

2017 5 Tier Standard – Member Formulary

Formulary ID: 17392

Effective Date: 10/1/2017

Last Updated: 9/26/2017

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
Analgesics		
<i>acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i>	2	
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	2	
<i>ascomp with codeine oral capsule 30-50-325-40 mg</i>	2	PA
<i>butalbital compound w/codeine oral capsule 30-50-325-40 mg</i>	2	PA
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	2	PA
<i>carisoprodol-asa-codeine oral tablet 200-325-16 mg</i>	2	PA
<i>carisoprodol-aspirin oral tablet 200-325 mg</i>	2	PA
<i>codeine-bitalbital-asa-caff oral capsule 30-50-325-40 mg</i>	2	PA
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg</i>	2	
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	2	
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	2	
<i>pentazocine-naloxone oral tablet 50-0.5 mg</i>	2	PA
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	2	
Nonsteroidal Anti-Inflammatory Drugs		
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	2	
<i>comfort pac-ibuprofen kit 800 mg</i>	1	
<i>comfort pac-meloxicam kit 15 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>comfort pac-naproxen kit 500 mg</i>	1	
<i>diclofenac potassium oral tablet 50 mg</i>	2	
<i>diclofenac sodium oral tablet extended release 24 hr 100 mg</i>	1	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 25 mg, 50 mg, 75 mg</i>	1	
<i>diclofenac sodium topical gel 1 %</i>	2	
<i>diclofenac sodium topical gel 3 %</i>	5	
<i>diflunisal oral tablet 500 mg</i>	2	
<i>etodolac oral capsule 200 mg, 300 mg</i>	2	
<i>etodolac oral tablet 400 mg, 500 mg</i>	2	
<i>flurbiprofen oral tablet 100 mg, 50 mg</i>	2	
<i>ibuprofen oral suspension 100 mg/5 ml</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
<i>ibuprofen-oxycodone oral tablet 400-5 mg</i>	2	
<i>indomethacin oral capsule 25 mg, 50 mg</i>	2	PA
<i>indomethacin oral capsule, extended release 75 mg</i>	2	PA
<i>ketoprofen oral capsule 50 mg, 75 mg</i>	2	
<i>ketorolac injection cartridge 30 mg/ml</i>	2	PA
<i>ketorolac injection solution 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)</i>	2	PA
<i>ketorolac intramuscular cartridge 60 mg/2 ml</i>	1	PA
<i>ketorolac intramuscular solution 60 mg/2 ml</i>	2	PA
<i>ketorolac oral tablet 10 mg</i>	2	PA
<i>meclofenamate oral capsule 100 mg, 50 mg</i>	2	
<i>meloxicam oral suspension 7.5 mg/5 ml</i>	2	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	1	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	2	
NAPRELAN CR ORAL TABLET, ER MULTIPHASE 24 HR 750 MG	4	
<i>naproxen oral suspension 125 mg/5 ml</i>	1	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	1	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg</i>	2	

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<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	2	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	2	
<i>sulindac oral tablet 150 mg, 200 mg</i>	2	
<i>tolmetin oral capsule 400 mg</i>	2	
<i>tolmetin oral tablet 200 mg</i>	2	
VOLTAREN TOPICAL GEL 1 %	4	
ZORVOLEX ORAL CAPSULE 18 MG, 35 MG	3	ST
Opioid Analgesics, Long-Acting		
<i>buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour</i>	2	QL (4 EA per 28 days)
<i>duramorph (pf) injection solution 0.5 mg/ml, 1 mg/ml</i>	2	B/D
<i>fentanyl citrate buccal lozenge on a handle 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg</i>	2	PA; QL (120 EA per 30 days)
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour</i>	2	QL (10 EA per 30 days)
<i>methadone oral solution 10 mg/5 ml, 5 mg/5 ml</i>	2	
<i>methadone oral tablet 10 mg, 5 mg</i>	2	
<i>morphine oral tablet 15 mg, 30 mg</i>	2	QL (180 EA per 30 days)
<i>morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg</i>	2	QL (60 EA per 30 days)
<i>oxycodone oral tablet,oral only,ext.rel.12 hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	2	PA; QL (60 EA per 30 days)
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 15 MG, 30 MG	4	PA; QL (60 EA per 30 days)
OXYCONTIN ORAL TABLET,ORAL ONLY,EXT.REL.12 HR 60 MG	5	PA; QL (60 EA per 30 days)
Opioid Analgesics, Short-Acting		
<i>butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>butorphanol tartrate nasal spray,non-aerosol 10 mg/ml</i>	2	
<i>hydromorphone (pf) injection solution 10 (mg/ml) (5 ml), 10 mg/ml</i>	2	
<i>hydromorphone injection solution 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	2	
<i>hydromorphone injection syringe 2 mg/ml</i>	2	
<i>hydromorphone oral tablet 2 mg, 4 mg, 8 mg</i>	2	QL (180 EA per 30 days)
LAZANDA NASAL SPRAY,NON-AEROSOL 100 MCG/SPRAY	3	PA; QL (600 EA per 30 days)
LAZANDA NASAL SPRAY,NON-AEROSOL 300 MCG/SPRAY, 400 MCG/SPRAY	3	PA; QL (150 EA per 30 days)
<i>meperidine oral solution 50 mg/5 ml</i>	2	PA; QL (3600 ML per 30 days)
<i>meperidine oral tablet 100 mg, 50 mg</i>	2	PA; QL (240 EA per 30 days)
<i>nalbuphine injection solution 10 mg/ml, 20 mg/ml</i>	2	B/D
<i>oxycodone oral solution 5 mg/5 ml</i>	2	QL (5400 ML per 30 days)
<i>oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i>	2	QL (180 EA per 30 days)
<i>tramadol oral tablet 50 mg</i>	2	QL (240 EA per 30 days)
Anesthetics		
Local Anesthetics		
<i>accucaine kit kit 10 mg/ml (1 %)</i>	1	
<i>dermacinrx empricaine topical kit 2.5-2.5 %</i>	2	
<i>lidocaine (pf) injection solution 10 mg/ml (1 %), 5 mg/ml (0.5 %)</i>	2	
<i>lidocaine hcl injection solution 5 mg/ml (0.5 %)</i>	2	
<i>lidocaine hcl laryngotracheal solution 4 %</i>	2	
<i>lidocaine hcl mucous membrane jelly 2 %</i>	2	
<i>lidocaine hcl mucous membrane jelly in applicator 2 %</i>	2	
<i>lidocaine hcl mucous membrane solution 4 % (40 mg/ml)</i>	2	
<i>lidocaine hcl urethral gel 2 %</i>	2	
<i>lidocaine topical adhesive patch,medicated 5 %</i>	2	PA; QL (90 EA per 30 days)
<i>lidocaine topical ointment 5 %</i>	2	
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	2	

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<i>lidocaine-prilocaine topical kit 2.5-2.5 %</i>	2	
LIDOPAC TOPICAL KIT 5 %	2	
<i>lidopril topical kit 2.5-2.5 %</i>	2	
<i>lidopril xr topical kit 2.5-2.5 %</i>	2	
<i>lido-prilo caine pack topical kit 2.5-2.5 %</i>	2	
<i>liprozonepak topical kit 2.5-2.5 %</i>	2	
<i>livixil pak topical kit 2.5-2.5 %</i>	2	
<i>lp lite pak topical kit 2.5-2.5 %</i>	2	
<i>prilolid topical kit 2.5-2.5 %</i>	2	
Anti-Addiction/ Substance Abuse Treatment Agents		
Alcohol Deterrents/ Anti-Craving		
<i>acamprosate oral tablet, delayed release (dr/ec) 333 mg</i>	2	PA
<i>disulfiram oral tablet 250 mg, 500 mg</i>	2	
<i>naltrexone oral tablet 50 mg</i>	2	
Opioid Dependence Treatments		
<i>buprenorphine hcl sublingual tablet 2 mg, 8 mg</i>	2	
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	2	
ZUBSOLV SUBLINGUAL TABLET 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	
Opioid Reversal Agents		
<i>naloxone injection solution 0.4 mg/ml</i>	2	
<i>naloxone injection syringe 1 mg/ml</i>	2	
Smoking Cessation Agents		
CHANTIX CONTINUING MONTH BOX ORAL TABLET 1 MG	3	QL (336 EA per 168 days)
CHANTIX ORAL TABLET 0.5 MG, 1 MG	3	QL (336 EA per 168 days)
CHANTIX STARTING MONTH BOX ORAL TABLETS, DOSE PACK 0.5 MG (11)- 1 MG (42)	3	QL (336 EA per 168 days)

Drug Name	Drug Tier	Requirements/Limits
NICOTROL INHALATION CARTRIDGE 10 MG	4	
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	4	
Antibacterials		
Aminoglycosides		
<i>amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml</i>	2	
<i>gentak ophthalmic (eye) ointment 0.3 % (3 mg/gram)</i>	2	
<i>gentamicin injection solution 20 mg/2 ml</i>	2	
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	1	
<i>gentamicin ophthalmic (eye) ointment 0.3 % (3 mg/gram)</i>	2	
<i>gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml</i>	2	
<i>gentamicin sulfate (pf) intravenous solution 100 mg/10 ml, 80 mg/8 ml</i>	2	
<i>gentamicin sulfate (pf) intravenous solution 60 mg/6 ml</i>	2	
<i>gentamicin topical cream 0.1 %</i>	1	
<i>gentamicin topical ointment 0.1 %</i>	1	
<i>neomycin oral tablet 500 mg</i>	2	
<i>neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml</i>	2	
<i>paromomycin oral capsule 250 mg</i>	2	
<i>streptomycin intramuscular recon soln 1 gram</i>	2	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	3	
<i>tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml</i>	5	PA
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	1	
<i>tobramycin sulfate injection recon soln 1.2 gram</i>	2	
<i>tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml</i>	2	
<i>tobramycin with nebulizer inhalation solution for nebulization 300 mg/5 ml</i>	5	PA

Drug Name	Drug Tier	Requirements/Limits
Antibacterials, Other		
<i>acetic acid otic (ear) solution 2 %</i>	2	
<i>acetic acid-aluminum acetate otic (ear) drops 2 %</i>	2	
<i>alcohol pads topical pads, medicated</i>	2	
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	2	
BACTROBAN NASAL NASAL OINTMENT 2 %	4	
<i>chloramphenicol sod succinate intravenous recon soln 1 gram</i>	2	
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	2	
<i>clindamycin in 5 % dextrose intravenous piggyback 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml</i>	2	
<i>clindamycin palmitate hcl oral recon soln 75 mg/5 ml</i>	2	
<i>clindamycin pediatric oral recon soln 75 mg/5 ml</i>	2	
<i>clindamycin phosphate injection solution 150 (mg/ml) (6 ml)</i>	2	
<i>clindamycin phosphate injection solution 150 mg/ml</i>	2	
<i>clindamycin phosphate intravenous solution 300 mg/2 ml, 600 mg/4 ml</i>	2	
<i>clindamycin phosphate intravenous solution 900 mg/6 ml</i>	2	
<i>clindamycin phosphate topical gel 1 %</i>	2	
<i>clindamycin phosphate topical lotion 1 %</i>	2	
<i>clindamycin phosphate topical solution 1 %</i>	2	
<i>clindamycin phosphate topical swab 1 %</i>	2	
<i>clindamycin phosphate vaginal cream 2 %</i>	2	
<i>colistin (colistimethate na) injection recon soln 150 mg</i>	2	
CUBICIN INTRAVENOUS RECON SOLN 500 MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
CUBICIN RF INTRAVENOUS RECON SOLN 500 MG	5	PA
<i>daptomycin intravenous recon soln 500 mg</i>	5	PA
<i>lincomycin injection solution 300 mg/ml</i>	2	
<i>linezolid intravenous parenteral solution 600 mg/300 ml</i>	5	PA
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	5	PA
<i>linezolid oral tablet 600 mg</i>	5	PA
<i>linezolid-0.9% sodium chloride intravenous parenteral solution 600 mg/300 ml</i>	5	PA
<i>methenamine hippurate oral tablet 1 gram</i>	2	
<i>metro i.v. intravenous piggyback 500 mg/100 ml</i>	2	
<i>metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml</i>	2	
<i>metronidazole oral capsule 375 mg</i>	2	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	2	
<i>metronidazole topical cream 0.75 %</i>	2	
<i>metronidazole topical gel 0.75 %, 1 %</i>	2	
<i>metronidazole topical gel with pump 1 %</i>	2	
<i>metronidazole topical lotion 0.75 %</i>	2	
<i>metronidazole vaginal gel 0.75 %</i>	2	
<i>mupirocin topical ointment 2 %</i>	2	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	2	PA; QL (360 EA per 365 days)
<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg, 100 mg (75/25)</i>	2	PA; QL (360 EA per 365 days)
<i>polymyxin b sulfate injection recon soln 500,000 unit</i>	2	
SYNERCID INTRAVENOUS RECON SOLN 500 MG	5	PA
<i>trimethoprim oral tablet 100 mg</i>	2	
<i>vancomycin in 0.9% sodium cl intravenous piggyback 1 gram/200 ml, 500 mg/100 ml, 750 mg/150 ml</i>	2	B/D
<i>vancomycin in 0.9% sodium cl intravenous solution 1.25 gram/250 ml, 750 mg/150 ml</i>	2	B/D

