

| Drug Name                                                                | Drug Tier | Notes |
|--------------------------------------------------------------------------|-----------|-------|
| BIPOLARIS SOROKIN (DIAGNOSTIC) INJECTION SOLUTION 1:20                   | GM        |       |
| BIPOLARIS SOROKINIANA INJECTION SOLUTION 1:20                            | GM        |       |
| BLACK WALNUT (DIAGNOSTIC) INJECTION SOLUTION 1:20                        | GM        |       |
| BLACK WALNUT POLLEN (1:10) INJECTION SOLUTION 75000 PNU/ML               | GM        |       |
| BLACK WALNUT POLLEN (1:20) INJECTION SOLUTION 75000 PNU/ML               | GM        |       |
| BLACK WALNUT POLLEN INJECTION SOLUTION 1:20 , 20000 PNU/ML, 40000 PNU/ML | GM        |       |
| BLACK WALNUT POLLEN SUBCUTANEOUS SOLUTION 1:20                           | GM        |       |
| BLACK WILLOW (DIAGNOSTIC) INJECTION SOLUTION 1:20                        | GM        |       |
| BLACK WILLOW INJECTION SOLUTION 1:20                                     | GM        |       |
| BLACK/SWEET BIRCH POLLEN INJECTION SOLUTION 1:20                         | GM        |       |
| BLUE CRAB (DIAGNOSTIC) INJECTION SOLUTION 1:20                           | GM        |       |

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| Drug Name                                                 | Drug Tier | Notes | Drug Name                                                     | Drug Tier | Notes                       |
|-----------------------------------------------------------|-----------|-------|---------------------------------------------------------------|-----------|-----------------------------|
| BOTOX INJECTION SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT | GM        | PA    | BROWN SHRIMP (DIAGNOSTIC) INJECTION SOLUTION 1:20             | GM        |                             |
| BOTRYTIS CINEREA INJECTION SOLUTION 1:20 , 43000 PNU/ML   | GM        |       | BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE 200 MCG                | 6         | PA; QL (900 EA per 30 days) |
| BOX ELDER POLLEN INJECTION SOLUTION 1:20                  | GM        |       | BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE 600 MCG                | 6         | PA; QL (300 EA per 30 days) |
| BOX ELDER SUBCUTANEOUS SOLUTION 1:20                      | GM        |       |                                                               | 6         | PA; QL (150 EA per 30 days) |
| BRAZIL NUT (DIAGNOSTIC) INJECTION SOLUTION 1:20           | GM        |       | BYLVAY ORAL CAPSULE 1200 MCG                                  | 6         | PA; QL (450 EA per 30 days) |
| BREATHE COMFORT CHAMBER/ADULT DEVICE                      | 2         |       | BYLVAY ORAL CAPSULE 400 MCG                                   | 6         |                             |
| BREATHE COMFORT CHAMBER/CHILD DEVICE                      | 2         |       | CALIFORNIA PEPPER TREE SUBCUTANEOUS SOLUTION 1:20             | GM        |                             |
| BREATHE EASE LARGE DEVICE                                 | 2         |       | CANDIDA ALBICANS EXTRACT INJECTION SOLUTION 100 MG/ML         | GM        |                             |
| BREATHE EASE MEDIUM DEVICE                                | 2         |       | CARELESSWEED INJECTION SOLUTION 1:40                          | GM        |                             |
| BREATHE EASE SMALL DEVICE                                 | 2         |       | CASHEW NUT (DIAGNOSTIC) INJECTION SOLUTION 1:20               | GM        |                             |
| BREATHERITE VALVED MDI CHAMBER DEVICE                     | 2         |       | CAT HAIR EXTRACT INJECTION SOLUTION 10000 BAU/ML, 5000 BAU/ML | GM        |                             |
| BREVITAL SODIUM INJECTION SOLUTION RECONSTITUTED 500 MG   | GM        |       | CAT HAIR EXTRACT SUBCUTANEOUS SOLUTION 10000 BAU/ML           | GM        |                             |
| BRIDION INTRAVENOUS SOLUTION 200 MG/2ML, 500 MG/5ML       | GM        |       | CATTLE EPITHELIUM SUBCUTANEOUS SOLUTION 1:20                  | GM        |                             |
| BROME SUBCUTANEOUS SOLUTION 1:20                          | GM        |       |                                                               |           |                             |

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| Drug Name                                                           | Drug Tier | Notes |
|---------------------------------------------------------------------|-----------|-------|
| CAYA VAGINAL DIAPHRAGM                                              | PV        |       |
| CEDAR ELM SUBCUTANEOUS SOLUTION 1:20                                | GM        |       |
| CELERY (DIAGNOSTIC) INJECTION SOLUTION 1:40                         | GM        |       |
| CHICKEN MEAT (DIAGNOSTIC) INJECTION SOLUTION 1:20                   | GM        |       |
| CHIRHOSTIM INTRAVENOUS SOLUTION RECONSTITUTED 16 MCG                | GM        |       |
| CHLORHEXIDINE GLUCONATE SOLUTION 20 %                               | 4         |       |
| CLADOSPORIUM CLADOSPORIOIDES INJECTION SOLUTION 1:20 , 64000 PNU/ML | GM        |       |
| CLADOSPORIUM CLADOSPORIOIDES INTRADERMAL SOLUTION 1:20              | GM        |       |
| CLADOSPORIUM SPHAER (DIAGNOST) INJECTION SOLUTION 1:20              | GM        |       |
| CLADOSPORIUM SPHAEROSPERMUM INJECTION SOLUTION 1:20                 | GM        |       |
| CLEVER CHOICE HOLDING CHAMBER DEVICE                                | 2         |       |
| COCKLEBUR SUBCUTANEOUS SOLUTION 1:20                                | GM        |       |

| Drug Name                                                       | Drug Tier | Notes |
|-----------------------------------------------------------------|-----------|-------|
| COCKROACH MIXED (DIAGNOSTIC) INJECTION SOLUTION 1:20            | GM        |       |
| COCKROACH MIXED ALLERGEN EXT INJECTION SOLUTION 1:20            | GM        |       |
| COCONUT (DIAGNOSTIC) INJECTION SOLUTION 1:20                    | GM        |       |
| COENZYME Q-10 INJECTION SOLUTION 20 MG/ML                       | GM        |       |
| COMFORT EZ PRO PEN NEEDLES 30G X 8 MM , 31G X 4 MM , 31G X 5 MM | 3         |       |
| COMPACT SPACE CHAMBER DEVICE                                    | 2         |       |
| COMPACT SPACE CHAMBER/LG MASK DEVICE                            | 2         |       |
| COMPACT SPACE CHAMBER/MED MASK DEVICE                           | 2         |       |
| COMPACT SPACE CHAMBER/SM MASK DEVICE                            | 2         |       |
| CONDOMS                                                         | PV        |       |
| CORN (ZEA MAYS) (DIAGNOSTIC) INJECTION SOLUTION 1:40            | GM        |       |
| CORN POLLEN SUBCUTANEOUS SOLUTION 1:20                          | GM        |       |
| CORN SMUT INJECTION SOLUTION 1:20                               | GM        |       |

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| Drug Name                                                           | Drug Tier | Notes | Drug Name                                                                                              | Drug Tier | Notes |
|---------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------------------------------|-----------|-------|
| CORTROSYN INJECTION SOLUTION RECONSTITUTED 0.25 MG                  | GM        |       | DELFLEX-LC/4.25% DEXTROSE INTRAPERITONEAL SOLUTION 483 MOSM/L                                          | 4         |       |
| cosyntropin injection solution reconstituted 0.25 mg                | GM        |       | DELFLEX-SM/1.5% DEXTROSE INTRAPERITONEAL SOLUTION 347 MOSM/L                                           | 4         |       |
| COW MILK (DIAGNOSTIC) INJECTION SOLUTION 1:20                       | GM        |       | DELFLEX-SM/2.5% DEXTROSE INTRAPERITONEAL SOLUTION 398 MOSM/L                                           | 4         |       |
| CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED 5 GM                    | GM        |       | DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG                                                       | GM        |       |
| CYSVIEW INTRAVESICAL SOLUTION RECONSTITUTED 100 MG                  | GM        |       | dexmedetomidine hcl in nacl intravenous solution 200 mcg/50ml, 400 mcg/100ml, 80 mcg/20ml              | GM        |       |
| CYTALUX INTRAVENOUS SOLUTION 3.2 MG/1.6ML                           | GM        |       | DEXMEDETOMIDINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 20-0.9 MCG/5ML-%, 40-0.9 MCG/10ML-% | GM        |       |
| DANDELION SUBCUTANEOUS SOLUTION 1:20                                | GM        |       | dexmedetomidine hcl intravenous solution 1000 mcg/10ml, 200 mcg/2ml, 400 mcg/4ml                       | GM        |       |
| deferoxamine mesylate injection solution reconstituted 2 gm, 500 mg | GM        |       | DEXMEDETOMIDINE HCL-DEXTROSE INTRAVENOUS SOLUTION 200MCG/50ML -5%, 400MCG/100ML -5%                    | GM        |       |
| DEFLUX INJECTION PREFILLED SYRINGE 50-15 MG/ML                      | GM        |       | DIANEAL LOW CALCIUM/1.5% DEX INTRAPERITONEAL SOLUTION 344 MOSM/L                                       | 4         |       |
| DEFLUX METAL NEEDLE 23G X 350MM                                     | GM        |       |                                                                                                        |           |       |
| DELFLEX-LC/1.5% DEXTROSE INTRAPERITONEAL SOLUTION 344 MOSM/L        | 4         |       |                                                                                                        |           |       |
| DELFLEX-LC/2.5% DEXTROSE INTRAPERITONEAL SOLUTION 394 MOSM/L        | 4         |       |                                                                                                        |           |       |

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| Drug Name                                                                          | Drug Tier | Notes |
|------------------------------------------------------------------------------------|-----------|-------|
| DIANEAL LOW CALCIUM/2.5% DEX INTRAPERITONEAL SOLUTION 395 MOSM/L                   | 4         |       |
| DIANEAL LOW CALCIUM/4.25% DEX INTRAPERITONEAL SOLUTION 483 MOSM/L                  | 4         |       |
| DIANEAL PD-2/1.5% DEXTROSE INTRAPERITONEAL SOLUTION 346 MOSM/L                     | 4         |       |
| DIANEAL PD-2/2.5% DEXTROSE INTRAPERITONEAL SOLUTION 396 MOSM/L                     | 4         |       |
| DIANEAL PD-2/4.25% DEXTROSE INTRAPERITONEAL SOLUTION 485 MOSM/L                    | 4         |       |
| DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED 40 MG                                   | GM        |       |
| diluent for treprostinil intravenous solution                                      | GM        |       |
| DIMERCAPTOPROPAN E-SULFONATE INJECTION SOLUTION 250 MG/5ML                         | GM        |       |
| DIPRIVAN INTRAVENOUS EMULSION 100 MG/10ML, 1000 MG/100ML, 200 MG/20ML, 500 MG/50ML | GM        |       |
| dipyridamole intravenous solution 5 mg/ml                                          | GM        |       |
| DOG EPITHELIUM (DIAGNOSTIC) INJECTION SOLUTION 1:20                                | GM        |       |

| Drug Name                                                                | Drug Tier | Notes |
|--------------------------------------------------------------------------|-----------|-------|
| DOG EPITHELIUM SUBCUTANEOUS SOLUTION 1:10 , 1:20                         | GM        |       |
| DOG FENNEL SUBCUTANEOUS SOLUTION 1:20                                    | GM        |       |
| DROPLET MICRON 34G X 3.5 MM                                              | 3         |       |
| DUREX EXTRA SENSITIVE THIN                                               | PV        |       |
| DUREX EXTRA SENSITIVE THIN DEVICE                                        | PV        |       |
| DUREX TROPICAL                                                           | PV        |       |
| DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE 60 MG/3ML                     | GM        |       |
| DUST MITE MIXED ALLERGEN EXT INJECTION SOLUTION 10000 AU/ML, 30000 AU/ML | GM        |       |
| DUST MITE MIXED ALLERGEN EXT SUBCUTANEOUS SOLUTION 10000 AU/ML           | GM        |       |
| DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT, 500 UNIT          | GM        | PA    |
| EASIVENT                                                                 | 2         |       |
| EASTERN COTTONWOOD INJECTION SOLUTION 1:20                               | GM        |       |
| EASTERN COTTONWOOD SUBCUTANEOUS SOLUTION 1:20                            | GM        |       |

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| Drug Name                                                                          | Drug Tier | Notes                 |
|------------------------------------------------------------------------------------|-----------|-----------------------|
| EASTERN COTTONWOOD(DIAGNOSTIC) INJECTION SOLUTION 1:20                             | GM        |                       |
| EDETATE CALCIUM DISODIUM INJECTION SOLUTION 1 GM/5ML                               | GM        |                       |
| EMBECTA AUTOSHIELD DUO 30G X 5 MM                                                  | 3         |                       |
| EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM                                           | 3         |                       |
| EMBECTA PEN NEEDLE NANO 32G X 4 MM                                                 | 3         |                       |
| EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 6 MM   | 3         |                       |
| EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM | 3         |                       |
| ENCARE VAGINAL SUPPOSITORY 100 MG                                                  | PV        |                       |
| ENDARI ORAL PACKET 5 GM                                                            | 4         | Brand penalty applies |
| ENGLISH PLANTAIN (DIAGNOSTIC) INJECTION SOLUTION 1:20                              | GM        |                       |
| ENGLISH PLANTAIN INJECTION SOLUTION 1:20                                           | GM        |                       |
| ENGLISH PLANTAIN SUBCUTANEOUS SOLUTION 1:20                                        | GM        |                       |

| Drug Name                                                     | Drug Tier | Notes |
|---------------------------------------------------------------|-----------|-------|
| ENGLISH WALNUT (DIAGNOSTIC) INJECTION SOLUTION 1:20           | GM        |       |
| EPICOCCUM NIGRUM INJECTION SOLUTION 1:10 , 1:20               | GM        |       |
| ergoloid mesylates oral tablet 1 mg                           | 2         |       |
| etomidate intravenous solution 2 mg/ml                        | GM        |       |
| EUA PATIENT ASSESSMENT                                        | 4         |       |
| EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML | GM        |       |
| FC2 FEMALE CONDOM                                             | PV        |       |
| FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM                     | PV        |       |
| FIRDAPSE ORAL TABLET 10 MG                                    | 6         | PA    |
| FIRE ANT SUBCUTANEOUS SOLUTION 1:10 , 1:20                    | GM        |       |
| FLEXBUMIN INTRAVENOUS SOLUTION 25 % , 5 %                     | GM        |       |
| FLEXICHAMBER ADULT MASK/SMALL                                 | 2         |       |
| FLEXICHAMBER CHILD MASK/LARGE                                 | 2         |       |
| FLEXICHAMBER CHILD MASK/SMALL                                 | 2         |       |
| FLEXICHAMBER DEVICE                                           | 2         |       |
| FLUDEOXYGLUCOSE F 18 INTRAVENOUS SOLUTION 20-200 MCI/ML       | GM        |       |