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<i>vancomycin in dextrose 5 % intravenous piggyback 1 gram/200 ml, 500 mg/100 ml, 750 mg/150 ml</i>	2	B/D
<i>vancomycin intravenous recon soln 1,000 mg, 10 gram, 5 gram, 500 mg, 750 mg</i>	2	B/D
VANCOMYCIN ORAL CAPSULE 125 MG, 250 MG	4	PA
Beta-Lactam, Cephalosporins		
<i>cefaclor oral capsule 250 mg, 500 mg</i>	2	
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	2	
<i>cefadroxil oral capsule 500 mg</i>	2	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	2	
<i>cefadroxil oral tablet 1 gram</i>	2	
<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml</i>	2	
<i>cefazolin injection recon soln 1 gram</i>	2	
<i>cefazolin intravenous recon soln 1 gram</i>	2	
<i>cefdinir oral capsule 300 mg</i>	2	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>cefepime in dextrose 5 % intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	2	
<i>cefepime in dextrose,iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	2	
<i>cefepime injection recon soln 1 gram, 2 gram</i>	2	
<i>cefotaxime injection recon soln 1 gram, 2 gram, 500 mg</i>	2	
<i>cefoxitin in dextrose, iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	2	
<i>cefoxitin intravenous recon soln 1 gram, 10 gram, 2 gram</i>	2	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	2	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	2	
CEFTIN ORAL SUSPENSION FOR RECONSTITUTION 250 MG/5 ML	4	
<i>ceftriaxone in dextrose,iso-os intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	2	
<i>ceftriaxone injection recon soln 1 gram, 2 gram, 500 mg</i>	2	
<i>ceftriaxone intravenous recon soln 1 gram, 2 gram</i>	2	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	2	
<i>cefuroxime sodium injection recon soln 1.5 gram</i>	2	
<i>cefuroxime sodium intravenous recon soln 1.5 gram</i>	2	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	1	
<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	2	
SUPRAX ORAL CAPSULE 400 MG	4	
TEFLARO INTRAVENOUS RECON SOLN 400 MG, 600 MG	4	PA
Beta-Lactam, Other		
<i>aztreonam injection recon soln 1 gram, 2 gram</i>	2	
DORIBAX INTRAVENOUS RECON SOLN 500 MG	4	PA
<i>doripenem intravenous recon soln 250 mg, 500 mg</i>	2	PA
<i>imipenem-cilastatin intravenous recon soln 250 mg, 500 mg</i>	2	PA
INVANZ INJECTION RECON SOLN 1 GRAM	4	PA
INVANZ INTRAVENOUS RECON SOLN 1 GRAM	4	PA
<i>meropenem intravenous recon soln 1 gram, 500 mg</i>	2	
<i>meropenem-0.9% sodium chloride intravenous piggyback 1 gram/50 ml, 500 mg/50 ml</i>	2	
Beta-Lactam, Penicillins		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	1	

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<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	1	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	2	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>	2	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg</i>	2	
<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>	2	
<i>ampicillin oral capsule 250 mg, 500 mg</i>	1	
<i>ampicillin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>ampicillin sodium injection recon soln 1 gram, 10 gram, 125 mg, 2 gram, 250 mg, 500 mg</i>	2	
<i>ampicillin sodium intravenous recon soln 1 gram</i>	2	
<i>ampicillin-sulbactam injection recon soln 1.5 gram</i>	2	
<i>ampicillin-sulbactam injection recon soln 15 gram, 3 gram</i>	2	
<i>ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram</i>	2	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	4	
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	2	
<i>nafcillin in dextrose iso-osm intravenous piggyback 1 gram/50 ml, 2 gram/100 ml</i>	2	
<i>nafcillin injection recon soln 1 gram, 2 gram</i>	2	
<i>nafcillin intravenous recon soln 1 gram, 2 gram</i>	2	
<i>penicillin g procaine intramuscular syringe 1.2 million unit/2 ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>penicillin g sodium injection recon soln 5 million unit</i>	2	
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	1	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	1	
<i>piperacillin-tazobactam intravenous recon soln 13.5 gram</i>	2	
<i>piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram</i>	2	
Macrolides		
<i>azithromycin intravenous recon soln 500 mg, 500 mg (2 mg/ml)</i>	2	
<i>azithromycin oral packet 1 gram</i>	2	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	2	
<i>azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg</i>	2	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	2	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	2	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	2	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	4	
<i>ery pads topical swab 2 %</i>	2	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	4	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	2	
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	4	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml</i>	2	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	2	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	1	
<i>erythromycin oral tablet 250 mg, 500 mg</i>	2	
<i>erythromycin with ethanol topical gel 2 %</i>	2	

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<i>erythromycin with ethanol topical solution 2 %</i>	2	
KETEK ORAL TABLET 300 MG, 400 MG	4	PA; QL (20 EA per 30 days)
Quinolones		
AVELOX IN NAACL (ISO-OSMOTIC) INTRAVENOUS PIGGYBACK 400 MG/250 ML	4	
<i>ciprofloxacin (mixture) oral tablet, er multiphase 24 hr 1,000 mg, 500 mg</i>	2	
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	2	
<i>ciprofloxacin hcl oral tablet 100 mg</i>	2	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg</i>	1	
<i>ciprofloxacin lactate intravenous solution 200 mg/20 ml, 400 mg/40 ml</i>	2	
<i>levofloxacin oral solution 250 mg/10 ml</i>	2	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	2	
MOXEZA OPHTHALMIC (EYE) DROPS, VISCIOUS 0.5 %	3	
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	2	
<i>moxifloxacin oral tablet 400 mg</i>	2	
<i>moxifloxacin-sod.ace,sul-water intravenous piggyback 400 mg/250 ml</i>	2	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	2	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	2	
<i>ofloxacin otic (ear) drops 0.3 %</i>	2	
VIGAMOX OPHTHALMIC (EYE) DROPS 0.5 %	3	
Sulfonamides		
<i>silver sulfadiazine topical cream 1 %</i>	2	
<i>ssd topical cream 1 %</i>	2	
<i>sulfacetamide sodium (acne) topical suspension 10 %</i>	1	
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>sulfacetamide sodium ophthalmic (eye) ointment 10 %</i>	2	
<i>sulfadiazine oral tablet 500 mg</i>	2	
<i>sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5 ml</i>	2	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml</i>	1	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	1	
Tetracyclines		
<i>demeclocycline oral tablet 150 mg, 300 mg</i>	2	
<i>doxy-100 intravenous recon soln 100 mg</i>	2	
<i>doxycycline hyclate intravenous recon soln 100 mg</i>	2	
<i>doxycycline hyclate oral capsule 100 mg, 50 mg</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	2	
<i>doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg</i>	2	
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	1	
<i>minocycline oral tablet 100 mg, 50 mg, 75 mg</i>	1	
<i>morgidox oral capsule 50 mg</i>	2	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT INTRAVENOUS SOLUTION 50 MG/5 ML	5	PA
BRIVIACT ORAL SOLUTION 10 MG/ML	5	PA
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	5	PA
<i>levetiracetam in nacl (iso-os) intravenous piggyback 1,000 mg/100 ml, 1,500 mg/100 ml, 500 mg/100 ml</i>	2	
<i>levetiracetam intravenous solution 500 mg/5 ml</i>	2	
<i>levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)</i>	2	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	2	
POTIGA ORAL TABLET 200 MG, 300 MG, 400 MG, 50 MG	4	ST; QL (90 EA per 30 days)
<i>roweepra oral tablet 1,000 mg, 750 mg</i>	2	
<i>roweepra oral tablet 500 mg</i>	2	
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG, 250 MG, 500 MG	4	ST; QL (60 EA per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 750 MG	5	ST; QL (120 EA per 30 days)
VIGABATRIN ORAL POWDER IN PACKET 500 MG	4	PA
Calcium Channel Modifying Agents		
CELONTIN ORAL CAPSULE 300 MG	4	
<i>ethosuximide oral capsule 250 mg</i>	2	
<i>ethosuximide oral solution 250 mg/5 ml</i>	2	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	2	
Gamma-Aminobutyric Acid (Gaba) Augmenting Agents		
<i>clonazepam oral tablet 0.5 mg, 1 mg</i>	2	PA; QL (90 EA per 30 days)
<i>clonazepam oral tablet 2 mg</i>	2	PA; QL (300 EA per 30 days)
<i>clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg</i>	2	PA; QL (90 EA per 30 days)
<i>clonazepam oral tablet, disintegrating 2 mg</i>	2	PA; QL (300 EA per 30 days)
DIASTAT ACUDIAL RECTAL KIT 12.5-15-17.5-20 MG	4	PA; QL (40 EA per 30 days)
DIASTAT ACUDIAL RECTAL KIT 5-7.5-10 MG	4	PA; QL (20 EA per 30 days)
DIASTAT RECTAL KIT 2.5 MG	4	PA; QL (5 EA per 30 days)
<i>diazepam rectal kit 12.5-15-17.5-20 mg</i>	2	PA; QL (40 EA per 30 days)
<i>diazepam rectal kit 2.5 mg</i>	2	PA; QL (5 EA per 30 days)
<i>diazepam rectal kit 5-7.5-10 mg</i>	2	PA; QL (20 EA per 30 days)
<i>divalproex oral capsule, delayed rel sprinkle 125 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>divalproex oral tablet extended release 24 hr 250 mg, 500 mg</i>	2	
<i>divalproex oral tablet, delayed release (dr/ec) 125 mg, 250 mg, 500 mg</i>	2	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	2	
<i>gabapentin oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 300 mg/6 ml (6 ml)</i>	2	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	2	
GABITRIL ORAL TABLET 12 MG, 16 MG	4	
ONFI ORAL SUSPENSION 2.5 MG/ML	4	PA; QL (480 ML per 30 days)
ONFI ORAL TABLET 10 MG, 20 MG	4	PA; QL (60 EA per 30 days)
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	2	PA
<i>phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	2	PA
<i>primidone oral tablet 250 mg, 50 mg</i>	2	
SABRIL ORAL POWDER IN PACKET 500 MG	4	PA
SABRIL ORAL TABLET 500 MG	4	PA; QL (180 EA per 30 days)
<i>tiagabine oral tablet 2 mg, 4 mg</i>	2	
<i>valproate sodium intravenous solution 500 mg/5 ml (100 mg/ml)</i>	2	
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml, 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml)</i>	2	
<i>valproic acid oral capsule 250 mg</i>	2	
Glutamate Reducing Agents		
<i>felbamate oral suspension 600 mg/5 ml</i>	2	
<i>felbamate oral tablet 400 mg, 600 mg</i>	2	
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	4	ST
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	ST; QL (30 EA per 30 days)
FYCOMPA ORAL TABLETS, DOSE PACK 2 MG (7)- 4 MG (7)	4	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	1	
<i>lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	2	

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<i>lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg</i>	2	
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	2	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	2	
Sodium Channel Agents		
APTIOM ORAL TABLET 200 MG	4	ST; QL (30 EA per 30 days)
APTIOM ORAL TABLET 400 MG, 800 MG	5	ST; QL (30 EA per 30 days)
APTIOM ORAL TABLET 600 MG	4	ST; QL (60 EA per 30 days)
BANZEL ORAL SUSPENSION 40 MG/ML	5	PA; QL (2400 ML per 30 days)
BANZEL ORAL TABLET 200 MG	4	PA; QL (240 EA per 30 days)
BANZEL ORAL TABLET 400 MG	5	PA; QL (240 EA per 30 days)
<i>carbamazepine oral suspension 100 mg/5 ml</i>	2	
<i>carbamazepine oral tablet 200 mg</i>	1	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i>	2	
<i>carbamazepine oral tablet, chewable 100 mg</i>	2	
DILANTIN ORAL CAPSULE 30 MG	4	
<i>epitol oral tablet 200 mg</i>	1	
EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG	4	
<i>fosphenytoin injection solution 100 mg pe/2 ml, 500 mg pe/10 ml</i>	2	
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	2	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	2	
PEGANONE ORAL TABLET 250 MG	4	
<i>phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml</i>	2	
<i>phenytoin oral tablet, chewable 50 mg</i>	2	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin sodium intravenous solution 50 mg/ml</i>	2	
VIMPAT INTRAVENOUS SOLUTION 200 MG/20 ML	4	
VIMPAT ORAL SOLUTION 10 MG/ML	5	ST; QL (1200 ML per 30 days)
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	4	ST; QL (60 EA per 30 days)
Antidementia Agents		
Antidementia Agents, Other		
<i>ergoloid oral tablet 1 mg</i>	2	PA
Cholinesterase Inhibitors		
<i>donepezil oral tablet 10 mg, 23 mg, 5 mg</i>	1	
<i>donepezil oral tablet, disintegrating 10 mg, 5 mg</i>	1	
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	2	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hr, 9.5 mg/24 hr</i>	2	
N-Methyl-D-Aspartate (Nmda) Receptor Antagonist		
<i>memantine oral tablet 10 mg, 5 mg</i>	2	
<i>memantine oral tablets, dose pack 5-10 mg</i>	2	
NAMENDA XR ORAL CAP, SPRINKLE, ER 24HR DOSE PACK 7-14-21-28 MG	4	ST
NAMENDA XR ORAL CAPSULE, SPRINKLE, ER 24HR 14 MG, 21 MG, 28 MG, 7 MG	4	ST; QL (30 EA per 30 days)
Antidepressants		
Antidepressants, Other		
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HR 174 MG, 348 MG, 522 MG	4	
<i>buproban oral tablet extended release 12 hr 150 mg</i>	2	
<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	2	
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	2	
<i>bupropion hcl oral tablet extended release 12 hr 100 mg, 150 mg, 200 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	2	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	4	
<i>maprotiline oral tablet 25 mg, 50 mg, 75 mg</i>	2	
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	2	
<i>mirtazapine oral tablet, disintegrating 15 mg, 30 mg, 45 mg</i>	2	
<i>nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	2	
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	2	PA
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	2	QL (30 EA per 30 days)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	2	QL (60 EA per 30 days)
<i>trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	1	
Monoamine Oxidase Inhibitors		
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	4	
MARPLAN ORAL TABLET 10 MG	4	
<i>phenelzine oral tablet 15 mg</i>	2	
<i>tranylcypromine oral tablet 10 mg</i>	2	
Ssris/ Snris		
<i>citalopram oral solution 10 mg/5 ml</i>	1	
<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>desvenlafaxine fumarate oral tablet extended release 24hr 100 mg, 50 mg</i>	2	
<i>desvenlafaxine oral tablet extended release 24 hr 100 mg, 50 mg</i>	2	
<i>desvenlafaxine oral tablet extended release 24hr 100 mg, 50 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg</i>	2	
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	2	
<i>escitalopram oxalate oral solution 5 mg/5 ml</i>	2	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	1	
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	4	ST
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	4	ST
<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec) 90 mg</i>	2	
<i>fluoxetine oral solution 20 mg/5 ml (4 mg/ml)</i>	2	
<i>fluoxetine oral tablet 10 mg</i>	1	
<i>fluoxetine oral tablet 20 mg</i>	2	
<i>fluvoxamine oral tablet 100 mg, 25 mg, 50 mg</i>	2	
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	1	
<i>paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg</i>	2	
PAXIL ORAL SUSPENSION 10 MG/5 ML	4	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HR 100 MG, 25 MG, 50 MG	3	
<i>sertraline oral concentrate 20 mg/ml</i>	2	
<i>sertraline oral tablet 100 mg, 25 mg, 50 mg</i>	1	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	4	ST
<i>venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg</i>	2	
<i>venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	2	
<i>venlafaxine oral tablet extended release 24hr 150 mg, 225 mg, 37.5 mg, 75 mg</i>	2	
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	4	ST

Drug Name	Drug Tier	Requirements/Limits
VIIBRYD ORAL TABLETS,DOSE PACK 10 MG (7)- 20 MG (23)	4	ST
Tricyclics		
<i>amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	PA
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	2	
<i>clomipramine oral capsule 25 mg, 50 mg, 75 mg</i>	2	PA
<i>desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	
<i>doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	2	PA
<i>doxepin oral concentrate 10 mg/ml</i>	2	PA
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	2	PA
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	2	PA
<i>nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	1	
<i>nortriptyline oral solution 10 mg/5 ml</i>	1	
<i>protriptyline oral tablet 10 mg, 5 mg</i>	2	
<i>trimipramine oral capsule 100 mg, 25 mg, 50 mg</i>	2	PA
Antiemetics		
Antiemetics, Other		
<i>chlorpromazine injection solution 25 mg/ml</i>	2	
<i>chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	2	
<i>compro rectal suppository 25 mg</i>	2	
<i>diphenhydramine hcl injection solution 50 mg/ml</i>	2	PA
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	2	PA
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	2	PA
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>	2	PA
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>metoclopramide hcl injection solution 5 mg/ml</i>	2	
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>	1	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	1	
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	2	
<i>phenadoz rectal suppository 12.5 mg</i>	2	PA
<i>prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml), 5 mg/ml</i>	2	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	1	
<i>prochlorperazine rectal suppository 25 mg</i>	2	
<i>promethazine oral syrup 6.25 mg/5 ml</i>	2	PA
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>	2	PA
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	2	PA
<i>promethegan rectal suppository 25 mg, 50 mg</i>	2	PA
<i>scopolamine base transdermal patch 3 day 1 mg over 3 days</i>	2	
TRANSDERM-SCOP TRANSDERMAL PATCH 3 DAY 1 MG OVER 3 DAYS	4	
<i>trimethobenzamide oral capsule 300 mg</i>	2	PA
Emetogenic Therapy Adjuncts		
<i>aprepitant oral capsule 125 mg, 40 mg, 80 mg</i>	2	B/D
<i>aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)</i>	2	B/D
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	2	B/D
EMEND ORAL CAPSULE 125 MG, 40 MG, 80 MG	4	B/D
EMEND ORAL CAPSULE,DOSE PACK 125 MG (1)- 80 MG (2)	4	B/D
EMEND ORAL SUSPENSION FOR RECONSTITUTION 125 MG (25 MG/ ML FINAL CONC.)	4	B/D
<i>granisetron (pf) intravenous solution 1 mg/ml (1 ml), 100 mcg/ml</i>	2	PA
<i>granisetron hcl intravenous solution 1 mg/ml, 1 mg/ml (1 ml)</i>	2	PA
<i>granisetron hcl oral tablet 1 mg</i>	2	PA
<i>ondansetron hcl (pf) injection solution 4 mg/2 ml</i>	2	

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<i>ondansetron hcl (pf) injection syringe 4 mg/2 ml</i>	2	
<i>ondansetron hcl intravenous solution 2 mg/ml</i>	2	
<i>ondansetron hcl oral solution 4 mg/5 ml</i>	2	B/D
<i>ondansetron hcl oral tablet 24 mg</i>	2	B/D; QL (15 EA per 30 days)
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	2	B/D
<i>ondansetron oral tablet, disintegrating 4 mg, 8 mg</i>	2	B/D
SYNDROS ORAL SOLUTION 5 MG/ML	5	PA
Antifungals		
Antifungals		
<i>abelcet intravenous suspension 5 mg/ml</i>	2	B/D
AMBISOME INTRAVENOUS SUSPENSION FOR RECONSTITUTION 50 MG	4	B/D
<i>amphotericin b injection recon soln 50 mg</i>	2	B/D
CANCIDAS INTRAVENOUS RECON SOLN 50 MG, 70 MG	5	PA
<i>caspofungin intravenous recon soln 50 mg, 70 mg</i>	5	PA
<i>ciclopirox topical cream 0.77 %</i>	2	
<i>ciclopirox topical solution 8 %</i>	2	
<i>ciclopirox topical suspension 0.77 %</i>	2	
<i>ciclopirox-ure-camph-menth-euc topical solution 8 %</i>	2	
<i>clotrimazole mucous membrane troche 10 mg</i>	2	
<i>clotrimazole topical cream 1 %</i>	2	
<i>clotrimazole topical solution 1 %</i>	2	
<i>econazole topical cream 1 %</i>	2	
ERAXIS(WATER DILUENT) INTRAVENOUS RECON SOLN 100 MG, 50 MG	4	PA
<i>fluconazole in dextrose(iso-o) intravenous piggyback 200 mg/100 ml, 400 mg/200 ml</i>	2	
<i>fluconazole in nacl (iso-osm) intravenous piggyback 100 mg/50 ml, 200 mg/100 ml, 400 mg/200 ml</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	2	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	2	
<i>flucytosine oral capsule 250 mg, 500 mg</i>	2	
<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	2	
<i>itraconazole oral capsule 100 mg</i>	2	
<i>ketoconazole oral tablet 200 mg</i>	2	
<i>ketoconazole topical cream 2 %</i>	2	
<i>ketoconazole topical shampoo 2 %</i>	2	
LAMISIL ORAL GRANULES IN PACKET 125 MG, 187.5 MG	4	PA
MENTAX TOPICAL CREAM 1 %	4	
MYCAMINE INTRAVENOUS RECON SOLN 100 MG	5	PA
MYCAMINE INTRAVENOUS RECON SOLN 50 MG	4	PA
NOXAFIL ORAL SUSPENSION 200 MG/5 ML (40 MG/ML)	4	
NOXAFIL ORAL TABLET, DELAYED RELEASE (DR/EC) 100 MG	5	
<i>nyamyc topical powder 100,000 unit/gram</i>	2	
<i>nyata topical powder 100,000 unit/gram</i>	2	
<i>nystatin oral suspension 100,000 unit/ml</i>	2	
<i>nystatin oral tablet 500,000 unit</i>	2	
<i>nystatin topical cream 100,000 unit/gram</i>	2	
<i>nystatin topical ointment 100,000 unit/gram</i>	2	
<i>nystatin topical powder 100,000 unit/gram</i>	2	
<i>nystop topical powder 100,000 unit/gram</i>	2	
<i>terbinafine hcl oral tablet 250 mg</i>	1	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	2	
<i>terconazole vaginal suppository 80 mg</i>	2	
<i>voriconazole intravenous solution 200 mg</i>	2	
<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	5	

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<i>voriconazole oral tablet 200 mg</i>	5	
<i>voriconazole oral tablet 50 mg</i>	2	
Antigout Agents		
Antigout Agents		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	1	
<i>colchicine oral tablet 0.6 mg</i>	1	
<i>probenecid oral tablet 500 mg</i>	2	
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	2	
ULORIC ORAL TABLET 40 MG, 80 MG	3	ST
Anti-Inflammatory Agents		
Glucocorticoids		
<i>a-hydrocort injection recon soln 100 mg</i>	2	
<i>betamethasone dipropionate topical cream 0.05 %</i>	2	
<i>betamethasone dipropionate topical lotion 0.05 %</i>	2	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	2	
<i>betamethasone valerate topical cream 0.1 %</i>	2	
<i>betamethasone valerate topical lotion 0.1 %</i>	2	
<i>betamethasone valerate topical ointment 0.1 %</i>	2	
<i>betamethasone, augmented topical cream 0.05 %</i>	2	
<i>betamethasone, augmented topical gel 0.05 %</i>	2	
<i>betamethasone, augmented topical lotion 0.05 %</i>	2	
<i>betamethasone, augmented topical ointment 0.05 %</i>	2	
<i>cortisone oral tablet 25 mg</i>	2	
<i>dexamethasone intensol oral drops 1 mg/ml</i>	2	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	2	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	2	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	1	

Drug Name	Drug Tier	Requirements/Limits
<i>dexamethasone sodium phos (pf) injection solution 10 mg/ml</i>	2	
<i>dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml</i>	2	
<i>dexamethasone sodium phosphate injection syringe 4 mg/ml</i>	2	
<i>hydrocortisone oral tablet 20 mg, 5 mg</i>	2	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	2	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	2	
<i>methylprednisolone oral tablets,dose pack 4 mg</i>	2	
<i>methylprednisolone sodium succ injection recon soln 125 mg, 40 mg</i>	2	
<i>methylprednisolone sodium succ intravenous recon soln 1,000 mg</i>	2	
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	2	
<i>prednisolone oral solution 15 mg/5 ml</i>	2	
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	2	
<i>prednisone oral solution 5 mg/5 ml</i>	2	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	1	
<i>prednisone oral tablets,dose pack 10 mg, 10 mg (48 pack), 5 mg, 5 mg (48 pack)</i>	1	
RAYOS ORAL TABLET,DELAYED RELEASE (DR/EC) 1 MG, 2 MG, 5 MG	4	
Antimigraine Agents		
Ergot Alkaloids		
<i>dihydroergotamine injection solution 1 mg/ml</i>	2	PA
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	2	PA; QL (8 ML per 30 days)
ERGOMAR SUBLINGUAL TABLET 2 MG	4	PA; QL (20 EA per 30 days)
Serotonin (5-Ht) 1B/1D Receptor Agonists		
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	2	QL (12 EA per 30 days)