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| Drug Name                                                                                  | Drug Tier | Notes | Drug Name                                                       | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------------------|-----------|-------|-----------------------------------------------------------------|-----------|-----------------------|
| flumazenil intravenous solution 0.5 mg/5ml, 1 mg/10ml                                      | GM        |       | GIVLAARI SUBCUTANEOUS SOLUTION 189 MG/ML                        | 6         | PA; Specialty Medical |
| fomepizole intravenous solution 1.5 gm/1.5ml                                               | GM        |       | GLEOLAN ORAL SOLUTION RECONSTITUTED 1.5 GM                      | GM        |                       |
| formaldehyde external solution 10 %, 37 %                                                  | 2         |       | GLUCAGEN DIAGNOSTIC INJECTION SOLUTION RECONSTITUTED 1 MG       | GM        |                       |
| fresenius propoven intravenous emulsion 1000 mg/100ml, 200 mg/20ml, 500 mg/50ml            | GM        |       | GLUCAGON HCL (DIAGNOSTIC) INJECTION SOLUTION RECONSTITUTED 1 MG | GM        |                       |
| GADAVIST INTRAVENOUS SOLUTION PREFILLED SYRINGE 10 MMOL/10ML, 15 MMOL/15ML, 7.5 MMOL/7.5ML | GM        |       | glutaraldehyde external solution 25 %                           | 2         |                       |
| GEL-FLOW EXTERNAL KIT                                                                      | GM        |       | GOLDENROD SUBCUTANEOUS SOLUTION 1:20                            | GM        |                       |
| GELFOAM-JMI POWDER EXTERNAL KIT                                                            | GM        |       | GRASS POLLEN MIXTURE OF 6 INJECTION SOLUTION 100000 BAU/ML      | GM        |                       |
| GELFOAM-JMI SPONGE EXTERNAL KIT                                                            | GM        |       | GRASS POLLEN(K-O-R-T-SWT VERN) INJECTION SOLUTION 100000 BAU/ML | GM        |                       |
| GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML                                        | GM        |       | GRASTEK SUBLINGUAL TABLET SUBLINGUAL 2800 BAU                   | 3         |                       |
| GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16.8 MG/2ML                            | GM        |       | GREEN ASH POLLEN INJECTION SOLUTION 1:20                        | GM        |                       |
| GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML                         | GM        |       | GUINEA PIG EPITHELIUM EXTRACT INJECTION SOLUTION 1:20           | GM        |                       |
| GERMAN COCKROACH SUBCUTANEOUS SOLUTION 1:20                                                | GM        |       | GVOKE VIALDX INTRAVENOUS SOLUTION 1 MG/0.2ML                    | GM        |                       |

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| Drug Name                                                        | Drug Tier | Notes | Drug Name                                                                                                                                                                                                                                                                            | Drug Tier | Notes                       |
|------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| HACKBERRY SUBCUTANEOUS SOLUTION 1:20                             | GM        |       | ID NOW INFLUENZA A & B 2 CONTR IN VITRO KIT                                                                                                                                                                                                                                          | GM        |                             |
| HAZELNUT (FILBERT)(DIAGNOSTIC ) INJECTION SOLUTION 1:20          | GM        |       | ID NOW INFLUENZA A & B 2 IN VITRO KIT                                                                                                                                                                                                                                                | GM        |                             |
| HISTATROL INJECTION SOLUTION 2.75 MG/ML                          | GM        |       | ID NOW STREP A2 IN VITRO KIT                                                                                                                                                                                                                                                         | GM        |                             |
| HONEY BEE VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED 550 MCG | GM        |       | IGALMI SUBLINGUAL FILM 120 MCG, 180 MCG                                                                                                                                                                                                                                              | GM        |                             |
| HORSE EPITHELIUM (DIAGNOSTIC) INJECTION SOLUTION 1:20            | GM        |       | INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM                                                                                                                                                                                                                  | 3         |                             |
| HORSE EPITHELIUM SUBCUTANEOUS SOLUTION 1:10 , 1:20               | GM        |       | indocyanine green intravenous solution reconstituted 25 mg                                                                                                                                                                                                                           | GM        |                             |
| HUMAN ALBUMIN GRIFOLS INTRAVENOUS SOLUTION 25 %                  | GM        |       | INSPIREASE RESERVOIR BAGS                                                                                                                                                                                                                                                            | 2         |                             |
| HYALGAN INTRA-ARTICULAR SOLUTION 20 MG/2ML                       | GM        |       | INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 4MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 6 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM | 3         |                             |
| HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML     | GM        |       | INSUPEN32G EXTR3ME 32G X 6 MM                                                                                                                                                                                                                                                        | 3         |                             |
| HYLENEX INJECTION SOLUTION 150 UNIT/ML                           | GM        |       | isosulfan blue subcutaneous solution 1 %                                                                                                                                                                                                                                             | GM        |                             |
| HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 24 MG/3ML     | GM        |       |                                                                                                                                                                                                                                                                                      |           |                             |
| IC GREEN INJECTION SOLUTION RECONSTITUTED 25 MG                  | GM        |       | IWILFIN ORAL TABLET 192 MG                                                                                                                                                                                                                                                           | 6         | PA; QL (240 EA per 30 days) |

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| Drug Name                                                          | Drug Tier | Notes |
|--------------------------------------------------------------------|-----------|-------|
| JOHNSON GRASS SUBCUTANEOUS SOLUTION 1:20                           | GM        |       |
| JUNE GRASS POLLEN STANDARDIZED SUBCUTANEOUS SOLUTION 100000 BAU/ML | GM        |       |
| KEDBUMIN INTRAVENOUS SOLUTION 25 %                                 | GM        |       |
| KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG                           | 3         | PA    |
| KETALAR INJECTION SOLUTION 10 MG/ML, 100 MG/ML, 50 MG/ML           | GM        |       |
| KETAMINE HCL INJECTION SOLUTION 0.6 MG/ML, 1 MG/ML                 | GM        |       |
| ketamine hcl injection solution 50 mg/ml                           | GM        |       |
| KETAMINE HCL INJECTION SOLUTION PREFILLED SYRINGE 25 MG/ML         | GM        |       |
| KETAMINE HCL INTRAVENOUS SOLUTION 100 MG/100ML                     | GM        |       |
| KETAMINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 300 MG/30ML    | GM        |       |
| ketamine hcl solution 10 mg/ml injection                           | GM        |       |
| KETAMINE HCL SOLUTION 10 MG/ML INJECTION                           | GM        |       |
| KETAMINE HCL SOLUTION 100 MG/ML INJECTION                          | GM        |       |

| Drug Name                                                            | Drug Tier | Notes                      |
|----------------------------------------------------------------------|-----------|----------------------------|
| ketamine hcl solution 100 mg/ml injection                            | GM        |                            |
| KETAMINE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.85 MG/50ML-% | GM        |                            |
| KINEVAC INJECTION SOLUTION RECONSTITUTED 5 MCG                       | GM        |                            |
| KOCHIA SUBCUTANEOUS SOLUTION 1:20                                    | GM        |                            |
| KORSUVA INTRAVENOUS SOLUTION 65 MCG/1.3ML                            | 6         | Specialty Medical          |
| LAMBS QUARTERS (DIAGNOSTIC) INJECTION SOLUTION 1:20                  | GM        |                            |
| LAMBS QUARTERS SUBCUTANEOUS SOLUTION 1:20                            | GM        |                            |
| LENSCALE SUBCUTANEOUS SOLUTION 1:20                                  | GM        |                            |
| LEXISCAN INTRAVENOUS SOLUTION 0.4 MG/5ML                             | GM        |                            |
| l-glutamine oral packet 5 gm                                         | 2         |                            |
| LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML                           | 6         | PA                         |
| LIVMARLI ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG                      | 6         | PA; QL (30 EA per 30 days) |
| LYMPHOSEEK INJECTION KIT                                             | GM        |                            |
| LYNKUET ORAL CAPSULE 60 MG                                           | 4         |                            |

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| Drug Name                                                                 | Drug Tier | Notes                      |
|---------------------------------------------------------------------------|-----------|----------------------------|
| MACI INTRA-ARTICULAR SHEET                                                | GM        |                            |
| MEADOW FESCUE GRASS POLLEN SUBCUTANEOUS SOLUTION 100000 BAU/ML            | GM        |                            |
| MELALEUCA SUBCUTANEOUS SOLUTION 1:20                                      | GM        |                            |
| MELATOL PEDIATRIC SLEEP/CALM ORAL LIQUID 1 MG/ML                          | 4         |                            |
| MESQUITE SUBCUTANEOUS SOLUTION 1:20                                       | GM        |                            |
| METHERGINE ORAL TABLET 0.2 MG                                             | 4         | Brand penalty applies      |
| methohexital sodium injection solution reconstituted 500 mg               | GM        |                            |
| methylene blue intravenous solution 50 mg/10ml                            | GM        |                            |
| methylergonovine maleate injection solution 0.2 mg/ml                     | GM        |                            |
| methylergonovine maleate oral tablet 0.2 mg                               | 2         |                            |
| MICROCHAMBER DEVICE                                                       | 2         |                            |
| MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG                         | 6         | PA; QL (90 EA per 30 days) |
| MITE (D. FARINAE) INJECTION SOLUTION 10000 AU/ML, 30000 AU/ML, 5000 AU/ML | GM        |                            |

| Drug Name                                                                       | Drug Tier | Notes |
|---------------------------------------------------------------------------------|-----------|-------|
| MITE (D. FARINAE) SUBCUTANEOUS SOLUTION 10000 AU/ML                             | GM        |       |
| MITE (D. PTERONYSSINUS) INJECTION SOLUTION 10000 AU/ML, 30000 AU/ML, 5000 AU/ML | GM        |       |
| MITE (D. PTERONYSSINUS) SUBCUTANEOUS SOLUTION 10000 AU/ML                       | GM        |       |
| MIXED FEATHERS SUBCUTANEOUS SOLUTION 1:20                                       | GM        |       |
| MIXED RAGWEED SUBCUTANEOUS SOLUTION 1:20                                        | GM        |       |
| MIXED VESPID VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED 550-550-550 MCG     | GM        |       |
| MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 88 MG/4ML                   | GM        |       |
| MOUNTAIN CEDAR (DIAGNOSTIC) INJECTION SOLUTION 1:20                             | GM        |       |
| MOUNTAIN CEDAR POLLEN INJECTION SOLUTION 1:20                                   | GM        |       |
| MOUNTAIN CEDAR SUBCUTANEOUS SOLUTION 1:20                                       | GM        |       |
| MOUSE EPITHELIUM (DIAGNOSTIC) INJECTION SOLUTION 1:20                           | GM        |       |

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| Drug Name                                                                    | Drug Tier | Notes |
|------------------------------------------------------------------------------|-----------|-------|
| MOUSE EPITHELIUM SUBCUTANEOUS SOLUTION 1:20                                  | GM        |       |
| MUCOR INJECTION SOLUTION 1:20                                                | GM        |       |
| MUCOR INTRADERMAL SOLUTION 1:20                                              | GM        |       |
| MUGWORT SUBCUTANEOUS SOLUTION 1:20                                           | GM        |       |
| MYOBLOC INTRAMUSCULAR SOLUTION 10000 UNIT/2ML, 2500 UNIT/0.5ML, 5000 UNIT/ML | GM        | PA    |
| NETTLE (DIAGNOSTIC) INJECTION SOLUTION 1:40                                  | GM        |       |
| NETTLE INJECTION SOLUTION 1:40                                               | GM        |       |
| NITHIODETE INTRAVENOUS KIT 300MG/10ML&12.5 GM/50ML                           | GM        |       |
| NORTHERN QUAHOG CLAM(DIAGNOST) INJECTION SOLUTION 1:20                       | GM        |       |
| NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM                                     | 3         |       |
| NOVOFINE PEN NEEDLE 32G X 6 MM                                               | 3         |       |
| NOVOFINE PLUS PEN NEEDLE 32G X 4 MM                                          | 3         |       |
| OCTAPLAS BLOOD GROUP A INTRAVENOUS SOLUTION                                  | GM        |       |

| Drug Name                                      | Drug Tier | Notes |
|------------------------------------------------|-----------|-------|
| OCTAPLAS BLOOD GROUP AB INTRAVENOUS SOLUTION   | GM        |       |
| OCTAPLAS BLOOD GROUP B INTRAVENOUS SOLUTION    | GM        |       |
| OCTAPLAS BLOOD GROUP O INTRAVENOUS SOLUTION    | GM        |       |
| ODACTRA SUBLINGUAL TABLET SUBLINGUAL 12 SQ-HDM | 4         |       |
| OLIVE TREE SUBCUTANEOUS SOLUTION 1:20          | GM        |       |
| OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT              | 4         | PA    |
| OMNIPOD 5 DEXG7G6 PODS GEN 5                   | 4         | PA    |
| OMNIPOD 5 G7 INTRO (GEN 5) KIT                 | 4         | PA    |
| OMNIPOD 5 G7 PODS (GEN 5)                      | 4         | PA    |
| OMNIPOD 5 LIBRE2 G6 INTRO GEN5 KIT             | 4         | PA    |
| OMNIPOD 5 LIBRE2 PLUS G6 PODS                  | 4         | PA    |
| OMNIPOD CLASSIC PODS (GEN 3)                   | 4         | PA    |
| OMNIPOD DASH INTRO (GEN 4) KIT                 | 4         | PA    |
| OMNIPOD DASH PDM (GEN 4) KIT                   | 4         | PA    |
| OMNIPOD DASH PODS (GEN 4)                      | 4         | PA    |
| OMNIPOD POD PALS                               | 4         | PA    |
| OPTICHAMBER DIAMOND                            | 2         |       |