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<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	2	QL (12 EA per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	2	QL (12 EA per 30 days)
<i>sumatriptan succinate subcutaneous cartridge 4 mg/0.5 ml, 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 4 mg/0.5 ml, 6 mg/0.5 ml, 6 mg/0.5 ml (auto-injector)</i>	2	QL (4 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
<i>sumatriptan succinate subcutaneous syringe 6 mg/0.5 ml</i>	2	QL (4 ML per 30 days)
SUMAVEL DOSEPRO SUBCUTANEOUS NEEDLE-FREE INJECTOR 4 MG/0.5 ML, 6 MG/0.5 ML	4	QL (4 ML per 30 days)
TREXIMET ORAL TABLET 10-60 MG, 85-500 MG	3	
Antimyasthenic Agents		
Parasympathomimetics		
<i>guanidine oral tablet 125 mg</i>	2	
<i>pyridostigmine bromide oral tablet 60 mg</i>	2	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone oral tablet 100 mg, 25 mg</i>	2	
<i>rifabutin oral capsule 150 mg</i>	2	
Antituberculars		
CAPASTAT INJECTION RECON SOLN 1 GRAM	4	
<i>ethambutol oral tablet 100 mg, 400 mg</i>	2	
<i>isoniazid injection solution 100 mg/ml</i>	2	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	1	
PASER ORAL GRANULES DR FOR SUSP IN PACKET 4 GRAM	4	

Drug Name	Drug Tier	Requirements/Limits
PRIFTIN ORAL TABLET 150 MG	4	
<i>pyrazinamide oral tablet 500 mg</i>	2	
<i>rifampin intravenous recon soln 600 mg</i>	2	
<i>rifampin oral capsule 150 mg, 300 mg</i>	2	
RIFATER ORAL TABLET 50-120-300 MG	4	
SIRTURO ORAL TABLET 100 MG	5	PA
TRECTOR ORAL TABLET 250 MG	4	
Antineoplastics		
Alkylating Agents		
BUSULFAN INTRAVENOUS SOLUTION 60 MG/10 ML	5	PA
BUSULFEX INTRAVENOUS SOLUTION 60 MG/10 ML	5	PA
<i>carboplatin intravenous solution 10 mg/ml</i>	2	B/D
<i>cisplatin intravenous solution 1 mg/ml</i>	2	B/D
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	2	B/D
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	4	PA
GLEOSTINE ORAL CAPSULE 5 MG	4	PA
HEXALEN ORAL CAPSULE 50 MG	4	PA
LEUKERAN ORAL TABLET 2 MG	3	
MATULANE ORAL CAPSULE 50 MG	4	
<i>melphalan hcl intravenous recon soln 50 mg</i>	5	PA
<i>oxaliplatin intravenous solution 100 mg/20 ml</i>	2	B/D
TEPADINA INJECTION RECON SOLN 100 MG, 15 MG	5	B/D
<i>thiotepa injection recon soln 15 mg</i>	5	B/D
VALCHLOR TOPICAL GEL 0.016 %	4	
Antiandrogens		
<i>bicalutamide oral tablet 50 mg</i>	2	
<i>flutamide oral capsule 125 mg</i>	2	
NILANDRON ORAL TABLET 150 MG	4	
<i>nilutamide oral tablet 150 mg</i>	2	
XTANDI ORAL CAPSULE 40 MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
ZYTIGA ORAL TABLET 250 MG, 500 MG	5	PA
Antiangiogenic Agents		
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	5	PA
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 25 MG, 5 MG	5	PA; LA
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG	5	
Antiestrogens/Modifiers		
EMCYT ORAL CAPSULE 140 MG	4	PA
FARESTON ORAL TABLET 60 MG	4	PA
SOLTAMOX ORAL SOLUTION 10 MG/5 ML	4	
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	1	
Antimetabolites		
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	4	
<i>fludarabine intravenous recon soln 50 mg</i>	4	PA
<i>gemcitabine intravenous recon soln 1 gram, 200 mg</i>	5	PA
<i>gemcitabine intravenous recon soln 2 gram</i>	5	PA
<i>gemcitabine intravenous solution 1 gram/26.3 ml (38 mg/ml), 2 gram/52.6 ml (38 mg/ml), 200 mg/5.26 ml (38 mg/ml)</i>	5	PA
<i>hydroxyurea oral capsule 500 mg</i>	2	
PURIXAN ORAL SUSPENSION 20 MG/ML	5	
TABLOID ORAL TABLET 40 MG	4	PA
Antineoplastics		
<i>adriamycin intravenous solution 20 mg/10 ml</i>	2	B/D
AVASTIN INTRAVENOUS SOLUTION 25 MG/ML (16 ML)	5	PA
<i>docetaxel intravenous solution 20 mg/ml, 80 mg/8 ml (10 mg/ml)</i>	4	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>docetaxel intravenous solution 80 mg/4 ml (20 mg/ml)</i>	4	B/D
<i>doxorubicin, peg-liposomal intravenous suspension 2 mg/ml</i>	2	PA
<i>epirubicin intravenous solution 200 mg/100 ml</i>	4	B/D
<i>irinotecan intravenous solution 100 mg/5 ml</i>	4	B/D
<i>levoleucovorin intravenous solution 10 mg/ml</i>	2	B/D
<i>mitomycin intravenous recon soln 20 mg, 40 mg, 5 mg</i>	2	B/D
<i>paclitaxel intravenous concentrate 6 mg/ml</i>	2	B/D
Antineoplastics, Other		
ABRAXANE INTRAVENOUS SUSPENSION FOR RECONSTITUTION 100 MG	5	PA
<i>amifostine crystalline intravenous recon soln 500 mg</i>	5	PA
CLOFARABINE INTRAVENOUS SOLUTION 20 MG/20 ML	5	PA
COTELLIC ORAL TABLET 20 MG	5	PA
<i>fludarabine intravenous solution 50 mg/2 ml</i>	4	PA
FUSILEV INTRAVENOUS RECON SOLN 50 MG	5	PA
ISTODAX INTRAVENOUS RECON SOLN 10 MG/2 ML	5	PA
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG, 400 MG/DAY(200 MG X 2)-2.5 MG, 600 MG/DAY(200 MG X 3)-2.5 MG	5	PA
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	5	PA
KYPROLIS INTRAVENOUS RECON SOLN 30 MG, 60 MG	5	PA
<i>leucovorin calcium injection recon soln 100 mg, 200 mg, 50 mg, 500 mg</i>	2	B/D
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	2	
<i>levoleucovorin intravenous recon soln 175 mg</i>	2	B/D
<i>levoleucovorin intravenous recon soln 50 mg</i>	2	PA

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LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	5	PA
LYNPARZA ORAL CAPSULE 50 MG	5	PA
LYNPARZA ORAL TABLET 100 MG, 150 MG	5	PA
<i>mesna intravenous solution 100 mg/ml</i>	2	B/D
MESNEX ORAL TABLET 400 MG	4	
<i>mitoxantrone intravenous concentrate 2 mg/ml</i>	2	
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	5	PA
ODOMZO ORAL CAPSULE 200 MG	5	PA
REVLIMID ORAL CAPSULE 2.5 MG, 20 MG	5	PA; LA
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	5	PA
SYLATRON 4-PACK SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	5	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG, 600 MCG	5	PA
SYNRIBO SUBCUTANEOUS RECON SOLN 3.5 MG	5	PA
TICE BCG INTRAVESICAL SUSPENSION FOR RECONSTITUTION 50 MG	3	
VELCADE INJECTION RECON SOLN 3.5 MG	5	PA
VENCLEXTA ORAL TABLET 10 MG, 50 MG	4	PA
VENCLEXTA ORAL TABLET 100 MG	5	PA
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	5	PA
YONDELIS INTRAVENOUS RECON SOLN 1 MG	5	PA
ZALTRAP INTRAVENOUS SOLUTION 100 MG/4 ML (25 MG/ML), 200 MG/8 ML (25 MG/ML)	5	PA
ZEJULA ORAL CAPSULE 100 MG	5	PA
ZOLINZA ORAL CAPSULE 100 MG	5	PA

Aromatase Inhibitors, 3Rd Generation

Drug Name	Drug Tier	Requirements/Limits
<i>anastrozole oral tablet 1 mg</i>	1	
<i>exemestane oral tablet 25 mg</i>	2	
<i>letrozole oral tablet 2.5 mg</i>	2	
Enzyme Inhibitors		
ETOPOPHOS INTRAVENOUS RECON SOLN 100 MG	4	PA
<i>etoposide intravenous solution 20 mg/ml</i>	2	B/D
FARYDAK ORAL CAPSULE 10 MG, 15 MG, 20 MG	5	PA
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	5	PA
<i>toposar intravenous solution 20 mg/ml</i>	2	B/D
<i>topotecan intravenous recon soln 4 mg</i>	5	PA
<i>topotecan intravenous solution 4 mg/4 ml (1 mg/ml)</i>	5	PA
ZYDELIG ORAL TABLET 100 MG, 150 MG	5	PA
Molecular Target Inhibitors		
AFINITOR DISPERZ ORAL TABLET FOR SUSPENSION 2 MG, 3 MG, 5 MG	5	PA
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	5	PA
ALECENSA ORAL CAPSULE 150 MG	5	PA
ALUNBRIG ORAL TABLET 30 MG	5	PA
BOSULIF ORAL TABLET 100 MG, 500 MG	5	PA
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	5	PA
CAPRELSA ORAL TABLET 100 MG, 300 MG	5	PA
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 140 MG/DAY(80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY)	5	PA
ERIVEDGE ORAL CAPSULE 150 MG	5	PA
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	5	PA
ICLUSIG ORAL TABLET 15 MG, 45 MG	5	PA
<i>imatinib oral tablet 100 mg, 400 mg</i>	3	PA
IMBRUVICA ORAL CAPSULE 140 MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits
INLYTA ORAL TABLET 1 MG, 5 MG	5	PA
IRESSA ORAL TABLET 250 MG	5	PA
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	5	PA
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1/DAY), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 8 MG/DAY (4 MG X 2)	5	PA
MEKINIST ORAL TABLET 0.5 MG, 2 MG	5	PA
NEXAVAR ORAL TABLET 200 MG	5	PA
OFEV ORAL CAPSULE 100 MG, 150 MG	5	PA
RYDAPT ORAL CAPSULE 25 MG	5	PA
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	5	PA
STIVARGA ORAL TABLET 40 MG	5	PA
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG	5	PA
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	5	PA
TAGRISO ORAL TABLET 40 MG, 80 MG	5	PA
TARCEVA ORAL TABLET 100 MG, 150 MG, 25 MG	5	PA
TASIGNA ORAL CAPSULE 150 MG, 200 MG	5	PA
TYKERB ORAL TABLET 250 MG	5	PA
VOTRIENT ORAL TABLET 200 MG	5	PA
XALKORI ORAL CAPSULE 200 MG, 250 MG	5	PA
ZELBORAF ORAL TABLET 240 MG	5	PA
ZYKADIA ORAL CAPSULE 150 MG	5	PA
Monoclonal Antibodies		
BAVENCIO INTRAVENOUS SOLUTION 20 MG/ML	5	PA
CYRAMZA INTRAVENOUS SOLUTION 10 MG/ML, 10 MG/ML (50 ML)	5	PA