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| Drug Name                                                          | Drug Tier | Notes | Drug Name                                                                                                                                                                          | Drug Tier | Notes |
|--------------------------------------------------------------------|-----------|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|
| OPTICHAMBER DIAMOND-LG MASK DEVICE                                 | 2         |       | PALFORZIA INITIAL DOSE 1-3YRS ORAL 0.5 & 1 & 1.5 & 3 MG                                                                                                                            | 5         | PA    |
| OPTICHAMBER DIAMOND-MD MASK                                        | 2         |       | PALFORZIA INITIAL DOSE 4-17YRS ORAL 0.5 & 1 & 1.5 & 3 & 6 MG                                                                                                                       | 5         | PA    |
| OPTICHAMBER DIAMOND-SM MASK                                        | 2         |       | PALFORZIA ORAL 0.5 & 1 & 1.5 & 3 & 6 MG, 2 X 1 MG & 10 MG, 2 X 100 MG, 2 X 20 MG, 2 X 20 MG & 2 X 100 MG, 20 MG, 20 MG & 100 MG, 3 X 1 MG, 3 X 20 MG & 100 MG, 4 X 20 MG, 6 X 1 MG | 5         | PA    |
| OPTIONS GYNOL II CONTRACEPTIVE VAGINAL GEL 3 %                     | PV        |       | PALFORZIA ORAL PACKET 300 MG                                                                                                                                                       | 5         | PA    |
| ORAFATE MOUTH/THROAT PASTE 10 %                                    | 4         |       | PANDA MASK LARGE                                                                                                                                                                   | 2         |       |
| ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 300 IR     | 4         |       | PANDA MASK MEDIUM                                                                                                                                                                  | 2         |       |
| ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 100 IR | 4         |       | PANDA MASK SMALL                                                                                                                                                                   | 2         |       |
| ORALAIR SUBLINGUAL TABLET SUBLINGUAL 300 IR                        | 4         |       | PARI VORTEX ADULT MASK                                                                                                                                                             | 2         |       |
| ORANGE (DIAGNOSTIC) INJECTION SOLUTION 1:20                        | GM        |       | PARI VORTEX PEDIATRIC MASK                                                                                                                                                         | 2         |       |
| ORCHARD GRASS POLLEN SUBCUTANEOUS SOLUTION 100000 BAU/ML           | GM        |       | PEANUT (DIAGNOSTIC) INJECTION SOLUTION 1:20                                                                                                                                        | GM        |       |
| OREGON ASH POLLEN INJECTION SOLUTION 1:20                          | GM        |       | PECAN NUT (DIAGNOSTIC) INJECTION SOLUTION 1:20                                                                                                                                     | GM        |       |
| ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 30 MG/2ML     | GM        |       | PECAN POLLEN INJECTION SOLUTION 1:20                                                                                                                                               | GM        |       |
| PALFORZIA (1 MG DAILY DOSE) ORAL 1 X 1 MG                          | 5         | PA    | PECAN POLLEN SUBCUTANEOUS SOLUTION 1:20                                                                                                                                            | GM        |       |
|                                                                    |           |       | PEDIATRIC PANDA MASK                                                                                                                                                               | 2         |       |
|                                                                    |           |       | PEDMARK INTRAVENOUS SOLUTION 12.5 %                                                                                                                                                | GM        |       |

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| Drug Name                                                                              | Drug Tier | Notes                 | Drug Name                                                                                           | Drug Tier | Notes |
|----------------------------------------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------------------------------------------|-----------|-------|
| PEN NEEDLE/5-BEVEL TIP 31G X 8 MM , 32G X 4 MM                                         | 3         |                       | PORK (DIAGNOSTIC) INJECTION SOLUTION 1:20                                                           | GM        |       |
| PENICILLIUM NOTATUM (DIAGNOST) INJECTION SOLUTION 1:20                                 | GM        |                       | PRAXBIND INTRAVENOUS SOLUTION 2.5 GM/50ML                                                           | GM        |       |
| PENICILLIUM NOTATUM INJECTION SOLUTION 1:10 , 1:20                                     | GM        |                       | PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/2ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML | GM        |       |
| PENTIPS GENERIC PEN NEEDLES 32G X 6 MM                                                 | 3         |                       | PRECISION XTRA-GLUCOSE/KETONE DEVICE                                                                | 3         |       |
| PERENNIAL RYE GRASS POLLEN INJECTION SOLUTION 10000 BAU/ML, 100000 BAU/ML              | GM        |                       | PRIVET SUBCUTANEOUS SOLUTION 1:20                                                                   | GM        |       |
| PERENNIAL RYE GRASS POLLEN SUBCUTANEOUS SOLUTION 100000 BAU/ML                         | GM        |                       | PRO COMFORT SPACER ADULT                                                                            | 2         |       |
| PHENOL INJECTION SOLUTION 6 %                                                          | GM        |                       | PRO COMFORT SPACER CHILD                                                                            | 2         |       |
| PHEXXI VAGINAL GEL 1.8-1-0.4 %                                                         | PV        |                       | PRO COMFORT SPACER INFANT DEVICE                                                                    | 2         |       |
| PHOTREXA-PHOTREXA VISCOUS KIT OPHTHALMIC SOLUTION PREFILLED SYRINGE 0.146 & 0.146-20 % | 6         | PA; Specialty Medical | PROCARE SPACER/ADULT MASK DEVICE                                                                    | 2         |       |
| PINEAPPLE (DIAGNOSTIC) INJECTION SOLUTION 1:20                                         | GM        |                       | PROCARE SPACER/CHILD MASK DEVICE                                                                    | 2         |       |
| PIP PEN NEEDLES 32G X 4MM 32G X 4 MM                                                   | 3         |                       | propofol intravenous emulsion 1000 mg/100ml, 200 mg/20ml, 500 mg/50ml                               | GM        |       |
| POCKET SPACER DEVICE                                                                   | 2         |                       | propofol-lipuro intravenous emulsion 1000 mg/100ml                                                  | GM        |       |

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| Drug Name                                                                                                                                                                                               | Drug Tier | Notes | Drug Name                                                                           | Drug Tier | Notes |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-------|-------------------------------------------------------------------------------------|-----------|-------|
| PROTHELIAL MOUTH/THROAT PASTE 10 %                                                                                                                                                                      | 4         |       | QUICKVUE INFLUENZA A+B TEST IN VITRO KIT                                            | GM        |       |
| PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM                                                                                                                                               | GM        |       | QUICKVUE IN-LINE STREP A TEST IN VITRO KIT                                          | GM        |       |
| PROVAYBLUE INTRAVENOUS SOLUTION 50 MG/10ML                                                                                                                                                              | GM        |       | RABBIT EPITHELIUM SUBCUTANEOUS SOLUTION 1:10 , 1:20                                 | GM        |       |
| PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM , 31G X 6 MM , 32G X 4 MM                                                                                                                                     | 3         |       | RADIOGARDASE ORAL CAPSULE 0.5 GM                                                    | 6         |       |
| PURE COMFORT SPACER CHAMBER DEVICE                                                                                                                                                                      | 2         |       | RAGWITEK SUBLINGUAL TABLET SUBLINGUAL 12 AMB A 1-U                                  | 3         |       |
| PYRIDOSTIGMINE BROMIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG                                                                                                                                   | 4         |       | RAYA SURE PEN NEEDLE 29G X 12MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM | 3         |       |
| QUACK GRASS INJECTION SOLUTION 128000 PNU/ML                                                                                                                                                            | GM        |       | RED ALDER POLLEN INJECTION SOLUTION 1:20                                            | GM        |       |
| QUEEN PALM SUBCUTANEOUS SOLUTION 1:20                                                                                                                                                                   | GM        |       | RED BIRCH SUBCUTANEOUS SOLUTION 1:20                                                | GM        |       |
| QUICK TOUCH INSULIN PEN NEEDLE 29G X 12.7MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM , 33G X 8 MM | 3         |       | RED CEDAR INJECTION SOLUTION 1:20                                                   | GM        |       |
| QUICKVUE + STREP A TEST IN VITRO KIT                                                                                                                                                                    | GM        |       | RED CEDAR SUBCUTANEOUS SOLUTION 1:20                                                | GM        |       |
| QUICKVUE DIPSTICK STREP A TEST IN VITRO KIT                                                                                                                                                             | GM        |       | RED MAPLE (DIAGNOSTIC) INJECTION SOLUTION 1:20                                      | GM        |       |
|                                                                                                                                                                                                         |           |       | RED MAPLE INJECTION SOLUTION 1:20                                                   | GM        |       |
|                                                                                                                                                                                                         |           |       | RED MAPLE SUBCUTANEOUS SOLUTION 1:20                                                | GM        |       |
|                                                                                                                                                                                                         |           |       | RED MULBERRY SUBCUTANEOUS SOLUTION 1:20                                             | GM        |       |

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| Drug Name                                                                     | Drug Tier | Notes                 | Drug Name                                              | Drug Tier | Notes |
|-------------------------------------------------------------------------------|-----------|-----------------------|--------------------------------------------------------|-----------|-------|
| RED OAK (DIAGNOSTIC) INJECTION SOLUTION 1:20                                  | GM        |                       | SACCHAROMYCES CEREVISIAE INJECTION SOLUTION 1:20       | GM        |       |
| RED OAK INJECTION SOLUTION 1:20                                               | GM        |                       | SAFETY PEN NEEDLES 30G X 5 MM , 30G X 8 MM             | 3         |       |
| RED TOP GRASS POLLEN SUBCUTANEOUS SOLUTION 100000 BAU/ML                      | GM        |                       | SAGEBRUSH (DIAGNOSTIC) INJECTION SOLUTION 1:20         | GM        |       |
| regadenoson intravenous solution 0.4 mg/5ml                                   | GM        |                       | SAGEBRUSH INJECTION SOLUTION 1:20                      | GM        |       |
| R-GENE 10 INTRAVENOUS SOLUTION 10 %                                           | GM        |                       | SAGEBRUSH SUBCUTANEOUS SOLUTION 1:20                   | GM        |       |
| RICE (DIAGNOSTIC) INJECTION SOLUTION 1:20                                     | GM        |                       | saline bacteriostatic injection solution 0.9 %         | GM        |       |
| RIVER BIRCH POLLEN INJECTION SOLUTION 1:20                                    | GM        |                       | SALINE-PHENOL INJECTION SOLUTION 0.4-0.9 %             | GM        |       |
| ROUGH MARSH ELDER SUBCUTANEOUS SOLUTION 1:20                                  | GM        |                       | SEA SCALLOPS (DIAGNOSTIC) INJECTION SOLUTION 1:20      | GM        |       |
| ROUGH PIGWEED INJECTION SOLUTION 1:20                                         | GM        |                       | SESAME SEED (DIAGNOSTIC) INJECTION SOLUTION 1:20       | GM        |       |
| RUSSIAN THISTLE SUBCUTANEOUS SOLUTION 1:20                                    | GM        |                       | SHAGBARK HICKORY SUBCUTANEOUS SOLUTION 1:20            | GM        |       |
| RYPLAZIM INTRAVENOUS SOLUTION RECONSTITUTED 68.8 MG                           | 6         | PA; Specialty Medical | SHEEP SORREL SUBCUTANEOUS SOLUTION 1:20                | GM        |       |
| RYSTIGGO SUBCUTANEOUS SOLUTION 280 MG/2ML, 420 MG/3ML, 560 MG/4ML, 840 MG/6ML | 6         | PA; Specialty Medical | SHEEP SORREL-DOCK (DIAGNOSTIC) INJECTION SOLUTION 1:20 | GM        |       |

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| Drug Name                                               | Drug Tier | Notes |
|---------------------------------------------------------|-----------|-------|
| SHEEP SORREL-YELLOW DOCK INJECTION SOLUTION 1:20        | GM        |       |
| SHORT RAGWEED POLLEN EXT SUBCUTANEOUS SOLUTION 1:20     | GM        |       |
| SHORT RAGWEED-GIANT RAGWEED INJECTION SOLUTION 1:20     | GM        |       |
| SHORT-GIANT RAGWEED (DIAGNOST) INJECTION SOLUTION 1:20  | GM        |       |
| SINCALIDE INJECTION SOLUTION RECONSTITUTED 5 MCG        | GM        |       |
| sodium chloride bacteriostatic solution 0.9 % injection | GM        |       |
| SODIUM CHLORIDE BACTERIOSTATIC SOLUTION 0.9 % INJECTION | GM        |       |
| SODIUM FLUORIDE F 18 INTRAVENOUS SOLUTION 10-200 MCI/ML | GM        |       |
| sodium nitrite intravenous solution 30 mg/ml            | GM        |       |
| sodium thiosulfate intravenous solution 250 mg/ml       | GM        |       |
| SOFIA INFLUENZA A+B FIA IN VITRO KIT                    | GM        |       |
| SOFIA STREP A FIA IN VITRO KIT                          | GM        |       |
| SOFIA STREP A+ FIA IN VITRO KIT                         | GM        |       |

| Drug Name                                               | Drug Tier | Notes                      |
|---------------------------------------------------------|-----------|----------------------------|
| SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG  | 6         | PA; QL (30 EA per 30 days) |
| SOLESTA INJECTION GEL 50-15 MG/ML                       | GM        |                            |
| SORBITOL IRRIGATION SOLUTION 3 %                        | 4         |                            |
| sorbitol-mannitol irrigation solution 2.7-0.54 gm/100ml | 2         |                            |
| SORREL/DOCK MIX INJECTION SOLUTION 1:20                 | GM        |                            |
| SOYBEAN (DIAGNOSTIC) INJECTION SOLUTION 1:40            | GM        |                            |
| SPINRAZA INTRATHECAL SOLUTION 12 MG/5ML                 | 6         | PA; Specialty Medical      |
| SPINY PIGWEED SUBCUTANEOUS SOLUTION 1:20                | GM        |                            |
| SPRING BIRCH POLLEN SUBCUTANEOUS SOLUTION 1:20          | GM        |                            |
| SPY AGENT GREEN INJECTION SOLUTION RECONSTITUTED 25 MG  | GM        |                            |
| SPY- MIS KIT INJECTION SOLUTION RECONSTITUTED 25 MG     | GM        |                            |
| SPY-PHI KIT INJECTION SOLUTION RECONSTITUTED 25 MG      | GM        |                            |

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| Drug Name                                                                                                                     | Drug Tier | Notes             | Drug Name                                                        | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|-------------------|------------------------------------------------------------------|-----------|-----------------------------|
| STERILE DILUENT FLOLAN PH 12 INTRAVENOUS SOLUTION                                                                             | GM        |                   | SWEET VERNAL GRASS POLLEN SUBCUTANEOUS SOLUTION 100000 BAU/ML    | GM        |                             |
| STERILE DILUENT FOR REMODULIN INTRAVENOUS SOLUTION                                                                            | GM        |                   | SYNOJOYNT INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML   | GM        |                             |
| sterile water for injection solution injection                                                                                | GM        |                   | SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16 MG/2ML     | GM        |                             |
| STERILE WATER FOR INJECTION SOLUTION INJECTION                                                                                | GM        |                   | SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 48 MG/6ML | GM        |                             |
| STRAWBERRY (DIAGNOSTIC) INJECTION SOLUTION 1:40                                                                               | GM        |                   | TACHOSIL EXTERNAL PATCH 4.8 X 4.8 CM, 9.5 X 4.8 CM               | 4         |                             |
| SUGAMMADEX SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/2ML, 100 MG/ML, 150 MG/3ML, 200 MG/2ML, 200 MG/4ML, 50 MG/5ML | GM        |                   | TALL RAGWEED SUBCUTANEOUS SOLUTION 1:20                          | GM        |                             |
| SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML                                                             | GM        |                   | TAVNEOS ORAL CAPSULE 10 MG                                       | 6         | PA; QL (180 EA per 30 days) |
| SUSVIMO OCULAR IMPLANT INTRAVITREAL IMPLANT                                                                                   | 6         | Specialty Medical | TECHLITE PLUS PEN NEEDLES 32G X 4 MM                             | 3         |                             |
| SWEET CHERRY (DIAGNOSTIC) INJECTION SOLUTION 1:20                                                                             | GM        |                   | THROMBI-GEL 10 EXTERNAL PAD                                      | GM        |                             |
| SWEET GUM SUBCUTANEOUS SOLUTION 1:20                                                                                          | GM        |                   | THROMBI-GEL 100 EXTERNAL PAD                                     | GM        |                             |
|                                                                                                                               |           |                   | THROMBI-GEL 40 EXTERNAL PAD                                      | GM        |                             |
|                                                                                                                               |           |                   | THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED 0.9 MG             | GM        |                             |

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| Drug Name                                                                                | Drug Tier | Notes | Drug Name                                                                                              | Drug Tier | Notes                            |
|------------------------------------------------------------------------------------------|-----------|-------|--------------------------------------------------------------------------------------------------------|-----------|----------------------------------|
| TIMOTHY GRASS<br>POLLEN ALLERGEN<br>INJECTION SOLUTION<br>10000 BAU/ML, 100000<br>BAU/ML | GM        |       | ULTRABAG/DIANEAL<br>PD-2/2.5% DEX<br>INTRAPERITONEAL<br>SOLUTION 396 MOSM/L                            | 4         |                                  |
| TIMOTHY GRASS<br>POLLEN ALLERGEN<br>SUBCUTANEOUS<br>SOLUTION 100000<br>BAU/ML            | GM        |       | ULTRABAG/DIANEAL<br>PD-2/4.25%DEX<br>INTRAPERITONEAL<br>SOLUTION 485 MOSM/L                            | 4         |                                  |
| TISSEEL EXTERNAL<br>KIT 10 ML, 2 ML, 4 ML                                                | GM        |       | ULTRABAG/DIANEAL/2.<br>5% DEXTROSE<br>INTRAPERITONEAL<br>SOLUTION 395 MOSM/L                           | 4         |                                  |
| TISSEEL EXTERNAL<br>SOLUTION                                                             | GM        |       | ULTRABAG/DIANEAL/4.<br>25% DEX<br>INTRAPERITONEAL<br>SOLUTION 483 MOSM/L                               | 4         |                                  |
| TODAY SPONGE<br>VAGINAL 1000 MG                                                          | PV        |       | UNIFINE OTC PEN<br>NEEDLES 31G X 5 MM ,<br>32G X 4 MM                                                  | 3         |                                  |
| TOMATO<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:40                                     | GM        |       | UNIFINE PROTECT<br>PEN NEEDLE 30G X 5<br>MM , 30G X 8 MM , 32G<br>X 4 MM                               | 3         |                                  |
| TREE MIX 9 INJECTION<br>SOLUTION 1:20                                                    | GM        |       | VCF VAGINAL<br>CONTRACEPTIVE<br>VAGINAL FILM 28 %                                                      | PV        |                                  |
| TRICHOPHYTON<br>MENTAGROPHYTES<br>SUBCUTANEOUS<br>SOLUTION 1:20                          | GM        |       | VCF VAGINAL<br>CONTRACEPTIVE<br>VAGINAL GEL 4 %                                                        | PV        |                                  |
| TRILURON INTRA-<br>ARTICULAR SOLUTION<br>REFILLED SYRINGE<br>20 MG/2ML                   | GM        |       | VENOMIL MIXED<br>VESPID VENOM<br>INJECTION SOLUTION<br>RECONSTITUTED 550-<br>550-550 MCG               | GM        |                                  |
| TRIVISC INTRA-<br>ARTICULAR SOLUTION<br>REFILLED SYRINGE<br>25 MG/2.5ML                  | GM        |       | VEOZAH ORAL TABLET<br>45 MG                                                                            | 4         | ST; QL (30<br>EA per 30<br>days) |
| TRUE COMFORT<br>SAFETY PEN NEEDLE<br>31G X 5 MM , 31G X 6<br>MM , 32G X 4 MM             | 3         |       | VERIFINE INSULIN PEN<br>NEEDLE 29G X 12MM ,<br>31G X 5 MM , 31G X 8<br>MM , 32G X 4 MM , 32G<br>X 6 MM | 3         |                                  |
| TRUE COVER DEVICE                                                                        | PV        |       |                                                                                                        |           |                                  |
| ULTRABAG/DIANEAL<br>PD-2/1.5% DEX<br>INTRAPERITONEAL<br>SOLUTION 346 MOSM/L              | 4         |       |                                                                                                        |           |                                  |

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| Drug Name                                                                   | Drug Tier | Notes | Drug Name                                                     | Drug Tier | Notes |
|-----------------------------------------------------------------------------|-----------|-------|---------------------------------------------------------------|-----------|-------|
| VERIFINE PLUS PEN<br>NEEDLE 31G X 5 MM ,<br>31G X 8 MM , 32G X 4<br>MM      | 3         |       | WHITE ALDER<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20     | GM        |       |
| VIRGINIA LIVE OAK<br>SUBCUTANEOUS<br>SOLUTION 1:20                          | GM        |       | WHITE ALDER<br>INJECTION SOLUTION<br>1:20                     | GM        |       |
| VISCO-3 INTRA-<br>ARTICULAR SOLUTION<br>PREFILLED SYRINGE<br>25 MG/2.5ML    | GM        |       | WHITE ASH<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20       | GM        |       |
| VISTOGARD ORAL<br>PACKET 10 GM                                              | 6         |       | WHITE ASH POLLEN<br>INJECTION SOLUTION<br>1:20 , 40000 PNU/ML | GM        |       |
| VORTEX VALVE<br>CHAMBER-PEDI MASK<br>DEVICE                                 | 2         |       | WHITE ASH<br>SUBCUTANEOUS<br>SOLUTION 1:20                    | GM        |       |
| VORTEX VALVED<br>HOLDING CHAMBER<br>DEVICE                                  | 2         |       | WHITE BIRCH<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20     | GM        |       |
| VYKAT XR ORAL<br>TABLET EXTENDED<br>RELEASE 24 HOUR 150<br>MG, 25 MG, 75 MG | 6         | PA    | WHITE BIRCH<br>INJECTION SOLUTION<br>1:20                     | GM        |       |
| WASP VENOM<br>INJECTION SOLUTION<br>RECONSTITUTED 550<br>MCG                | GM        |       | WHITE BIRCH<br>SUBCUTANEOUS<br>SOLUTION 1:20                  | GM        |       |
| WEED MIXED<br>ALLERGEN INJECTION<br>SOLUTION 1:20                           | GM        |       | WHITE MULBERRY<br>SUBCUTANEOUS<br>SOLUTION 1:20               | GM        |       |
| WESTERN JUNIPER<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:40               | GM        |       | WHITE OAK<br>SUBCUTANEOUS<br>SOLUTION 1:20                    | GM        |       |
| WESTERN JUNIPER<br>INJECTION SOLUTION<br>1:40                               | GM        |       | WHITE PINE<br>SUBCUTANEOUS<br>SOLUTION 1:20                   | GM        |       |
| WESTERN JUNIPER<br>SUBCUTANEOUS<br>SOLUTION 1:20                            | GM        |       | WHITE POTATO<br>(DIAGNOSTIC)<br>INJECTION SOLUTION<br>1:20    | GM        |       |
| WESTERN RAGWEED<br>INJECTION SOLUTION<br>1:20                               | GM        |       |                                                               |           |       |

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| Drug Name                                                         | Drug Tier | Notes | Drug Name                                                               | Drug Tier | Notes                          |
|-------------------------------------------------------------------|-----------|-------|-------------------------------------------------------------------------|-----------|--------------------------------|
| WHITE-FACED HORNET VENOM INJECTION SOLUTION RECONSTITUTED 550 MCG | GM        |       | WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 %                            | PV        |                                |
| WHOLE GRAIN BARLEY(DIAGNOSTIC) INJECTION SOLUTION 1:20            | GM        |       | XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT, 50 UNIT | GM        | PA                             |
| WHOLE WHEAT (DIAGNOSTIC) INJECTION SOLUTION 1:20                  | GM        |       | XIAFLEX INJECTION SOLUTION RECONSTITUTED 0.9 MG                         | 6         | PA; Specialty Medical          |
| WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 %                      | PV        |       | XPHOZAH ORAL TABLET 20 MG, 30 MG                                        | 6         | PA; QL (60 EA per 30 days)     |
| WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 %                      | PV        |       | YELLOW DOCK SUBCUTANEOUS SOLUTION 1:20                                  | GM        |                                |
| WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 %                      | PV        |       | YELLOW HORNET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED 550 MCG    | GM        |                                |
| WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 %                      | PV        |       | YELLOW JACKET VENOM PROTEIN INJECTION SOLUTION RECONSTITUTED 550 MCG    | GM        |                                |
| WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 %                      | PV        |       | ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 16.6 MG/0.416ML        | 6         | PA; QL (11.648 ML per 28 days) |
| WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 %                      | PV        |       | ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 23 MG/0.574ML          | 6         | PA; QL (16.072 ML per 28 days) |
| WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 %                      | PV        |       |                                                                         |           |                                |