Drug Name	Drug Tier	Requirements/Limits
DARZALEX INTRAVENOUS SOLUTION 20 MG/ML	5	PA
EMPLICITI INTRAVENOUS RECON SOLN 300 MG, 400 MG	5	PA
HERCEPTIN INTRAVENOUS RECON SOLN 150 MG, 440 MG	5	PA
IMFINZI INTRAVENOUS SOLUTION 50 MG/ML, 50 MG/ML (10 ML)	5	PA
KEYTRUDA INTRAVENOUS RECON SOLN 50 MG	5	PA
KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4 ML (25 MG/ML)	5	PA
LARTRUVO INTRAVENOUS SOLUTION 10 MG/ML	5	PA
OPDIVO INTRAVENOUS SOLUTION 100 MG/10 ML, 40 MG/4 ML	5	PA
RITUXAN HYCELA SUBCUTANEOUS SOLUTION 1400 MG/11.7 ML (120 MG/ML), 1600 MG/13.4 ML (120 MG/ML)	5	PA
RITUXAN INTRAVENOUS CONCENTRATE 10 MG/ML	5	PA
TECENTRIQ INTRAVENOUS SOLUTION 1,200 MG/20 ML (60 MG/ML)	5	PA
YERVOY INTRAVENOUS SOLUTION 50 MG/10 ML (5 MG/ML)	5	PA
Retinoids		
<i>bexarotene oral capsule 75 mg</i>	5	
PANRETIN TOPICAL GEL 0.1 %	3	PA
TARGRETIN TOPICAL GEL 1 %	3	PA
<i>tretinoin (chemotherapy) oral capsule 10 mg</i>	5	
Antiparasitics		
Anthelmintics		
ALBENZA ORAL TABLET 200 MG	4	
BILTRICIDE ORAL TABLET 600 MG	3	
Antiprotozoals		
ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML	4	

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Drug Name	Drug Tier	Requirements/Limits
ALINIA ORAL TABLET 500 MG	4	
<i>atovaquone oral suspension 750 mg/5 ml</i>	5	
<i>atovaquone-proguanil oral tablet 62.5-25 mg</i>	2	
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	2	
COARTEM ORAL TABLET 20-120 MG	4	
DARAPRIM ORAL TABLET 25 MG	4	
<i>hydroxychloroquine oral tablet 200 mg</i>	1	
MALARONE ORAL TABLET 250-100 MG	4	
<i>mefloquine oral tablet 250 mg</i>	2	
NEBUPENT INHALATION RECON SOLN 300 MG	4	B/D
PENTAM INJECTION RECON SOLN 300 MG	4	PA
PRIMAQUINE ORAL TABLET 26.3 MG	4	
<i>quinine sulfate oral capsule 324 mg</i>	2	
Pediculicides/ Scabicides		
<i>lindane topical shampoo 1 %</i>	2	
<i>malathion topical lotion 0.5 %</i>	2	
<i>permethrin topical cream 5 %</i>	2	
Antiparkinson Agents		
Anticholinergics		
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	PA
Antiparkinson Agents, Other		
<i>amantadine hcl oral capsule 100 mg</i>	2	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	2	
<i>amantadine hcl oral tablet 100 mg</i>	2	
APOKYN SUBCUTANEOUS CARTRIDGE 10 MG/ML	5	PA
<i>entacapone oral tablet 200 mg</i>	2	
<i>rasagiline oral tablet 0.5 mg</i>	2	
<i>tolcapone oral tablet 100 mg</i>	2	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	2	PA

Drug Name	Drug Tier	Requirements/Limits
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	2	PA
Dopamine Agonists		
<i>bromocriptine oral capsule 5 mg</i>	2	
<i>bromocriptine oral tablet 2.5 mg</i>	2	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	4	PA
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	2	
<i>pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg</i>	2	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	2	
Dopamine Precursors/ L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	2	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	2	
Monoamine Oxidase B (Mao-B) Inhibitors		
AZILECT ORAL TABLET 1 MG	4	
<i>rasagiline oral tablet 0.5 mg, 1 mg</i>	2	
<i>selegiline hcl oral capsule 5 mg</i>	2	
<i>selegiline hcl oral tablet 5 mg</i>	2	
Antipsychotics		
1St Generation/ Typical		
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	2	
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	2	
<i>fluphenazine hcl oral concentrate 5 mg/ml</i>	2	
<i>fluphenazine hcl oral elixir 2.5 mg/5 ml</i>	2	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	2	

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<i>haloperidol lactate injection solution 5 mg/ml</i>	2	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	2	
<i>haloperidol oral tablet 0.5 mg, 2 mg, 5 mg</i>	1	QL (90 EA per 30 days)
<i>haloperidol oral tablet 1 mg</i>	1	QL (270 EA per 30 days)
<i>haloperidol oral tablet 10 mg, 20 mg</i>	1	QL (150 EA per 30 days)
<i>loxapine succinate oral capsule 10 mg</i>	2	QL (120 EA per 30 days)
<i>loxapine succinate oral capsule 25 mg, 5 mg</i>	2	QL (90 EA per 30 days)
<i>loxapine succinate oral capsule 50 mg</i>	2	
<i>molindone oral tablet 10 mg, 5 mg</i>	2	QL (120 EA per 30 days)
<i>molindone oral tablet 25 mg</i>	2	QL (270 EA per 30 days)
<i>pimozide oral tablet 1 mg, 2 mg</i>	2	
<i>thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	2	PA
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
<i>trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	2	
2Nd Generation/ Atypical		
<i>abilify maintena intramuscular suspension,extended rel recon 300 mg</i>	5	PA; QL (1 EA per 28 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 400 MG	5	PA; QL (1 EA per 28 days)
<i>abilify maintena intramuscular suspension,extended rel syring 300 mg, 400 mg</i>	5	PA; QL (1 EA per 28 days)
<i>aripiprazole oral solution 1 mg/ml</i>	5	QL (900 ML per 30 days)
<i>aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	2	QL (30 EA per 30 days)
<i>aripiprazole oral tablet,disintegrating 10 mg, 15 mg</i>	5	QL (60 EA per 30 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	5	PA; QL (3.9 ML per 56 days)

Drug Name	Drug Tier	Requirements/Limits
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML	5	PA; QL (1.6 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML	5	PA; QL (2.4 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML	5	PA; QL (3.2 ML per 28 days)
FANAPT ORAL TABLET 1 MG, 2 MG	4	ST; QL (60 EA per 30 days)
FANAPT ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	5	ST; QL (60 EA per 30 days)
FANAPT ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2)	4	ST
GEODON INTRAMUSCULAR RECON SOLN 20 MG/ML (FINAL CONC.)	4	PA; QL (12 EA per 30 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	5	PA; QL (0.75 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	5	PA; QL (1 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	5	PA; QL (1.5 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	4	PA; QL (0.25 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	5	PA; QL (0.5 ML per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.875 ML	5	PA; QL (0.875 ML per 84 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.315 ML	5	PA; QL (1.315 ML per 84 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	5	PA; QL (1.75 ML per 84 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.625 ML	5	PA; QL (2.625 ML per 84 days)
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG	5	ST; QL (30 EA per 30 days)
NUPLAZID ORAL TABLET 17 MG	5	PA; QL (60 EA per 30 days)
<i>olanzapine intramuscular recon soln 10 mg</i>	2	QL (90 EA per 30 days)

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<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	2	QL (30 EA per 30 days)
<i>olanzapine oral tablet,disintegrating 10 mg, 15 mg, 20 mg, 5 mg</i>	2	QL (30 EA per 30 days)
<i>paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg</i>	2	PA; QL (30 EA per 30 days)
<i>paliperidone oral tablet extended release 24hr 6 mg</i>	2	PA; QL (60 EA per 30 days)
<i>quetiapine oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	2	QL (60 EA per 30 days)
<i>quetiapine oral tablet 25 mg, 50 mg</i>	2	QL (90 EA per 30 days)
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg</i>	2	QL (30 EA per 30 days)
<i>quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg</i>	2	QL (60 EA per 30 days)
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	5	PA; QL (30 EA per 30 days)
RISPERDAL CONSTA INTRAMUSCULAR SYRINGE 12.5 MG/2 ML, 25 MG/2 ML	4	PA; QL (2 EA per 28 days)
RISPERDAL CONSTA INTRAMUSCULAR SYRINGE 37.5 MG/2 ML, 50 MG/2 ML	5	PA; QL (2 EA per 28 days)
<i>risperidone oral solution 1 mg/ml</i>	2	QL (240 ML per 30 days)
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	2	QL (60 EA per 30 days)
<i>risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	2	QL (60 EA per 30 days)
SAPHRIS (BLACK CHERRY) SUBLINGUAL TABLET 10 MG, 2.5 MG, 5 MG	3	QL (60 EA per 30 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG, 200 MG	4	QL (30 EA per 30 days)
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HR 300 MG, 400 MG, 50 MG	4	QL (60 EA per 30 days)
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	5	ST; QL (30 EA per 30 days)
VRAYLAR ORAL CAPSULE,DOSE PACK 1.5 MG (1)- 3 MG (6)	4	ST; QL (28 EA per 28 days)

Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	2	QL (60 EA per 30 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG	4	PA
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 300 MG, 405 MG	5	PA
Treatment-Resistant		
<i>clozapine oral tablet 100 mg</i>	2	QL (270 EA per 30 days)
<i>clozapine oral tablet 200 mg</i>	2	QL (120 EA per 30 days)
<i>clozapine oral tablet 25 mg, 50 mg</i>	2	QL (90 EA per 30 days)
<i>clozapine oral tablet,disintegrating 12.5 mg, 25 mg</i>	2	
<i>clozapine oral tablet,disintegrating 150 mg</i>	2	QL (180 EA per 30 days)
<i>clozapine oral tablet,disintegrating 200 mg</i>	2	QL (120 EA per 30 days)
VERSACLOZ ORAL SUSPENSION 50 MG/ML	5	QL (540 ML per 30 days)
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen oral tablet 10 mg, 20 mg</i>	1	
<i>comfort pac-tizanidine kit 4 mg</i>	1	
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	2	
<i>tizanidine oral tablet 2 mg, 4 mg</i>	1	
Antivirals		
Anti-Cytomegalovirus (Cmv) Agents		
<i>cidofovir intravenous solution 75 mg/ml</i>	2	
<i>ganciclovir sodium intravenous recon soln 500 mg</i>	2	B/D
VALCYTE ORAL RECON SOLN 50 MG/ML	5	
<i>valganciclovir oral recon soln 50 mg/ml</i>	4	
<i>valganciclovir oral tablet 450 mg</i>	5	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	4	ST
Anti-Hepatitis B (Hbv) Agents		
ADEFOVIR ORAL TABLET 10 MG	4	PA
BARACLUDE ORAL SOLUTION 0.05 MG/ML	3	

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<i>entecavir oral tablet 0.5 mg, 1 mg</i>	5	
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	4	
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML)	4	PA
INTRON A INJECTION SOLUTION 10 MILLION UNIT/ML, 6 MILLION UNIT/ML	4	PA
<i>lamivudine oral solution 10 mg/ml</i>	2	
<i>lamivudine oral tablet 100 mg, 150 mg, 300 mg</i>	2	
TYZEKA ORAL TABLET 600 MG	4	
VEMLIDY ORAL TABLET 25 MG	5	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	5	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG, 300 MG	5	
Anti-Hepatitis C (Hcv) Agents		
EPCLUSA ORAL TABLET 400-100 MG	5	PA
MODERIBA DOSE PACK ORAL TABLETS,DOSE PACK 400 MG (7)- 400 MG (7), 600 MG (7)- 600 MG (7)	5	PA
<i>moderiba oral tablet 200 mg</i>	3	PA
PEGASYS PROCLICK SUBCUTANEOUS PEN INJECTOR 135 MCG/0.5 ML, 180 MCG/0.5 ML	5	PA
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	5	PA
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	5	PA
PEGINTRON REDIPEN SUBCUTANEOUS PEN INJECTOR KIT 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML	5	PA
PEGINTRON SUBCUTANEOUS KIT 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML	5	PA
REBETOL ORAL SOLUTION 40 MG/ML	4	PA
<i>ribasphere oral capsule 200 mg</i>	3	PA

Drug Name	Drug Tier	Requirements/Limits
<i>ribasphere oral tablet 200 mg</i>	3	PA
RIBASPHERE ORAL TABLET 400 MG	4	PA
RIBASPHERE ORAL TABLET 600 MG	5	PA
<i>ribasphere ribapak oral tablets,dose pack 200 mg (28)- 400 mg (28), 200 mg (7)- 400 mg (7)</i>	5	PA
RIBASPHERE RIBAPAK ORAL TABLETS,DOSE PACK 400 MG (7)- 400 MG (7), 400-400 MG (28)-MG (28), 600 MG (7)- 400 MG (7), 600 MG (7)- 600 MG (7), 600-400 MG (28)-MG (28), 600-600 MG (28)-MG (28)	5	PA
RIBATAB DOSE PACK ORAL TABLETS,DOSE PACK 600-600 MG (28)-MG (28)	5	PA
<i>ribavirin oral capsule 200 mg</i>	3	PA
<i>ribavirin oral tablet 200 mg</i>	3	PA
ZEPATIER ORAL TABLET 50-100 MG	5	PA
Antiherpetic Agents		
<i>acyclovir oral capsule 200 mg</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	1	
<i>acyclovir sodium intravenous recon soln 1,000 mg, 500 mg</i>	2	B/D
<i>acyclovir sodium intravenous solution 50 mg/ml</i>	2	B/D
<i>acyclovir topical ointment 5 %</i>	2	
DENAVIR TOPICAL CREAM 1 %	5	
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	2	
<i>trifluridine ophthalmic (eye) drops 1 %</i>	2	
<i>valacyclovir oral tablet 1 gram, 500 mg</i>	2	
ZOVIRAX TOPICAL CREAM 5 %	5	
Anti-Hiv Agents, Integrase Inhibitors (Insti)		
GENVOYA ORAL TABLET 150-150-200-10 MG	5	QL (30 EA per 30 days)
ISENTRESS HD ORAL TABLET 600 MG	5	QL (60 EA per 30 days)
ISENTRESS ORAL POWDER IN PACKET 100 MG	3	
ISENTRESS ORAL TABLET 400 MG	5	QL (120 EA per 30 days)