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| Drug Name                                                                                | Drug Tier | Notes                                  |
|------------------------------------------------------------------------------------------|-----------|----------------------------------------|
| ZILBRYSQ<br>SUBCUTANEOUS<br>SOLUTION PREFILLED<br>SYRINGE 32.4<br>MG/0.81ML              | 6         | PA; QL<br>(22.68 ML<br>per 28<br>days) |
| ZOKINVY ORAL<br>CAPSULE 50 MG, 75<br>MG                                                  | 6         | PA                                     |
| <b>Ophthalmic Agents -<br/>Drugs for Eye Allergy,<br/>Infection and<br/>Inflammation</b> |           |                                        |
| ACULAR LS<br>OPHTHALMIC<br>SOLUTION 0.4 %                                                | 4         | Brand<br>penalty<br>applies            |
| ACULAR OPHTHALMIC<br>SOLUTION 0.5 %                                                      | 4         | Brand<br>penalty<br>applies            |
| ACUVAIL OPHTHALMIC<br>SOLUTION 0.45 %                                                    | 4         |                                        |
| ALOCRIAL OPHTHALMIC<br>SOLUTION 2 %                                                      | 4         |                                        |
| ALOMIDE OPHTHALMIC<br>SOLUTION 0.1 %                                                     | 3         |                                        |
| ALREX OPHTHALMIC<br>SUSPENSION 0.2 %                                                     | 4         | Brand<br>penalty<br>applies            |
| AZASITE OPHTHALMIC<br>SOLUTION 1 %                                                       | 4         |                                        |
| azelastine hcl ophthalmic<br>solution 0.05 %                                             | 2         |                                        |
| bacitracin ophthalmic<br>ointment 500 unit/gm                                            | 2         |                                        |
| bepotastine besilate<br>ophthalmic solution 1.5<br>%                                     | 2         |                                        |
| BEPREVE<br>OPHTHALMIC<br>SOLUTION 1.5 %                                                  | 4         | Brand<br>penalty<br>applies            |
| BESIVANCE<br>OPHTHALMIC<br>SUSPENSION 0.6 %                                              | 4         |                                        |

| Drug Name                                                                         | Drug Tier | Notes                       |
|-----------------------------------------------------------------------------------|-----------|-----------------------------|
| BETADINE<br>OPHTHALMIC PREP<br>OPHTHALMIC<br>SOLUTION 5 %                         | 4         |                             |
| bromfenac sodium (once-<br>daily) ophthalmic solution<br>0.09 %                   | 2         |                             |
| bromfenac sodium<br>ophthalmic solution 0.07<br>%, 0.075 %                        | 2         |                             |
| BROMSITE<br>OPHTHALMIC<br>SOLUTION 0.075 %                                        | 4         | Brand<br>penalty<br>applies |
| CILOXAN OPHTHALMIC<br>OINTMENT 0.3 %                                              | 4         |                             |
| ciprofloxacin hcl<br>ophthalmic solution 0.3<br>%                                 | 2         |                             |
| cromolyn sodium<br>ophthalmic solution 4 %                                        | 1         |                             |
| dexamethasone sodium<br>phosphate ophthalmic<br>solution 0.1 %                    | 2         |                             |
| DEXAMETHASONE-<br>MOXIFLOXACIN<br>INTRAOCULAR<br>SOLUTION 1-5 MG/ML               | GM        |                             |
| DEXAMETH-<br>MOXIFLOX-<br>KETOROLAC<br>INTRAOCULAR<br>SOLUTION 1-0.5-0.4<br>MG/ML | GM        |                             |
| DEXTENZA<br>OPHTHALMIC INSERT<br>0.4 MG                                           | 6         | Specialty<br>Medical        |
| DEXYCU<br>INTRAOCULAR<br>SUSPENSION 9 %                                           | 6         | Specialty<br>Medical        |
| diclofenac sodium<br>ophthalmic solution 0.1<br>%                                 | 2         |                             |

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| Drug Name                                               | Drug Tier | Notes                 | Drug Name                                                       | Drug Tier | Notes                 |
|---------------------------------------------------------|-----------|-----------------------|-----------------------------------------------------------------|-----------|-----------------------|
| difluprednate ophthalmic emulsion 0.05 %                | 2         |                       | levofloxacin ophthalmic solution 0.5 %, 1.5 %                   | 2         |                       |
| DUREZOL OPHTHALMIC EMULSION 0.05 %                      | 4         | Brand penalty applies | LOTEMAX OPHTHALMIC GEL 0.5 %                                    | 4         | Brand penalty applies |
| epinastine hcl ophthalmic solution 0.05 %               | 2         |                       | LOTEMAX OPHTHALMIC OINTMENT 0.5 %                               | 4         |                       |
| erythromycin ophthalmic ointment 5 mg/gm                | 2         |                       | LOTEMAX OPHTHALMIC SUSPENSION 0.5 %                             | 4         | Brand penalty applies |
| FLAREX OPHTHALMIC SUSPENSION 0.1 %                      | 3         |                       | LOTEMAX SM OPHTHALMIC GEL 0.38 %                                | 4         |                       |
| fluorometholone ophthalmic suspension 0.1 %             | 2         |                       | loteprednol etabonate ophthalmic gel 0.5 %                      | 2         |                       |
| flurbiprofen sodium ophthalmic solution 0.03 %          | 2         |                       | loteprednol etabonate ophthalmic suspension 0.2 %, 0.5 %        | 2         |                       |
| FML FORTE OPHTHALMIC SUSPENSION 0.25 %                  | 3         |                       | MAXIDEX OPHTHALMIC SUSPENSION 0.1 %                             | 6         | Specialty Medical     |
| FML LIQUIFILM OPHTHALMIC SUSPENSION 0.1 %               | 4         | Brand penalty applies | MAXITROL OPHTHALMIC OINTMENT 3.5-10000-0.1                      | 4         | Brand penalty applies |
| gatifloxacin ophthalmic solution 0.5 %                  | 2         |                       | MAXITROL OPHTHALMIC SUSPENSION 0.1 %                            | 4         | Brand penalty applies |
| gentamicin sulfate ophthalmic solution 0.3 %            | 2         |                       | MITOMYCIN INTRAOCULAR SOLUTION PREFILLED SYRINGE 0.02 %, 0.04 % | GM        |                       |
| ILEVRO OPHTHALMIC SUSPENSION 0.3 %                      | 4         |                       | MITOSOL OPHTHALMIC KIT 0.2 MG                                   | GM        |                       |
| ILUVIEN INTRAVITREAL IMPLANT 0.19 MG                    | GM        |                       | moxifloxacin hcl (2x day) ophthalmic solution 0.5 %             | 2         |                       |
| INVELTYS OPHTHALMIC SUSPENSION 1 %                      | 4         |                       | MOXIFLOXACIN HCL INTRAOCULAR SOLUTION 1 MG/ML, 5 MG/ML          | GM        |                       |
| ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 % | 2         |                       |                                                                 |           |                       |
| KLARITY-A OPHTHALMIC SOLUTION 1 %                       | 4         |                       |                                                                 |           |                       |

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| Drug Name                                                                                | Drug Tier | Notes                       | Drug Name                                                                            | Drug Tier | Notes                       |
|------------------------------------------------------------------------------------------|-----------|-----------------------------|--------------------------------------------------------------------------------------|-----------|-----------------------------|
| MOXIFLOXACIN HCL<br>INTRAOCULAR<br>SOLUTION PREFILLED<br>SYRINGE 0.16 %, 0.3<br>MG/0.3ML | GM        |                             | PREDNISOL ACE-<br>MOXIFLOX-BROMFEN<br>OPHTHALMIC<br>SUSPENSION 1-0.5-<br>0.075 %     | 4         |                             |
| moxifloxacin hcl<br>ophthalmic solution 0.5<br>%                                         | 2         |                             | prednisolone acetate<br>ophthalmic suspension 1<br>%                                 | 2         |                             |
| NATACYN<br>OPHTHALMIC<br>SUSPENSION 5 %                                                  | 4         |                             | PREDNISOLONE<br>ACETATE P-F<br>OPHTHALMIC<br>SUSPENSION 1 %                          | 4         |                             |
| neomycin-polymyxin-<br>dexameth ophthalmic<br>ointment 3.5-10000-0.1                     | 2         |                             | prednisolone sodium<br>phosphate ophthalmic<br>solution 1 %                          | 2         |                             |
| neomycin-polymyxin-<br>dexameth ophthalmic<br>suspension 0.1 %, 3.5-<br>10000-0.1        | 2         |                             | PREDNISOLON-<br>GATIFLOX-<br>BROMFENAC<br>OPHTHALMIC<br>SOLUTION 1-0.5-0.075<br>%    | 4         |                             |
| neomycin-polymyxin-hc<br>ophthalmic suspension<br>3.5-10000-1                            | 2         |                             | PREDNISOLON-<br>GATIFLOX-<br>BROMFENAC<br>OPHTHALMIC<br>SUSPENSION 1-0.5-<br>0.075 % | 4         |                             |
| NEVANAC<br>OPHTHALMIC<br>SUSPENSION 0.1 %                                                | 4         |                             | PREDNISOLON-<br>MOXIFLOX-<br>BROMFENAC<br>OPHTHALMIC<br>SOLUTION 1-0.5-0.075<br>%    | 4         |                             |
| OCUFLOX<br>OPHTHALMIC<br>SOLUTION 0.3 %                                                  | 4         | Brand<br>penalty<br>applies | PROLENSA<br>OPHTHALMIC<br>SOLUTION 0.07 %                                            | 4         | Brand<br>penalty<br>applies |
| ofloxacin ophthalmic<br>solution 0.3 %                                                   | 2         |                             | sulfacetamide sodium<br>ophthalmic ointment 10<br>%                                  | 2         |                             |
| OZURDEX<br>INTRAVITREAL<br>IMPLANT 0.7 MG                                                | 6         | Specialty<br>Medical        | sulfacetamide sodium<br>ophthalmic solution 10 %                                     | 2         |                             |
| POVIDONE-IODINE<br>OPHTHALMIC<br>SOLUTION 5 %                                            | 4         |                             | TOBRADEX<br>OPHTHALMIC<br>OINTMENT 0.3-0.1 %                                         | 3         |                             |
| PRED FORTE<br>OPHTHALMIC<br>SUSPENSION 1 %                                               | 4         | Brand<br>penalty<br>applies |                                                                                      |           |                             |
| PRED MILD<br>OPHTHALMIC<br>SUSPENSION 0.12 %                                             | 3         |                             |                                                                                      |           |                             |

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| Drug Name                                                 | Drug Tier | Notes                 |
|-----------------------------------------------------------|-----------|-----------------------|
| TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 %              | 3         |                       |
| tobramycin ophthalmic solution 0.3 %                      | 1         |                       |
| tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %  | 2         |                       |
| TOBREX OPHTHALMIC OINTMENT 0.3 %                          | 3         |                       |
| trifluridine ophthalmic solution 1 %                      | 2         |                       |
| TRIMOXI+ INTRAOCULAR SUSPENSION 15-1 MG/ML                | GM        |                       |
| TRIPLE PMB OPHTHALMIC SOLUTION RECONSTITUTED 1-0.5-0.09 % | 4         |                       |
| TRIPLE PMK OPHTHALMIC SOLUTION RECONSTITUTED 1-0.5-0.5 %  | 4         |                       |
| UPNEEQ OPHTHALMIC SOLUTION 0.1 %                          | 4         |                       |
| VIGAMOX OPHTHALMIC SOLUTION 0.5 %                         | 4         | Brand penalty applies |
| XDEMVEY OPHTHALMIC SOLUTION 0.25 %                        | 6         | PA                    |
| ZERVATE OPHTHALMIC SOLUTION 0.24 %                        | 4         |                       |
| ZIRGAN OPHTHALMIC GEL 0.15 %                              | 4         |                       |

| Drug Name                                                     | Drug Tier | Notes                 |
|---------------------------------------------------------------|-----------|-----------------------|
| <b>Ophthalmic Agents - Drugs for Glaucoma</b>                 |           |                       |
| acetazolamide er oral capsule extended release 12 hour 500 mg | 2         |                       |
| acetazolamide oral tablet 125 mg, 250 mg                      | 2         |                       |
| ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %, 0.15 %                  | 4         | Brand penalty applies |
| apraclonidine hcl ophthalmic solution 0.5 %                   | 2         |                       |
| AZOPT OPHTHALMIC SUSPENSION 1 %                               | 4         | Brand penalty applies |
| betaxolol hcl ophthalmic solution 0.5 %                       | 2         |                       |
| BETIMOL OPHTHALMIC SOLUTION 0.25 %                            | 4         |                       |
| BETIMOL OPHTHALMIC SOLUTION 0.5 %                             | 4         | Brand penalty applies |
| BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 %                       | 4         |                       |
| bimatoprost ophthalmic solution 0.03 %                        | 2         |                       |
| brimonidine tartrate ophthalmic solution 0.15 %               | 2         |                       |
| brimonidine tartrate ophthalmic solution 0.2 %                | 1         |                       |
| brimonidine tartrate-timolol ophthalmic solution 0.2-0.5 %    | 2         |                       |
| BRIMONIDINE-DORZOLAMIDE OPHTHALMIC SOLUTION 0.15-2 %          | 4         |                       |

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| Drug Name                                                  | Drug Tier | Notes                 |
|------------------------------------------------------------|-----------|-----------------------|
| brinzolamide ophthalmic suspension 1 %                     | 2         |                       |
| carteolol hcl ophthalmic solution 1 %                      | 2         |                       |
| COMBIGAN OPTHALMIC SOLUTION 0.2-0.5 %                      | 3         | Brand penalty applies |
| COSOPT OPTHALMIC SOLUTION 2-0.5 %                          | 4         | Brand penalty applies |
| COSOPT PF OPTHALMIC SOLUTION 2-0.5 %                       | 4         | Brand penalty applies |
| dichlorphenamide oral tablet 50 mg                         | 6         | PA                    |
| DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC                     | 4         |                       |
| dorzolamide hcl solution 2 % ophthalmic                    | 2         |                       |
| dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %    | 2         |                       |
| dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 % | 2         |                       |
| DURYSTA INTRAOCULAR IMPLANT 10 MCG                         | 6         | Specialty Medical     |
| IOPIDINE OPTHALMIC SOLUTION 1 %                            | 4         |                       |
| ISTALOL OPTHALMIC SOLUTION 0.5 %                           | 4         | Brand penalty applies |
| KEVEYIS ORAL TABLET 50 MG                                  | 6         | PA                    |
| latanoprost ophthalmic solution 0.005 %                    | 2         |                       |
| LATANOPROST-TIMOLOL MALEATE OPTHALMIC SOLUTION 0.005-0.5 % | 4         |                       |

| Drug Name                                                     | Drug Tier | Notes |
|---------------------------------------------------------------|-----------|-------|
| levobunolol hcl ophthalmic solution 0.5 %                     | 2         |       |
| LUMIGAN OPTHALMIC SOLUTION 0.01 %                             | 3         |       |
| methazolamide oral tablet 25 mg, 50 mg                        | 2         |       |
| ORMALVI ORAL TABLET 50 MG                                     | 6         | PA    |
| PHOSPHOLINE IODIDE OPTHALMIC SOLUTION RECONSTITUTED 0.125 %   | 3         |       |
| pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %             | 2         |       |
| RHOPRESSA OPTHALMIC SOLUTION 0.02 %                           | 4         |       |
| ROCKLATAN OPTHALMIC SOLUTION 0.02-0.005 %                     | 4         |       |
| SIMBRINZA OPTHALMIC SUSPENSION 1-0.2 %                        | 3         |       |
| tafluprost (pf) ophthalmic solution 0.0015 %                  | 2         |       |
| timolol hemihydrate ophthalmic solution 0.5 %                 | 2         |       |
| timolol maleate (once-daily) ophthalmic solution 0.5 %        | 2         |       |
| timolol maleate ocudose ophthalmic solution 0.5 %             | 2         |       |
| timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 % | 2         |       |

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| Drug Name                                                             | Drug Tier | Notes                 |
|-----------------------------------------------------------------------|-----------|-----------------------|
| timolol maleate ophthalmic solution 0.25 %, 0.5 %                     | 1         |                       |
| timolol maleate pf ophthalmic solution 0.25 %, 0.5 %                  | 2         |                       |
| TIMOLOL-BRIMON-DORZOL-BIMATOPR OPTHALMIC SOLUTION 0.5-0.15-2-0.01 %   | 4         |                       |
| TIMOLOL-BRIMON-DORZOL-LATANOPR OPTHALMIC SOLUTION 0.5-0.15-2 - 0.005% | 4         |                       |
| TIMOLOL-BRIMONIDINE-DORZOLAMID OPTHALMIC SOLUTION 0.5-0.15-2 %        | 4         |                       |
| TIMOLOL-DORZOLAMID-BIMATOPROST OPTHALMIC SOLUTION 0.5-2-0.01 %        | 4         |                       |
| TIMOLOL-DORZOLAMID-LATANOPROST OPTHALMIC SOLUTION 0.5-0.15-0.005 %    | 4         |                       |
| TIMOPTIC OCUDOSE OPTHALMIC SOLUTION 0.25 %, 0.5 %                     | 4         | Brand penalty applies |
| TRAVATAN Z OPTHALMIC SOLUTION 0.004 %                                 | 4         | Brand penalty applies |
| travoprost (bak free) ophthalmic solution 0.004 %                     | 2         |                       |
| VYZULTA OPTHALMIC SOLUTION 0.024 %                                    | 4         |                       |

| Drug Name                                                         | Drug Tier | Notes                 |
|-------------------------------------------------------------------|-----------|-----------------------|
| XALATAN OPTHALMIC SOLUTION 0.005 %                                | 4         | Brand penalty applies |
| ZIOPTAN OPTHALMIC SOLUTION 0.0015 %                               | 4         | Brand penalty applies |
| <b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b> |           |                       |
| ak-fluor intravenous solution 10 %                                | GM        |                       |
| AK-FLUOR INTRAVENOUS SOLUTION 25 %                                | GM        |                       |
| AKTEN OPTHALMIC GEL 3.5 %                                         | 4         |                       |
| ALCAINE OPTHALMIC SOLUTION 0.5 %                                  | 4         | Brand penalty applies |
| ALTACAIN OPTHALMIC SOLUTION 0.5 %                                 | 4         |                       |
| altafrin ophthalmic solution 10 %, 2.5 %                          | 2         |                       |
| AMVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE 9.6 MG/0.8ML        | GM        |                       |
| AMVISC PLUS INTRAOCULAR SOLUTION PREFILLED SYRINGE 12.8 MG/0.8ML  | GM        |                       |
| atropine sulfate ophthalmic ointment 1 %                          | 2         |                       |
| ATROPINE SULFATE OPTHALMIC SOLUTION 0.01 %                        | 4         |                       |
| atropine sulfate ophthalmic solution 1 %                          | 2         |                       |
| bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm      | 2         |                       |

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| Drug Name                                                                                                                                     | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %                                                                                         | 2         |                       |
| BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE 6 MG/0.05ML                                                                                     | 5         | Specialty Medical     |
| BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE 1.25 MG/0.05ML, 2 MG/0.08ML, 2.25 MG/0.09ML, 2.5 MG/0.1ML, 2.75 MG/0.11ML, 3.25 MG/0.13ML | 6         | Specialty Medical     |
| BSS INTRAOCULAR SOLUTION                                                                                                                      | 4         |                       |
| BSS PLUS INTRAOCULAR SOLUTION                                                                                                                 | 4         |                       |
| BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05ML                                                                                                   | 5         | Specialty Medical     |
| CIMERLI INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML                                                                                    | 5         | Specialty Medical     |
| CLEARVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE 25 MG/ML                                                                                     | GM        |                       |
| CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 %                                                                                                       | 4         |                       |
| CYCLOGYL OPHTHALMIC SOLUTION 1 %                                                                                                              | 4         | Brand penalty applies |
| CYCLOMYDRIL OPHTHALMIC SOLUTION 0.2-1 %                                                                                                       | 3         |                       |

| Drug Name                                                      | Drug Tier | Notes             |
|----------------------------------------------------------------|-----------|-------------------|
| cyclopentolate hcl ophthalmic solution 1 %                     | 1         |                   |
| cyclosporine ophthalmic emulsion 0.05 %                        | 2         |                   |
| CYSTADROPS OPHTHALMIC SOLUTION 0.37 %                          | 4         | PA                |
| CYSTARAN OPHTHALMIC SOLUTION 0.44 %                            | 3         |                   |
| DUOVISC INTRAOCULAR KIT 0.85-0.5 ML                            | GM        |                   |
| EYLEA HD INTRAVITREAL SOLUTION 8 MG/0.07ML                     | 6         | Specialty Medical |
| EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML                        | 6         | Specialty Medical |
| EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML      | 6         | Specialty Medical |
| fluorescein intravenous solution 10 %                          | GM        |                   |
| fluorescein sodium intravenous solution 25 %                   | GM        |                   |
| FLUORESCEIN SODIUM/BENOXINATE OPHTHALMIC SOLUTION 0.3-0.4 %    | GM        |                   |
| FLUORESCITE INTRAVENOUS SOLUTION 10 %                          | GM        |                   |
| GELFILM OPHTHALMIC FILM                                        | 4         |                   |
| HEALON DUET PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE 1 & 3 % | GM        |                   |

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| Drug Name                                                                        | Drug Tier | Notes             | Drug Name                                                                      | Drug Tier | Notes                      |
|----------------------------------------------------------------------------------|-----------|-------------------|--------------------------------------------------------------------------------|-----------|----------------------------|
| HEALON GV PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE 15.3 MG/0.85ML              | GM        |                   | LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML                 | 4         |                            |
| HEALON PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE 5.5 MG/0.55ML, 8.5 MG/0.85ML   | GM        |                   | LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.5 MG/0.05ML                 | 6         | Specialty Medical          |
| HEALON5 PRO INTRAOCULAR SOLUTION PREFILLED SYRINGE 13.8 MG/0.6ML                 | GM        |                   | LUXTURNA INTRAOCULAR SUSPENSION 5000000000000000 VG/ML                         | 6         | PA; Specialty Medical      |
| HOMATROPAIRE OPHTHALMIC SOLUTION 5 %                                             | 2         |                   | MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML                                          | 6         | ST; QL (12 ML per 30 days) |
| IZERVAY INTRAVITREAL SOLUTION 2 MG/0.1ML                                         | 6         | Specialty Medical | MIOCHOL-E INTRAOCULAR SOLUTION RECONSTITUTED 20 MG                             | 4         |                            |
| KLARITY-C DROPS OPHTHALMIC EMULSION 0.1 %                                        | 4         |                   | MIOSTAT INTRAOCULAR SOLUTION 0.01 %                                            | 4         |                            |
| LACRISERT OPHTHALMIC INSERT 5 MG                                                 | 4         |                   | MOXIFLOXACIN HCL-BSS INTRAVITREAL SOLUTION 1 MG/ML                             | GM        |                            |
| LIDOCAINE-EPINEPHRINE INTRAOCULAR SOLUTION 7.5-0.25 MG/ML                        | GM        |                   | neomycin-bacitracin zn-polymyx ophthalmic ointment 3.5-400-10000 , 5-400-10000 | 2         |                            |
| LIDOCAINE-PHENYLEPHRINE INTRAOCULAR SOLUTION 1-1.5 %                             | GM        |                   | neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025              | 2         |                            |
| LIDOCAINE-PHENYLEPHRINE-BSS INTRAOCULAR SOLUTION PREFILLED SYRINGE 1-1.5 % (1ML) | GM        |                   | NEO-POLYCIN HC OPHTHALMIC OINTMENT 1 %                                         | 4         |                            |
|                                                                                  |           |                   | NEO-POLYCIN OPHTHALMIC OINTMENT 3.5-400-10000                                  | 4         | Brand penalty applies      |

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| Drug Name                                                        | Drug Tier | Notes                      | Drug Name                                                                               | Drug Tier | Notes                 |
|------------------------------------------------------------------|-----------|----------------------------|-----------------------------------------------------------------------------------------|-----------|-----------------------|
| NUVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE 9.6 MG/0.8ML       | GM        |                            | PROVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE 4 MG/0.4ML, 5.5 MG/0.55ML, 8.5 MG/0.85ML | GM        |                       |
| OMIDRIA INTRAOCULAR SOLUTION 1-0.3 %                             | GM        |                            | RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %                                           | 3         |                       |
| OXERVATE OPHTHALMIC SOLUTION 0.002 %                             | 6         | PA; QL (28 ML per 28 days) | RESTASIS OPHTHALMIC EMULSION 0.05 %                                                     | 3         | Brand penalty applies |
| PAVBLU INTRAVITREAL SOLUTION 2 MG/0.05ML                         | 5         | Specialty Medical          | sulfacetamide-prednisolone ophthalmic solution 10-0.23 %                                | 2         |                       |
| PAVBLU INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML       | 5         | Specialty Medical          | SUSVIMO (IMPLANT 1ST FILL) INTRAVITREAL SOLUTION 10 MG/0.1ML                            | 6         | Specialty Medical     |
| phenylephrine hcl ophthalmic solution 10 %, 2.5 %                | 2         |                            | SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION 10 MG/0.1ML                              | 6         | Specialty Medical     |
| POLYCIN OPHTHALMIC OINTMENT 500-10000 UNIT/GM                    | 4         | Brand penalty applies      | SYFOVRE INTRAVITREAL SOLUTION 15 MG/0.1ML                                               | 6         | Specialty Medical     |
| polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-% | 2         |                            | tetracaine hcl ophthalmic solution 0.5 %                                                | 2         |                       |
| PREDNISOLONE-BROMFENAC OPHTHALMIC SOLUTION 1-0.075 %             | 4         |                            | TISSUEBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE 0.025 %                               | GM        |                       |
| PREDNISOLONE-BROMFENAC OPHTHALMIC SUSPENSION 1-0.075 %           | GM        |                            | TOTALVISC INTRAOCULAR SOLUTION PREFILLED SYRINGE 1 & 2.5 %                              | GM        |                       |
| PREDNISOLONE-GATIFLOXACIN OPHTHALMIC SUSPENSION 1-0.5 %          | 4         |                            | TROPICAMIDE-CYCLOPENTOLATE-PE OPHTHALMIC SOLUTION 1-1-2.5 %                             | 4         |                       |
| proparacaine hcl ophthalmic solution 0.5 %                       | 2         |                            |                                                                                         |           |                       |

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| Drug Name                                                                                       | Drug Tier | Notes                       |
|-------------------------------------------------------------------------------------------------|-----------|-----------------------------|
| TROPICAMIDE-PHENYLEPHRINE OPHTHALMIC SOLUTION 1-2.5 %                                           | 4         |                             |
| TROPIC-CYCLOPENT-PE-KETOROLAC OPHTHALMIC SOLUTION 1-1-10-0.5 %, 1-1-2.5-0.5 %                   | 4         |                             |
| TROPIC-CYCLOPENT-PE-KETOROLAC OPHTHALMIC SOLUTION PREFILLED SYRINGE 1-1-10-0.5 %, 1-1-2.5-0.5 % | 4         |                             |
| TROPIC-PROPARACA-PE-KETOROLAC OPHTHALMIC SOLUTION 1-0.5-2.5-0.5 %                               | 4         |                             |
| TYRVAYA NASAL SOLUTION 0.03 MG/ACT                                                              | 4         | ST; QL (8.4 ML per 30 days) |
| VABYSMO INTRAVITREAL SOLUTION 6 MG/0.05ML                                                       | 6         | Specialty Medical           |
| VABYSMO INTRAVITREAL SOLUTION PREFILLED SYRINGE 6 MG/0.05ML                                     | 6         | Specialty Medical           |
| VERKAZIA OPHTHALMIC EMULSION 0.1 %                                                              | 4         |                             |
| VISIONBLUE INTRAOCULAR SOLUTION PREFILLED SYRINGE 0.06 %                                        | GM        |                             |
| VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED 15 MG                                               | 6         | Specialty Medical           |

| Drug Name                                               | Drug Tier | Notes                 |
|---------------------------------------------------------|-----------|-----------------------|
| XIIDRA OPHTHALMIC SOLUTION 5 %                          | 3         |                       |
| ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 %                   | 4         |                       |
| <b>Otic Agents - Drugs for Ear Conditions</b>           |           |                       |
| acetic acid otic solution 2 %                           | 2         |                       |
| CETRAXAL OTIC SOLUTION 0.2 %                            | 4         | Brand penalty applies |
| CIPRO HC OTIC SUSPENSION 0.2-1 %                        | 4         |                       |
| ciprofloxacin hcl otic solution 0.2 %                   | 2         |                       |
| ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %   | 2         |                       |
| CIPROFLOXACIN-FLUOCINOLONE PF OTIC SOLUTION 0.3-0.025 % | 4         |                       |
| CORTISPORIN-TC OTIC SUSPENSION 3.3-3-10-0.5 MG/ML       | 4         |                       |
| DERMOTIC OTIC OIL 0.01 %                                | 4         |                       |
| flac otic oil 0.01 %                                    | 2         |                       |
| fluocinolone acetonide otic oil 0.01 %                  | 2         |                       |
| hydrocortisone-acetic acid otic solution 1-2 %          | 2         |                       |
| neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1    | 2         |                       |
| neomycin-polymyxin-hc otic suspension 3.5-10000-1       | 2         |                       |
| ofloxacin otic solution 0.3 %                           | 2         |                       |
| OTOVEL OTIC SOLUTION 0.3-0.025 %                        | 4         |                       |