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ISENTRESS ORAL TABLET,CHEWABLE 100 MG, 25 MG	3	QL (180 EA per 30 days)
STRIBILD ORAL TABLET 150-150-200-300 MG	5	QL (30 EA per 30 days)
TIVICAY ORAL TABLET 10 MG	4	QL (300 EA per 30 days)
TIVICAY ORAL TABLET 25 MG	5	QL (120 EA per 30 days)
TIVICAY ORAL TABLET 50 MG	5	QL (60 EA per 30 days)
VITEKTA ORAL TABLET 150 MG, 85 MG	5	QL (30 EA per 30 days)
Anti-Hiv Agents, Non-Nucleoside Reverse Transcriptase Inhibitors (Nnrti)		
COMPLERA ORAL TABLET 200-25-300 MG	5	QL (30 EA per 30 days)
EDURANT ORAL TABLET 25 MG	5	QL (30 EA per 30 days)
INTELENCE ORAL TABLET 100 MG, 25 MG	4	QL (120 EA per 30 days)
INTELENCE ORAL TABLET 200 MG	5	QL (60 EA per 30 days)
<i>nevirapine oral suspension 50 mg/5 ml</i>	2	
<i>nevirapine oral tablet 200 mg</i>	2	QL (60 EA per 30 days)
<i>nevirapine oral tablet extended release 24 hr 100 mg</i>	2	QL (120 EA per 30 days)
<i>nevirapine oral tablet extended release 24 hr 400 mg</i>	2	QL (30 EA per 30 days)
RESCRIPTOR ORAL TABLET 200 MG	4	QL (180 EA per 30 days)
RESCRIPTOR ORAL TABLET, DISPERSIBLE 100 MG	4	QL (360 EA per 30 days)
SUSTIVA ORAL CAPSULE 200 MG	3	QL (120 EA per 30 days)
SUSTIVA ORAL CAPSULE 50 MG	3	QL (360 EA per 30 days)
SUSTIVA ORAL TABLET 600 MG	5	QL (30 EA per 30 days)
Anti-Hiv Agents, Nucleoside And Nucleotide Reverse Transcriptase Inhibitors (Nrti)		
<i>abacavir oral tablet 300 mg</i>	2	QL (60 EA per 30 days)
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	5	QL (30 EA per 30 days)
<i>abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg</i>	2	QL (60 EA per 30 days)
ATRIPLA ORAL TABLET 600-200-300 MG	5	QL (30 EA per 30 days)
DESCOVY ORAL TABLET 200-25 MG	5	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>didanosine oral capsule, delayed release(dr/ec) 125 mg</i>	2	QL (90 EA per 30 days)
<i>didanosine oral capsule, delayed release(dr/ec) 200 mg</i>	2	QL (60 EA per 30 days)
<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	2	QL (30 EA per 30 days)
EMTRIVA ORAL CAPSULE 200 MG	3	QL (30 EA per 30 days)
EMTRIVA ORAL SOLUTION 10 MG/ML	3	
EPZICOM ORAL TABLET 600-300 MG	5	QL (30 EA per 30 days)
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	2	QL (60 EA per 30 days)
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	3	
<i>stavudine oral capsule 15 mg, 20 mg</i>	2	QL (120 EA per 30 days)
<i>stavudine oral capsule 30 mg, 40 mg</i>	2	QL (60 EA per 30 days)
TRUVADA ORAL TABLET 100-150 MG, 133- 200 MG, 167-250 MG	5	QL (30 EA per 30 days)
TRUVADA ORAL TABLET 200-300 MG	5	QL (30 EA per 30 days)
VIDEX 2 GRAM PEDIATRIC ORAL RECON SOLN 10 MG/ML (FINAL)	4	
VIDEX 4 GRAM PEDIATRIC ORAL RECON SOLN 10 MG/ML (FINAL)	4	
<i>zerit oral recon soln 1 mg/ml</i>	4	
ZIAGEN ORAL SOLUTION 20 MG/ML	4	
<i>zidovudine oral capsule 100 mg</i>	2	QL (180 EA per 30 days)
<i>zidovudine oral syrup 10 mg/ml</i>	2	
<i>zidovudine oral tablet 300 mg</i>	2	QL (60 EA per 30 days)
Anti-Hiv Agents, Other		
FUZEON SUBCUTANEOUS RECON SOLN 90 MG	5	
ODEFSEY ORAL TABLET 200-25-25 MG	5	QL (30 EA per 30 days)
SELZENTRY ORAL SOLUTION 20 MG/ML	5	
SELZENTRY ORAL TABLET 150 MG	5	QL (60 EA per 30 days)
SELZENTRY ORAL TABLET 25 MG	4	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 300 MG	5	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 75 MG	4	QL (60 EA per 30 days)

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TRIUMEQ ORAL TABLET 600-50-300 MG	5	QL (30 EA per 30 days)
TYBOST ORAL TABLET 150 MG	3	QL (30 EA per 30 days)
Anti-Hiv Agents, Protease Inhibitors		
APTIVUS ORAL CAPSULE 250 MG	3	QL (120 EA per 30 days)
APTIVUS ORAL SOLUTION 100 MG/ML	3	
CRIXIVAN ORAL CAPSULE 200 MG	3	QL (360 EA per 30 days)
CRIXIVAN ORAL CAPSULE 400 MG	3	QL (180 EA per 30 days)
EVOTAZ ORAL TABLET 300-150 MG	5	QL (30 EA per 30 days)
INVIRASE ORAL CAPSULE 200 MG	3	QL (300 EA per 30 days)
INVIRASE ORAL TABLET 500 MG	5	QL (120 EA per 30 days)
KALETRA ORAL SOLUTION 400-100 MG/5 ML	5	
KALETRA ORAL TABLET 100-25 MG	3	QL (240 EA per 30 days)
KALETRA ORAL TABLET 200-50 MG	5	QL (120 EA per 30 days)
LEXIVA ORAL SUSPENSION 50 MG/ML	4	
LEXIVA ORAL TABLET 700 MG	5	QL (120 EA per 30 days)
NORVIR ORAL CAPSULE 100 MG	4	QL (360 EA per 30 days)
NORVIR ORAL SOLUTION 80 MG/ML	4	
NORVIR ORAL TABLET 100 MG	4	QL (360 EA per 30 days)
PREZCOBIX ORAL TABLET 800-150 MG-MG	5	QL (30 EA per 30 days)
PREZISTA ORAL SUSPENSION 100 MG/ML	3	
PREZISTA ORAL TABLET 150 MG	5	QL (180 EA per 30 days)
PREZISTA ORAL TABLET 600 MG	5	QL (60 EA per 30 days)
PREZISTA ORAL TABLET 75 MG	5	QL (300 EA per 30 days)
PREZISTA ORAL TABLET 800 MG	5	QL (30 EA per 30 days)
REYATAZ ORAL CAPSULE 150 MG, 300 MG	5	QL (30 EA per 30 days)
REYATAZ ORAL CAPSULE 200 MG	5	QL (60 EA per 30 days)
REYATAZ ORAL POWDER IN PACKET 50 MG	5	
VIRACEPT ORAL TABLET 250 MG	4	QL (300 EA per 30 days)
VIRACEPT ORAL TABLET 625 MG	5	QL (120 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
Anti-Hiv-Specific Agents, Protease Inhibitor		
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	2	
Anti-Influenza Agents		
<i>oseltamivir oral capsule 30 mg</i>	2	QL (84 EA per 180 days)
<i>oseltamivir oral capsule 45 mg</i>	2	QL (42 EA per 180 days)
<i>oseltamivir oral capsule 75 mg</i>	2	QL (28 EA per 180 days)
RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION	4	QL (60 EA per 180 days)
<i>rimantadine oral tablet 100 mg</i>	2	
TAMIFLU ORAL CAPSULE 30 MG	4	QL (84 EA per 180 days)
TAMIFLU ORAL CAPSULE 45 MG	4	QL (42 EA per 180 days)
TAMIFLU ORAL CAPSULE 75 MG	4	QL (28 EA per 180 days)
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION 6 MG/ML	4	QL (540 ML per 180 days)
Anxiolytics		
Anxiolytics, Other		
<i>buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg</i>	1	
<i>meprobamate oral tablet 200 mg, 400 mg</i>	2	PA
Benzodiazepines		
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg</i>	2	QL (120 EA per 30 days)
<i>alprazolam oral tablet 2 mg</i>	2	QL (150 EA per 30 days)
<i>clorazepate dipotassium oral tablet 15 mg</i>	2	PA; QL (180 EA per 30 days)
<i>clorazepate dipotassium oral tablet 3.75 mg, 7.5 mg</i>	2	PA; QL (90 EA per 30 days)
<i>diazepam intensol oral concentrate 5 mg/ml</i>	2	PA; QL (240 ML per 30 days)
<i>diazepam oral concentrate 5 mg/ml</i>	2	PA; QL (240 ML per 30 days)
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml), 5 mg/5 ml (1 mg/ml, 5 ml)</i>	2	PA; QL (1200 ML per 30 days)
<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	2	PA; QL (120 EA per 30 days)
<i>lorazepam intensol oral concentrate 2 mg/ml</i>	2	QL (150 ML per 30 days)
<i>lorazepam oral concentrate 2 mg/ml</i>	2	QL (150 ML per 30 days)
<i>lorazepam oral tablet 0.5 mg, 1 mg</i>	2	QL (90 EA per 30 days)
<i>lorazepam oral tablet 2 mg</i>	2	QL (150 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
Bipolar Agents		
Mood Stabilizers		
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i>	2	
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	2	
<i>lithium carbonate oral tablet 300 mg</i>	2	
<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	2	
<i>lithium citrate oral solution 8 meq/5 ml</i>	2	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	2	ST
AVANDIA ORAL TABLET 2 MG	4	ST; QL (120 EA per 30 days)
AVANDIA ORAL TABLET 4 MG	4	ST; QL (60 EA per 30 days)
<i>glimepiride oral tablet 1 mg</i>	1	QL (240 EA per 30 days)
<i>glimepiride oral tablet 2 mg</i>	1	QL (120 EA per 30 days)
<i>glimepiride oral tablet 4 mg</i>	1	QL (60 EA per 30 days)
<i>glipizide oral tablet 10 mg</i>	1	QL (120 EA per 30 days)
<i>glipizide oral tablet 5 mg</i>	1	QL (240 EA per 30 days)
<i>glipizide oral tablet extended release 24hr 10 mg</i>	1	QL (60 EA per 30 days)
<i>glipizide oral tablet extended release 24hr 2.5 mg</i>	1	QL (240 EA per 30 days)
<i>glipizide oral tablet extended release 24hr 5 mg</i>	1	QL (120 EA per 30 days)
<i>glipizide-metformin oral tablet 2.5-250 mg</i>	1	QL (240 EA per 30 days)
<i>glipizide-metformin oral tablet 2.5-500 mg, 5-500 mg</i>	1	QL (120 EA per 30 days)
<i>glyburide micronized oral tablet 1.5 mg</i>	2	PA; QL (240 EA per 30 days)
<i>glyburide micronized oral tablet 3 mg</i>	2	PA; QL (120 EA per 30 days)
<i>glyburide micronized oral tablet 6 mg</i>	2	PA; QL (60 EA per 30 days)
<i>glyburide oral tablet 1.25 mg</i>	2	PA; QL (480 EA per 30 days)
<i>glyburide oral tablet 2.5 mg</i>	2	PA; QL (240 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>glyburide oral tablet 5 mg</i>	2	PA; QL (120 EA per 30 days)
<i>glyburide-metformin oral tablet 1.25-250 mg</i>	2	PA; QL (240 EA per 30 days)
<i>glyburide-metformin oral tablet 2.5-500 mg, 5-500 mg</i>	2	PA; QL (120 EA per 30 days)
GLYXAMBI ORAL TABLET 10-5 MG	3	ST; QL (30 EA per 30 days)
GLYXAMBI ORAL TABLET 25-5 MG	3	ST; QL (60 EA per 30 days)
INVOKAMET ORAL TABLET 150-1,000 MG, 150-500 MG, 50-1,000 MG	3	ST; QL (60 EA per 30 days)
INVOKAMET ORAL TABLET 50-500 MG	3	ST; QL (120 EA per 30 days)
INVOKAMET XR ORAL TABLET, IR - ER, BIPHASIC 24HR 150-1,000 MG, 150-500 MG, 50-1,000 MG, 50-500 MG	3	ST; QL (60 EA per 30 days)
INVOKANA ORAL TABLET 100 MG	3	ST; QL (90 EA per 30 days)
INVOKANA ORAL TABLET 300 MG	3	ST; QL (30 EA per 30 days)
JANUMET ORAL TABLET 50-1,000 MG, 50-500 MG	3	ST; QL (60 EA per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG	3	ST; QL (30 EA per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 50-1,000 MG, 50-500 MG	3	ST; QL (60 EA per 30 days)
JANUVIA ORAL TABLET 100 MG	3	ST; QL (30 EA per 30 days)
JANUVIA ORAL TABLET 25 MG	3	ST; QL (120 EA per 30 days)
JANUVIA ORAL TABLET 50 MG	3	ST; QL (60 EA per 30 days)
JARDIANCE ORAL TABLET 10 MG, 25 MG	3	ST; QL (30 EA per 30 days)
JENTADUETO ORAL TABLET 2.5-1,000 MG, 2.5-500 MG, 2.5-850 MG	3	ST; QL (60 EA per 30 days)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG, 5-1,000 MG	3	ST; QL (60 EA per 30 days)
<i>metformin oral tablet 1,000 mg</i>	1	QL (75 EA per 30 days)
<i>metformin oral tablet 500 mg</i>	1	QL (150 EA per 30 days)
<i>metformin oral tablet 850 mg</i>	1	QL (90 EA per 30 days)
<i>metformin oral tablet extended release 24 hr 500 mg</i>	1	QL (120 EA per 30 days)
<i>metformin oral tablet extended release 24 hr 750 mg</i>	1	QL (75 EA per 30 days)
<i>nateglinide oral tablet 120 mg, 60 mg</i>	2	ST
<i>pioglitazone oral tablet 15 mg</i>	2	QL (90 EA per 30 days)

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<i>pioglitazone oral tablet 30 mg</i>	2	QL (45 EA per 30 days)
<i>pioglitazone oral tablet 45 mg</i>	2	QL (30 EA per 30 days)
<i>pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg</i>	2	QL (90 EA per 30 days)
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	ST
SYMLINPEN 120 SUBCUTANEOUS PEN INJECTOR 2,700 MCG/2.7 ML	4	PA
SYMLINPEN 60 SUBCUTANEOUS PEN INJECTOR 1,500 MCG/1.5 ML	4	PA
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	3	ST; QL (60 EA per 30 days)
<i>tolazamide oral tablet 250 mg</i>	2	QL (120 EA per 30 days)
<i>tolazamide oral tablet 500 mg</i>	2	QL (60 EA per 30 days)
<i>tolbutamide oral tablet 500 mg</i>	2	QL (180 EA per 30 days)
TRADJENTA ORAL TABLET 5 MG	3	ST; QL (30 EA per 30 days)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML	3	
VICTOZA 2-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	3	
VICTOZA 3-PAK SUBCUTANEOUS PEN INJECTOR 0.6 MG/0.1 ML (18 MG/3 ML)	3	
Glycemic Agents		
GLUCAGEN DIAGNOSTIC KIT INJECTION RECON SOLN 1 MG/ML	3	QL (4 EA per 30 days)
GLUCAGEN HYPOKIT INJECTION RECON SOLN 1 MG	3	QL (4 EA per 30 days)
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION KIT 1 MG	3	QL (2 EA per 30 days)
GLUCAGON HCL INJECTION RECON SOLN 1 MG	3	QL (2 EA per 30 days)
KORLYM ORAL TABLET 300 MG	5	PA
PROGLYCEM ORAL SUSPENSION 50 MG/ML	4	
Insulins		

Drug Name	Drug Tier	Requirements/Limits
APIDRA SOLOSTAR SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	
APIDRA SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
HUMALOG KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML, 200 UNIT/ML (3 ML)	3	
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)	3	
HUMALOG MIX 50-50 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (50-50)	3	
HUMALOG MIX 75-25 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (75-25)	3	
HUMALOG MIX 75-25 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)	3	
HUMALOG SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	3	
HUMALOG SUBCUTANEOUS SOLUTION 100 UNIT/ML, 100 UNIT/ML (PREFILLED SYRINGE)	3	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	
HUMULIN N KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	
HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	
HUMULIN R U-100 INJECTION SOLUTION 100 UNIT/ML	3	
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	3	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML	3	
LANTUS SOLOSTAR SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	

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Drug Name	Drug Tier	Requirements/Limits
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
LEVEMIR FLEXTOUCH SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	3	
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	3	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	3	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	3	
NOVOLOG FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	3	
NOVOLOG MIX 70-30 FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	3	
NOVOLOG MIX 70-30 SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	3	
NOVOLOG PENFILL SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	3	
NOVOLOG SUBCUTANEOUS SOLUTION 100 UNIT/ML	3	
Blood Glucose Regulators / Insulins		
Blood Glucose Regulators / Insulins		
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	3	
Blood Products/ Modifiers/ Volume Expanders		
Anticoagulants		
<i>argatroban in 0.9 % sod chlor intravenous parenteral solution 250 mg/250 ml (1 mg/ml)</i>	2	B/D
<i>argatroban in 0.9 % sod chlor intravenous solution 1 mg/ml</i>	2	B/D
<i>argatroban in nacl (iso-os) intravenous solution 50 mg/50 ml (1 mg/ml)</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
<i>argatroban intravenous solution 100 mg/ml</i>	5	B/D
COUMADIN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG	4	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	3	
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i>	2	
<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	2	
<i>enoxaparin subcutaneous syringe 150 mg/ml</i>	5	
<i>fondaparinux subcutaneous syringe 10 mg/0.8 ml, 7.5 mg/0.6 ml</i>	5	
<i>fondaparinux subcutaneous syringe 2.5 mg/0.5 ml, 5 mg/0.4 ml</i>	2	
FRAGMIN SUBCUTANEOUS SOLUTION 25,000 ANTI-XA UNIT/ML	5	
FRAGMIN SUBCUTANEOUS SYRINGE 10,000 ANTI-XA UNIT/ML, 12,500 ANTI-XA UNIT/0.5 ML, 15,000 ANTI-XA UNIT/0.6 ML, 18,000 ANTI-XA UNIT/0.72 ML, 7,500 ANTI-XA UNIT/0.3 ML	5	
FRAGMIN SUBCUTANEOUS SYRINGE 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML	4	
<i>heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml)</i>	2	
<i>heparin (porcine) injection cartridge 5,000 unit/ml (1 ml)</i>	2	
<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 5,000 unit/ml</i>	2	
<i>heparin, porcine (pf) injection solution 1,000 unit/ml, 5,000 unit/0.5 ml</i>	2	
<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG	3	
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	1	
XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	3	

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Drug Name	Drug Tier	Requirements/Limits
XARELTO ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	3	
Blood Formation Modifiers		
<i>anagrelide oral capsule 0.5 mg, 1 mg</i>	2	
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 100 MCG/ML, 150 MCG/0.75 ML, 200 MCG/ML, 300 MCG/ML	5	PA
ARANESP (IN POLYSORBATE) INJECTION SOLUTION 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	4	PA
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 10 MCG/0.4 ML, 25 MCG/0.42 ML, 40 MCG/0.4 ML, 60 MCG/0.3 ML	4	PA
ARANESP (IN POLYSORBATE) INJECTION SYRINGE 100 MCG/0.5 ML, 150 MCG/0.3 ML, 200 MCG/0.4 ML, 300 MCG/0.6 ML, 500 MCG/ML	5	PA
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 3,000 UNIT/ML, 4,000 UNIT/ML	4	PA
EPOGEN INJECTION SOLUTION 20,000 UNIT/ML	5	PA
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	PA
LEUKINE INJECTION RECON SOLN 250 MCG	5	PA
MOZOBIL SUBCUTANEOUS SOLUTION 24 MG/1.2 ML (20 MG/ML)	5	PA
NEULASTA SUBCUTANEOUS SYRINGE 6 MG/0.6ML	5	PA
NEULASTA SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML	5	PA
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	5	PA
NEUPOGEN INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	PA
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 20,000 UNIT/2 ML	3	PA

Drug Name	Drug Tier	Requirements/Limits
PROCRIT INJECTION SOLUTION 2,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	3	PA
PROCRIT INJECTION SOLUTION 20,000 UNIT/ML	4	PA
PROCRIT INJECTION SOLUTION 40,000 UNIT/ML	5	PA
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG	5	QL (30 EA per 30 days)
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	5	PA
Coagulants		
<i>tranexamic acid intravenous solution 1,000 mg/10 ml (100 mg/ml)</i>	2	
<i>tranexamic acid oral tablet 650 mg</i>	2	
Platelet Modifying Agents		
<i>aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg</i>	2	
BRILINTA ORAL TABLET 60 MG, 90 MG	4	
<i>cilostazol oral tablet 100 mg, 50 mg</i>	2	
<i>clopidogrel oral tablet 300 mg</i>	2	
<i>clopidogrel oral tablet 75 mg</i>	1	
<i>dipyridamole oral tablet 25 mg, 50 mg, 75 mg</i>	2	PA
EFFIENT ORAL TABLET 10 MG, 5 MG	3	
<i>prasugrel oral tablet 10 mg, 5 mg</i>	2	
Cardiovascular Agents		
Alpha-Adrenergic Agonists		
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	1	
<i>clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr</i>	2	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	2	PA
<i>methyldopa oral tablet 250 mg, 500 mg</i>	2	PA
<i>methyldopate intravenous solution 250 mg/5 ml</i>	2	PA
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG	4	

Drug Name	Drug Tier	Requirements/Limits
Alpha-Adrenergic Blocking Agents		
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	1	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	1	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	1	
Angiotensin Ii Receptor Antagonists		
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	2	
BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG	3	ST
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	1	
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i>	2	
<i>olmesartan-amlodipin-hcthiazyd 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</i>	2	
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i>	1	
Angiotensin-Converting Enzyme (Ace) Inhibitors		
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	1	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	1	
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	1	
<i>moexipril oral tablet 15 mg, 7.5 mg</i>	2	
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	1	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	1	
<i>trandolapril oral tablet 1 mg, 2 mg, 4 mg</i>	1	
Antiarrhythmics		
<i>amiodarone oral tablet 100 mg, 200 mg, 400 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i>	2	PA
<i>dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg</i>	2	
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	2	
<i>mexiletine oral capsule 150 mg, 200 mg, 250 mg</i>	2	
MULTAQ ORAL TABLET 400 MG	4	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	4	PA
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	2	
<i>quinidine gluconate oral tablet extended release 324 mg</i>	2	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	2	
<i>sorine oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
<i>sotalol af oral tablet 120 mg, 160 mg, 80 mg</i>	1	
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	1	
Beta-Adrenergic Blocking Agents		
<i>acebutolol oral capsule 200 mg, 400 mg</i>	2	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	1	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	2	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	1	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	2	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	2	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	1	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	2	
<i>propranolol oral capsule, extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	2	
<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	2	
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	2	
Calcium Channel Blocking Agents		
<i>afeditab cr oral tablet extended release 30 mg, 60 mg</i>	2	ST