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| Drug Name                                                                      | Drug Tier | Notes                 |
|--------------------------------------------------------------------------------|-----------|-----------------------|
| PRAMOTIC OTIC LIQUID 1-0.1 %                                                   | 4         |                       |
| <b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b> |           |                       |
| ADRENALIN NASAL SOLUTION 0.1 %                                                 | 4         |                       |
| azelastine hcl nasal solution 0.1 %, 0.15 %, 137 mcg/spray                     | 2         |                       |
| benzonatate oral capsule 100 mg, 150 mg, 200 mg                                | 2         |                       |
| budesonide nasal suspension 32 mcg/act                                         | 2         |                       |
| CARBINOXAMINE MALEATE ER ORAL SUSPENSION EXTENDED RELEASE 4 MG/5ML             | 4         |                       |
| carbinoxamine maleate oral solution 4 mg/5ml                                   | 2         |                       |
| carbinoxamine maleate oral tablet 4 mg                                         | 2         |                       |
| CARBZAH ORAL SOLUTION 4 MG/5ML                                                 | 4         | Brand penalty applies |
| CINQAIR INTRAVENOUS SOLUTION 100 MG/10ML                                       | 6         | PA; Specialty Medical |
| clemastine fumarate oral syrup 0.67 mg/5ml                                     | 2         |                       |
| clemastine fumarate oral tablet 2.68 mg                                        | 2         |                       |
| CLEMASZ ORAL TABLET 2.68 MG                                                    | 4         | Brand penalty applies |
| CLEMSZA ORAL TABLET 2.68 MG                                                    | 4         | Brand penalty applies |

| Drug Name                                                                   | Drug Tier | Notes                 |
|-----------------------------------------------------------------------------|-----------|-----------------------|
| CUROSURF INTRATRACHEAL SUSPENSION 120 MG/1.5ML, 240 MG/3ML                  | 4         |                       |
| cypheptadine hcl oral syrup 2 mg/5ml                                        | 2         |                       |
| cypheptadine hcl oral tablet 4 mg                                           | 2         |                       |
| desloratadine oral tablet 5 mg                                              | 2         |                       |
| desloratadine oral tablet dispersible 2.5 mg, 5 mg                          | 2         |                       |
| diphenhydramine hcl injection solution 50 mg/ml                             | 2         |                       |
| diphenhydramine hcl oral elixir 12.5 mg/5ml                                 | 2         |                       |
| epinephrine hcl (nasal) nasal solution 0.1 %                                | 2         |                       |
| flunisolide nasal solution 25 mcg/act (0.025%)                              | 2         |                       |
| fluticasone propionate nasal suspension 50 mcg/act                          | 2         |                       |
| guaifenesin ac oral syrup 100-10 mg/5ml                                     | 2         |                       |
| guaifenesin-codeine oral solution 100-10 mg/5ml, 200-20 mg/10ml             | 2         |                       |
| HYCODAN ORAL SOLUTION 5-1.5 MG/5ML                                          | 4         | Brand penalty applies |
| HYCODAN ORAL TABLET 5-1.5 MG                                                | 4         | Brand penalty applies |
| hydrocod poli-chlorphe poli er oral suspension extended release 10-8 mg/5ml | 2         |                       |
| hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml                     | 2         |                       |

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| Drug Name                                               | Drug Tier | Notes |
|---------------------------------------------------------|-----------|-------|
| hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg       | 2         |       |
| hydromet oral solution 5-1.5 mg/5ml                     | 2         |       |
| HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %, 7 %    | 4         |       |
| INFASURF INTRATRACHEAL SUSPENSION 35-0.9 MG/ML-%        | 4         |       |
| ipratropium bromide nasal solution 0.03 %, 0.06 %       | 2         |       |
| KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE 4 MG/5ML   | 4         |       |
| levocetirizine dihydrochloride oral solution 2.5 mg/5ml | 2         |       |
| levocetirizine dihydrochloride oral tablet 5 mg         | 2         |       |
| maxi-tuss ac oral solution 100-10 mg/5ml                | 2         |       |
| mometasone furoate nasal suspension 50 mcg/act          | 2         |       |
| NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %            | 2         |       |
| NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %            | 4         |       |
| NEOTUSS PLUS ORAL LIQUID 7.5-4-30 MG/5ML                | 4         |       |
| olopatadine hcl nasal solution 0.6 %                    | 2         |       |

| Drug Name                                                              | Drug Tier | Notes             |
|------------------------------------------------------------------------|-----------|-------------------|
| OMNARIS NASAL SUSPENSION 50 MCG/ACT                                    | 4         |                   |
| potassium iodide (expectorant) oral solution 1 gm/ml                   | 2         |                   |
| promethazine vc oral syrup 6.25-5 mg/5ml                               | 2         |                   |
| promethazine vc/codeine oral syrup 6.25-5-10 mg/5ml                    | 2         |                   |
| promethazine-codeine oral solution 6.25-10 mg/5ml                      | 2         |                   |
| promethazine-dm oral syrup 15-6.25 mg/5ml, 6.25-15 mg/5ml              | 2         |                   |
| promethazine-phenylephrine oral syrup 6.25-5 mg/5ml                    | 2         |                   |
| PULMOSAL INHALATION NEBULIZATION SOLUTION 7 %                          | 2         |                   |
| QNASL CHILDRENS NASAL AEROSOL SOLUTION 40 MCG/ACT                      | 4         |                   |
| QNASL NASAL AEROSOL SOLUTION 80 MCG/ACT                                | 4         |                   |
| QUZYTIR INTRAVENOUS SOLUTION 10 MG/ML                                  | GM        |                   |
| RYCLORA ORAL SOLUTION 2 MG/5ML                                         | 4         |                   |
| SINUVA NASAL IMPLANT 1350 MCG                                          | 5         | Specialty Medical |
| sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 % | 2         |                   |

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| Drug Name                                                                                               | Drug Tier | Notes                     |
|---------------------------------------------------------------------------------------------------------|-----------|---------------------------|
| SSKI ORAL SOLUTION 1 GM/ML                                                                              | 4         |                           |
| SURVANTA INTRATRACHEAL SUSPENSION 25-0.9 MG/ML-%                                                        | 4         |                           |
| TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR 54.3-8 MG                                               | 4         |                           |
| ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT                                                               | 4         |                           |
| <b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>                |           |                           |
| ACCOLATE ORAL TABLET 10 MG, 20 MG                                                                       | 4         | Brand penalty applies     |
| acetylcysteine inhalation solution 10 %, 20 %                                                           | 2         |                           |
| ADRENALIN INJECTION SOLUTION 1 MG/ML, 30 MG/30ML                                                        | GM        | QL (4 ML per 30 days)     |
| ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT | 4         | PA; Brand penalty applies |
| ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT                             | 4         | PA                        |
| AIRSUPRA INHALATION AEROSOL 90-80 MCG/ACT                                                               | 3         | QL (3 GM per 30 days)     |
| albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation                                 | 1         | QL (3 GM per 30 days)     |

| Drug Name                                                                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------------------------------------|-----------|-----------------------|
| albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation                                        | 2         | QL (3 GM per 30 days) |
| albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml | 2         |                       |
| albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation                                              | 2         |                       |
| ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION                                              | 4         |                       |
| albuterol sulfate oral syrup 2 mg/5ml, 8 mg/20ml                                                               | 2         |                       |
| albuterol sulfate oral tablet 2 mg                                                                             | 2         |                       |
| albuterol sulfate oral tablet 4 mg                                                                             | 1         |                       |
| ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT, 80 MCG/ACT                                                    | 4         |                       |
| aminophylline intravenous solution 25 mg/ml                                                                    | GM        |                       |
| ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT                                       | 3         |                       |
| ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG                                                  | 6         | PA; Specialty Medical |
| arformoterol tartrate inhalation nebulization solution 15 mcg/2ml                                              | 2         |                       |

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| Drug Name                                                                                       | Drug Tier | Notes                 | Drug Name                                                                                             | Drug Tier | Notes                     |
|-------------------------------------------------------------------------------------------------|-----------|-----------------------|-------------------------------------------------------------------------------------------------------|-----------|---------------------------|
| ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT | 4         | PA                    | BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH | 4         | PA                        |
| ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT              | 3         | QL (1 EA per 30 days) | BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT                                               | 3         |                           |
| ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT               | 3         | QL (1 EA per 30 days) | BROVANA INHALATION NEBULIZATION SOLUTION 15 MCG/2ML                                                   | 4         | Brand penalty applies     |
| ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT  | 3         | QL (1 EA per 30 days) | budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml                                    | 2         |                           |
| ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT               | 3         | QL (1 EA per 30 days) | COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT                                         | 3         |                           |
| ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT                             | 3         |                       | cromolyn sodium inhalation nebulization solution 20 mg/2ml                                            | 2         |                           |
| ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT                                             | 3         |                       | DALIRESP ORAL TABLET 250 MCG, 500 MCG                                                                 | 4         | PA; Brand penalty applies |
|                                                                                                 |           |                       | DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT                                  | 3         |                           |
|                                                                                                 |           |                       | elixophyllin oral elixir 80 mg/15ml                                                                   | 2         |                           |
|                                                                                                 |           |                       | epinephrine (anaphylaxis) injection solution 1 mg/ml, 30 mg/30ml                                      | GM        | QL (4 ML per 30 days)     |
|                                                                                                 |           |                       | epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml              | 2         | QL (4 EA per 30 days)     |

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| Drug Name                                                                                                   | Drug Tier | Notes                      | Drug Name                                                                                                        | Drug Tier | Notes                  |
|-------------------------------------------------------------------------------------------------------------|-----------|----------------------------|------------------------------------------------------------------------------------------------------------------|-----------|------------------------|
| ESBRIET ORAL CAPSULE 267 MG                                                                                 | 6         | PA; QL (90 EA per 30 days) | FLUTICASONE PROPIONATE DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT    | 4         |                        |
| ESBRIET ORAL TABLET 267 MG, 801 MG                                                                          | 6         | PA; QL (90 EA per 30 days) | FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT                               | 4         | QL (24 GM per 30 days) |
| FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML                                                    | 5         | PA                         | FLUTICASONE-SALMETEROL INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT                          | 4         | PA                     |
| FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML                                                 | 5         | PA                         | fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act | 2         | PA                     |
| FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML                                                    | 5         | PA; Specialty Medical      | FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT  | 2         | PA                     |
| FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT              | 4         |                            | formoterol fumarate inhalation nebulization solution 20 mcg/2ml                                                  | 2         |                        |
| FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT                                         | 4         | QL (24 GM per 30 days)     | GLASSIA INTRAVENOUS SOLUTION 1000 MG/50ML, 4 GM/200ML, 5 GM/250ML                                                | 6         | PA; Specialty Medical  |
| FLUTICASONE FUROATE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT | 4         | PA                         | INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT                                          | 3         |                        |
| FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT    | 4         | PA                         |                                                                                                                  |           |                        |

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| Drug Name                                                                                              | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------------------------------|-----------|----------------------------|
| ipratropium bromide inhalation solution 0.02 %                                                         | 2         |                            |
| ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml                                           | 2         |                            |
| isoproterenol hcl injection solution 0.2 mg/ml                                                         | GM        |                            |
| ISOPROTERENOL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 200-0.9 MCG/50ML-%                                  | GM        |                            |
| levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml | 2         |                            |
| montelukast sodium oral packet 4 mg                                                                    | 2         |                            |
| montelukast sodium oral tablet 10 mg                                                                   | 2         |                            |
| montelukast sodium oral tablet chewable 4 mg, 5 mg                                                     | 2         |                            |
| NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML                                                   | 5         | PA                         |
| NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 40 MG/0.4ML                                  | 5         | PA                         |
| NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED 100 MG                                                      | 5         | PA; Specialty Medical      |
| OFEV ORAL CAPSULE 100 MG, 150 MG                                                                       | 6         | PA; QL (60 EA per 30 days) |

| Drug Name                                                                              | Drug Tier | Notes                      |
|----------------------------------------------------------------------------------------|-----------|----------------------------|
| PERFOROMIST INHALATION NEBULIZATION SOLUTION 20 MCG/2ML                                | 4         | Brand penalty applies      |
| pirfenidone oral capsule 267 mg                                                        | 6         | PA; QL (90 EA per 30 days) |
| pirfenidone oral tablet 267 mg, 534 mg, 801 mg                                         | 5         | PA; QL (90 EA per 30 days) |
| PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT     | 4         | QL (3 EA per 30 days)      |
| PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML                                          | 6         | PA; Specialty Medical      |
| PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT | 3         |                            |
| PULMICORT SUSPENSION INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML, 1 MG/2ML           | 4         | Brand penalty applies      |
| QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT               | 3         |                            |
| roflumilast oral tablet 250 mcg, 500 mcg                                               | 2         | PA                         |
| SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER 4 GM                                | 4         |                            |

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| Drug Name                                                              | Drug Tier | Notes                 |
|------------------------------------------------------------------------|-----------|-----------------------|
| SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT  | 3         |                       |
| SINGULAIR ORAL PACKET 4 MG                                             | 4         | Brand penalty applies |
| SINGULAIR ORAL TABLET 10 MG                                            | 4         | Brand penalty applies |
| SINGULAIR ORAL TABLET CHEWABLE 4 MG, 5 MG                              | 4         | Brand penalty applies |
| SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG                           | 3         |                       |
| SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT | 3         |                       |
| STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED 5 GM         | 4         |                       |
| STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT           | 3         |                       |
| STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT             | 3         |                       |
| SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT           | 3         |                       |
| terbutaline sulfate injection solution 1 mg/ml                         | GM        |                       |
| terbutaline sulfate oral tablet 2.5 mg, 5 mg                           | 2         |                       |

| Drug Name                                                                                              | Drug Tier | Notes                                        |
|--------------------------------------------------------------------------------------------------------|-----------|----------------------------------------------|
| TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 210 MG/1.91ML                                             | 5         | PA                                           |
| TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.91ML                                         | 5         | PA; Specialty Medical                        |
| THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG                           | 3         |                                              |
| theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg, 450 mg                    | 2         |                                              |
| theophylline er oral tablet extended release 24 hour 400 mg, 600 mg                                    | 2         |                                              |
| theophylline oral elixir 80 mg/15ml                                                                    | 2         |                                              |
| theophylline oral solution 80 mg/15ml                                                                  | 2         |                                              |
| TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT    | 3         |                                              |
| VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT                                         | 2         | Brand penalty applies; QL (3 GM per 30 days) |
| wixela inhub inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act | 2         | PA                                           |

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| Drug Name                                                                         | Drug Tier | Notes                 | Drug Name                                                              | Drug Tier | Notes |
|-----------------------------------------------------------------------------------|-----------|-----------------------|------------------------------------------------------------------------|-----------|-------|
| XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML     | 5         | PA                    | BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML                    | 6         | PA    |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML, 75 MG/0.5ML | 5         | PA                    | BRONCHITOL INHALATION CAPSULE 40 MG                                    | 6         | PA    |
| XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG                                 | 5         | PA; Specialty Medical | BRONCHITOL TOLERANCE TEST INHALATION CAPSULE 40 MG                     | 6         | PA    |
| YUPELRI INHALATION SOLUTION 175 MCG/3ML                                           | 6         | PA                    | CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG                        | 6         | PA    |
| zafirlukast oral tablet 10 mg, 20 mg                                              | 2         |                       | KALYDECO ORAL PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG              | 6         | PA    |
| ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG                                | 6         | PA; Specialty Medical | KALYDECO ORAL TABLET 150 MG                                            | 6         | PA    |
| ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 4000 MG, 5000 MG                       | 6         | PA                    | KITABIS PAK (W/ NEBULIZER) INHALATION NEBULIZATION SOLUTION 300 MG/5ML | 6         | PA    |
| zileuton er oral tablet extended release 12 hour 600 mg                           | 5         |                       | ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG                   | 6         | PA    |
| ZYFLO ORAL TABLET 600 MG                                                          | 5         |                       | ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG                             | 6         | PA    |
| <b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>           |           |                       | PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML                             | 6         | PA    |
| ALYFTREK ORAL TABLET 10-50-125 MG, 4-20-50 MG                                     | 6         | PA                    | SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG       | 6         | PA    |
|                                                                                   |           |                       | TOBI NEBULIZER INHALATION NEBULIZATION SOLUTION 300 MG/5ML             | 6         | PA    |

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| Drug Name                                                                      | Drug Tier | Notes                 | Drug Name                                                                                | Drug Tier | Notes                      |
|--------------------------------------------------------------------------------|-----------|-----------------------|------------------------------------------------------------------------------------------|-----------|----------------------------|
| TOBI PODHALER INHALATION CAPSULE 28 MG                                         | 6         | PA                    | FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG                                 | 6         | PA; Specialty Medical      |
| tobramycin inhalation nebulization solution 300 mg/4ml                         | 6         | PA                    | LETAIRIS ORAL TABLET 10 MG, 5 MG                                                         | 6         | PA                         |
| tobramycin nebulization solution 300 mg/5ml inhalation                         | 5         | PA                    | LIQREV ORAL SUSPENSION 10 MG/ML                                                          | 6         | PA                         |
| TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION                         | 6         | PA                    | OPSUMIT ORAL TABLET 10 MG                                                                | 6         | PA                         |
| TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG       | 6         | PA                    | OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG                                                   | 6         | PA; QL (30 EA per 30 days) |
| TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG               | 6         | PA                    | ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG              | 6         | PA                         |
| <b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b> |           |                       | ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG              | 6         | PA                         |
| ADCIRCA ORAL TABLET 20 MG                                                      | 6         | PA                    | ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25                 | 6         | PA                         |
| ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG                         | 6         | PA                    | ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG             | 6         | PA                         |
| alyq oral tablet 20 mg                                                         | 5         | PA                    | REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML, 8 MG/20ML | 6         | PA; Specialty Medical      |
| ambrisentan oral tablet 10 mg, 5 mg                                            | 5         | PA                    |                                                                                          |           |                            |
| bosentan oral tablet 125 mg, 62.5 mg                                           | 5         | PA                    |                                                                                          |           |                            |
| bosentan oral tablet soluble 32 mg                                             | 6         | PA                    |                                                                                          |           |                            |
| epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg          | 5         | PA; Specialty Medical |                                                                                          |           |                            |

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| Drug Name                                                                        | Drug Tier | Notes                 | Drug Name                                                                                      | Drug Tier | Notes                 |
|----------------------------------------------------------------------------------|-----------|-----------------------|------------------------------------------------------------------------------------------------|-----------|-----------------------|
| REVATIO INTRAVENOUS SOLUTION 10 MG/12.5ML                                        | 6         | PA; Specialty Medical | TYVASO DPI TITRATION KIT INHALATION POWDER 112 X 16MCG & 84 X 32MCG, 16 & 32 & 48 MCG          | 6         | PA                    |
| REVATIO ORAL SUSPENSION RECONSTITUTED 10 MG/ML                                   | 6         | PA                    | TYVASO INHALATION SOLUTION 0.6 MG/ML                                                           | 6         | PA                    |
| REVATIO ORAL TABLET 20 MG                                                        | 6         | PA                    | TYVASO REFILL KIT INHALATION SOLUTION 0.6 MG/ML                                                | 6         | PA                    |
| sildenafil citrate intravenous solution 10 mg/12.5ml                             | 5         | PA; Specialty Medical | TYVASO STARTER KIT INHALATION SOLUTION 0.6 MG/ML                                               | 6         | PA                    |
| sildenafil citrate oral suspension reconstituted 10 mg/ml                        | 6         | PA                    | UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED 1800 MCG                                            | 6         | PA; Specialty Medical |
| sildenafil citrate oral tablet 20 mg                                             | 5         | PA                    | UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG | 6         | PA                    |
| tadalafil (pah) oral tablet 20 mg                                                | 5         | PA                    | UPTRAVI TITRATION ORAL TABLET THERAPY PACK 200 & 800 MCG                                       | 6         | PA                    |
| TRACLEER ORAL TABLET 125 MG, 62.5 MG                                             | 6         | PA                    | VELETRI INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG                                      | 6         | PA; Specialty Medical |
| TRACLEER ORAL TABLET SOLUBLE 32 MG                                               | 6         | PA                    | VENTAVIS INHALATION SOLUTION 10 MCG/ML, 20 MCG/ML                                              | 6         | PA                    |
| treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml | 6         | PA; Specialty Medical | WINREVAIR SUBCUTANEOUS KIT 2 X 45 MG, 2 X 60 MG, 45 MG, 60 MG                                  | 6         | PA                    |
| TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG    | 6         | PA                    |                                                                                                |           |                       |
| TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG      | 6         | PA                    |                                                                                                |           |                       |

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| Drug Name                                                            | Drug Tier | Notes                 |
|----------------------------------------------------------------------|-----------|-----------------------|
| <b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>   |           |                       |
| baclofen intrathecal solution 10 mg/20ml, 40 mg/20ml, 40000 mcg/20ml | GM        |                       |
| baclofen oral tablet 10 mg, 15 mg, 20 mg, 5 mg                       | 2         |                       |
| BACLOFEN REFILL KIT-SYNCHROMED INTRATHECAL KIT 40 MG/20ML            | GM        |                       |
| carisoprodol oral tablet 250 mg, 350 mg                              | 2         |                       |
| chlorzoxazone oral tablet 250 mg, 375 mg, 500 mg, 750 mg             | 2         |                       |
| cyclobenzaprine hcl oral tablet 10 mg, 5 mg, 7.5 mg                  | 2         |                       |
| DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED 20 MG                    | GM        |                       |
| DANTRIUM ORAL CAPSULE 25 MG                                          | 4         | Brand penalty applies |
| dantrolene sodium intravenous solution reconstituted 20 mg           | GM        |                       |
| dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg                  | 2         |                       |
| FEXMID ORAL TABLET 7.5 MG                                            | 4         | Brand penalty applies |

| Drug Name                                                                   | Drug Tier | Notes |
|-----------------------------------------------------------------------------|-----------|-------|
| GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 40000 MCG/20ML                | GM        |       |
| LIORESAL INTRATHECAL SOLUTION 0.05 MG/ML, 10 MG/20ML, 10 MG/5ML, 40 MG/20ML | GM        |       |
| metaxalone oral tablet 400 mg, 640 mg, 800 mg                               | 2         |       |
| methocarbamol injection solution 1000 mg/10ml                               | GM        |       |
| methocarbamol oral tablet 500 mg, 750 mg                                    | 2         |       |
| NORGESIC FORTE ORAL TABLET 50-770-60 MG                                     | 4         |       |
| NORGESIC ORAL TABLET 25-385-30 MG                                           | 4         |       |
| orphenadrine citrate er oral tablet extended release 12 hour 100 mg         | 2         |       |
| orphenadrine citrate injection solution 30 mg/ml                            | GM        |       |
| orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg                      | 2         |       |
| ORPHENGESIC FORTE ORAL TABLET 50-770-60 MG                                  | 4         |       |
| revonto intravenous solution reconstituted 20 mg                            | GM        |       |
| ROBAXIN INJECTION SOLUTION 1000 MG/10ML                                     | GM        |       |

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| Drug Name                                               | Drug Tier | Notes                 |
|---------------------------------------------------------|-----------|-----------------------|
| RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED 250 MG    | GM        |                       |
| SOMA ORAL TABLET 250 MG, 350 MG                         | 4         | Brand penalty applies |
| tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg            | 2         |                       |
| tizanidine hcl oral tablet 2 mg, 4 mg                   | 2         |                       |
| VANADOM ORAL TABLET 350 MG                              | 4         | Brand penalty applies |
| ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG                  | 4         | Brand penalty applies |
| ZANAFLEX ORAL TABLET 4 MG                               | 4         | Brand penalty applies |
| <b>Sleep Disorder Agents</b>                            |           |                       |
| AMBIEN CR ORAL TABLET EXTENDED RELEASE 12.5 MG, 6.25 MG | 4         | Brand penalty applies |
| AMBIEN ORAL TABLET 10 MG, 5 MG                          | 4         | Brand penalty applies |
| armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg   | 2         |                       |
| BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG          | 4         |                       |
| DAYVIGO ORAL TABLET 10 MG, 5 MG                         | 4         |                       |
| doxepin hcl oral tablet 3 mg, 6 mg                      | 2         |                       |
| eszopiclone oral tablet 1 mg, 2 mg, 3 mg                | 2         |                       |

| Drug Name                                              | Drug Tier | Notes                      |
|--------------------------------------------------------|-----------|----------------------------|
| flurazepam hcl oral capsule 15 mg, 30 mg               | 2         |                            |
| HETLIOZ LQ ORAL SUSPENSION 4 MG/ML                     | 6         | PA                         |
| HETLIOZ ORAL CAPSULE 20 MG                             | 6         | PA                         |
| LUMRYZ ORAL PACKET 4.5 GM, 6 GM, 7.5 GM, 9 GM          | 6         | PA                         |
| LUMRYZ STARTER PACK ORAL THERAPY PACK 4.5 & 6 & 7.5 GM | 6         | PA                         |
| LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG                   | 4         | Brand penalty applies      |
| modafinil oral tablet 100 mg, 200 mg                   | 2         |                            |
| QUVIVIQ ORAL TABLET 25 MG, 50 MG                       | 4         |                            |
| ramelteon oral tablet 8 mg                             | 2         |                            |
| RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG    | 4         | Brand penalty applies      |
| ROZEREM ORAL TABLET 8 MG                               | 4         | Brand penalty applies      |
| SILENOR ORAL TABLET 3 MG, 6 MG                         | 4         | Brand penalty applies      |
| SODIUM OXYBATE ORAL SOLUTION 500 MG/ML                 | 6         | PA                         |
| SUNOSI ORAL TABLET 150 MG, 75 MG                       | 6         | PA; QL (30 EA per 30 days) |
| tasimelteon oral capsule 20 mg                         | 6         | PA                         |
| temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg   | 2         |                            |

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| Drug Name                                                                | Drug Tier | Notes |
|--------------------------------------------------------------------------|-----------|-------|
| WAKIX ORAL TABLET<br>17.8 MG, 4.45 MG                                    | 6         | PA    |
| XYREM ORAL<br>SOLUTION 500 MG/ML                                         | 6         | PA    |
| XYWAV ORAL<br>SOLUTION 500 MG/ML                                         | 6         | PA    |
| zaleplon oral capsule 10<br>mg, 5 mg                                     | 2         |       |
| zolpidem tartrate er oral<br>tablet extended release<br>12.5 mg, 6.25 mg | 2         |       |
| zolpidem tartrate oral<br>tablet 10 mg, 5 mg                             | 2         |       |

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