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Drug Name	Drug Tier	Requirements/Limits
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg</i>	2	
<i>diltiazem hcl intravenous recon soln 100 mg</i>	2	
<i>diltiazem hcl intravenous solution 5 mg/ml</i>	2	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	2	
<i>diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg</i>	2	
<i>diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	2	
<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	2	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	1	
<i>dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	2	
<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	2	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	2	ST
<i>nifedical xl oral tablet extended release 24hr 30 mg, 60 mg</i>	2	ST
<i>nifedipine oral capsule 10 mg, 20 mg</i>	2	PA
<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	2	ST
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	2	ST
<i>nimodipine oral capsule 30 mg</i>	2	
<i>taztia xt oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	2	
<i>verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg</i>	2	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	1	
<i>verapamil oral tablet extended release 120 mg, 120 mg (24 hours), 180 mg, 240 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
Cardiovascular Agents		
ALDACTAZIDE ORAL TABLET 50-50 MG	4	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	1	
<i>amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	1	
<i>amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg</i>	2	
<i>amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg</i>	1	
<i>amlodipine-valsartan-hctiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg</i>	2	
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	1	
<i>benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg</i>	1	
BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG	3	ST
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	1	
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	1	
DEMSER ORAL CAPSULE 250 MG	4	PA
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg</i>	1	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	4	
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	2	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	2	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	1	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	1	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	1	
<i>methyl dopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg</i>	2	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>moexipril-hydrochlorothiazide oral tablet 15-12.5 mg, 15-25 mg, 7.5-12.5 mg</i>	2	
<i>olmesartan-amlodipin-hcthiiazid 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</i>	2	
<i>olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	2	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	2	
<i>reserpine oral tablet 0.1 mg, 0.25 mg</i>	2	PA
<i>spironolacton-hydrochlorothiaz oral tablet 25-25 mg</i>	2	
TEKTURNA HCT ORAL TABLET 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG	3	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg, 50-25 mg</i>	1	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	1	
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	
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i>	1	
VYTORIN 10-10 ORAL TABLET 10-10 MG	3	
VYTORIN 10-20 ORAL TABLET 10-20 MG	3	
VYTORIN 10-40 ORAL TABLET 10-40 MG	3	
VYTORIN 10-80 ORAL TABLET 10-80 MG	3	
Cardiovascular Agents, Other		
<i>digitek oral tablet 125 mcg</i>	1	QL (30 EA per 30 days)
<i>digitek oral tablet 250 mcg</i>	1	PA
<i>digox oral tablet 125 mcg</i>	1	QL (30 EA per 30 days)
<i>digox oral tablet 250 mcg</i>	1	PA
<i>digoxin oral solution 50 mcg/ml</i>	2	PA
<i>digoxin oral tablet 125 mcg</i>	1	QL (30 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
<i>digoxin oral tablet 250 mcg</i>	1	PA
<i>pentoxifylline oral tablet extended release 400 mg</i>	2	
RANEXA ORAL TABLET EXTENDED RELEASE 12 HR 1,000 MG, 500 MG	4	PA
TEKTURNAL ORAL TABLET 150 MG, 300 MG	3	
Diuretics, Carbonic Anhydrase Inhibitors		
<i>acetazolamide oral capsule, extended release 500 mg</i>	2	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	2	
KEVEYIS ORAL TABLET 50 MG	5	PA
Diuretics, Loop		
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>furosemide injection solution 10 mg/ml</i>	2	
<i>furosemide injection syringe 10 mg/ml</i>	2	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	2	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	1	
<i>torseamide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	2	
Diuretics, Potassium-Sparing		
<i>amiloride oral tablet 5 mg</i>	2	
<i>eplerenone oral tablet 25 mg, 50 mg</i>	2	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i>	1	
Diuretics, Thiazide		
<i>chlorothiazide oral tablet 250 mg, 500 mg</i>	1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	1	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	1	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	1	
<i>methyclothiazide oral tablet 5 mg</i>	2	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	
Dyslipidemics, Fibric Acid Derivatives		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	2	

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<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	2	
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	2	
<i>fenofibric acid (choline) oral capsule, delayed release(dr/ec) 135 mg, 45 mg</i>	2	
<i>gemfibrozil oral tablet 600 mg</i>	2	
Dyslipidemics, Hmg Coa Reductase Inhibitors		
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG	3	
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	1	
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	1	
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	2	
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	1	
Dyslipidemics, Other		
<i>cholestyramine (with sugar) oral powder 4 gram</i>	2	
<i>cholestyramine (with sugar) oral powder in packet 4 gram</i>	2	
<i>cholestyramine light oral powder 4 gram</i>	2	
<i>cholestyramine light oral powder in packet 4 gram</i>	2	
<i>colestipol oral granules 5 gram</i>	2	
<i>colestipol oral packet 5 gram</i>	2	
<i>colestipol oral tablet 1 gram</i>	2	
<i>ezetimibe oral tablet 10 mg</i>	2	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 5 MG, 60 MG	5	PA
KYNAMRO SUBCUTANEOUS SYRINGE 200 MG/ML	5	PA
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	2	
<i>omega-3 acid ethyl esters oral capsule 1 gram</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>prevalite oral powder 4 gram</i>	2	
<i>prevalite oral powder in packet 4 gram</i>	2	
REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML	5	PA
REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML	5	PA
REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML	5	PA
<i>triklo oral capsule 1 gram</i>	2	
WELCHOL ORAL POWDER IN PACKET 3.75 GRAM	3	
WELCHOL ORAL TABLET 625 MG	3	
ZETIA ORAL TABLET 10 MG	3	
Vasodilators, Direct-Acting Arterial		
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	2	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	2	
Vasodilators, Direct-Acting Arterial/ Venous		
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	1	
<i>isosorbide dinitrate oral tablet extended release 40 mg</i>	1	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	1	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	1	
NITRO-BID TRANSDERMAL OINTMENT 2 %	4	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	4	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	2	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	2	
<i>nitroglycerin translingual aerosol,spray 400 mcg/spray</i>	2	
<i>nitroglycerin translingual spray,non-aerosol 400 mcg/spray</i>	2	

Drug Name	Drug Tier	Requirements/Limits
NITROSTAT SUBLINGUAL TABLET 0.3 MG, 0.4 MG, 0.6 MG	4	
RECTIV RECTAL OINTMENT 0.4 % (W/W)	4	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
<i>dextroamphetamine oral capsule, extended release 10 mg</i>	2	PA; QL (150 EA per 30 days)
<i>dextroamphetamine oral capsule, extended release 15 mg</i>	2	PA; QL (120 EA per 30 days)
<i>dextroamphetamine oral capsule, extended release 5 mg</i>	2	PA; QL (90 EA per 30 days)
<i>dextroamphetamine oral tablet 10 mg</i>	2	PA; QL (180 EA per 30 days)
<i>dextroamphetamine oral tablet 5 mg</i>	2	PA; QL (60 EA per 30 days)
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	2	PA; QL (30 EA per 30 days)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	2	PA; QL (60 EA per 30 days)
<i>dextroamphetamine-amphetamine oral tablet 12.5 mg</i>	2	PA; QL (120 EA per 30 days)
<i>dextroamphetamine-amphetamine oral tablet 15 mg</i>	2	PA; QL (90 EA per 30 days)
Attention Deficit Hyperactivity Disorder Agents, Non-Amphetamines		
<i>atomoxetine oral capsule 10 mg</i>	2	
<i>atomoxetine oral capsule 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg</i>	2	
<i>clonidine hcl oral tablet extended release 12 hr 0.1 mg</i>	2	QL (120 EA per 30 days)
<i>dexmethylphenidate oral capsule, er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i>	2	PA
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i>	2	PA
FOCALIN XR ORAL CAPSULE, ER BIPHASIC 50-50 25 MG, 35 MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i>	2	PA
<i>methylphenidate hcl oral tablet extended release 20 mg</i>	2	PA; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg</i>	2	PA; QL (120 EA per 30 days)
<i>methylphenidate hcl oral tablet extended release 24hr 27 mg</i>	2	PA; QL (90 EA per 30 days)
<i>methylphenidate hcl oral tablet extended release 24hr 36 mg</i>	2	PA; QL (60 EA per 30 days)
<i>methylphenidate hcl oral tablet extended release 24hr 54 mg</i>	2	PA; QL (30 EA per 30 days)
STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	3	
Central Nervous System, Other		
EXONDYS 51 INTRAVENOUS SOLUTION 50 MG/ML, 50 MG/ML (10 ML)	5	PA
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG	4	
HORIZANT ORAL TABLET EXTENDED RELEASE 600 MG	4	
INGREZZA ORAL CAPSULE 40 MG	5	PA
NUEDEXTA ORAL CAPSULE 20-10 MG	4	
RADICAVA INTRAVENOUS PIGGYBACK 30 MG/100 ML	5	PA
<i>riluzole oral tablet 50 mg</i>	2	
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	5	
Fibromyalgia Agents		
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG	3	
LYRICA ORAL SOLUTION 20 MG/ML	3	
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG	4	
SAVELLA ORAL TABLETS,DOSE PACK 12.5 MG (5)-25 MG(8)-50 MG(42)	4	
Multiple Sclerosis Agents		

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AMPYRA ORAL TABLET EXTENDED RELEASE 12 HR 10 MG	5	PA
AUBAGIO ORAL TABLET 14 MG, 7 MG	5	PA
BETASERON SUBCUTANEOUS KIT 0.3 MG	5	PA
BETASERON SUBCUTANEOUS RECON SOLN 0.3 MG	5	PA
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML, 40 MG/ML	5	PA
EXTAVIA SUBCUTANEOUS KIT 0.3 MG	5	PA
EXTAVIA SUBCUTANEOUS RECON SOLN 0.3 MG	5	PA
GILENYA ORAL CAPSULE 0.5 MG	5	PA
REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML	5	PA
REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML, 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA
REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6)	5	PA
TECFIDERA ORAL CAPSULE, DELAYED RELEASE (DR/EC) 120 MG, 120 MG (14)- 240 MG (46), 240 MG	5	PA
TYSABRI INTRAVENOUS SOLUTION 300 MG/15 ML	5	PA; LA
Dental And Oral Agents		
Dental And Oral Agents		
<i>cevimeline oral capsule 30 mg</i>	2	
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	1	
CUVPOSA ORAL SOLUTION 1 MG/5 ML (0.2 MG/ML)	4	
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	2	
<i>perio gard mucous membrane mouthwash 0.12 %</i>	1	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>triamcinolone acetonide dental paste 0.1 %</i>	2	
Dermatological Agents		
Dermatological Agents		
8-MOP ORAL CAPSULE 10 MG	4	PA
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	5	PA
<i>ammonium lactate topical cream 12 %</i>	2	
<i>ammonium lactate topical lotion 12 %</i>	2	
<i>amnesteem oral capsule 10 mg, 20 mg, 40 mg</i>	2	
<i>calcipotriene scalp solution 0.005 %</i>	2	
<i>calcipotriene topical cream 0.005 %</i>	2	
<i>calcipotriene topical ointment 0.005 %</i>	2	
<i>claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	2	
<i>clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %</i>	2	
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	2	
<i>clotrimazole-betamethasone topical lotion 1-0.05 %</i>	2	
<i>cormax scalp solution 0.05 %</i>	2	
<i>doxepin topical cream 5 %</i>	2	
ELIDEL TOPICAL CREAM 1 %	4	ST
<i>erythromycin-benzoyl peroxide topical gel 3-5 %</i>	2	
<i>fluorouracil intravenous solution 1 gram/20 ml</i>	2	B/D
<i>fluorouracil intravenous solution 2.5 gram/50 ml, 5 gram/100 ml, 500 mg/10 ml</i>	2	B/D
<i>fluorouracil topical cream 0.5 %, 5 %</i>	2	
<i>fluorouracil topical solution 2 %, 5 %</i>	2	
<i>fluticasone topical cream 0.05 %</i>	2	
<i>fluticasone topical lotion 0.05 %</i>	2	
<i>fluticasone topical ointment 0.005 %</i>	2	
<i>imiquimod topical cream in packet 5 %</i>	2	
<i>methoxsalen oral capsule,liqd-filled,rapid rel 10 mg</i>	2	PA
<i>myorisan oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	2	
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	2	
<i>podofilox topical solution 0.5 %</i>	2	
<i>prednicarbate topical cream 0.1 %</i>	2	
<i>prednicarbate topical ointment 0.1 %</i>	2	
PRUDOXIN TOPICAL CREAM 5 %	4	PA
REGRANEX TOPICAL GEL 0.01 %	4	PA; QL (15 GM per 30 days)
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	3	
<i>selenium sulfide topical lotion 2.5 %</i>	2	
STELARA INTRAVENOUS SOLUTION 130 MG/26 ML	5	PA
STELARA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	5	PA
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	2	ST
<i>tazarotene topical cream 0.1 %</i>	2	
TAZORAC TOPICAL CREAM 0.05 %, 0.1 %	4	
TAZORAC TOPICAL GEL 0.05 %, 0.1 %	4	
<i>tretinoin (emollient) topical cream 0.05 %</i>	2	
<i>tretinoin topical cream 0.025 %, 0.05 %, 0.1 %</i>	2	
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	2	
UVADEX INJECTION SOLUTION 20 MCG/ML	4	B/D
VEREGEN TOPICAL OINTMENT 15 %	4	
<i>zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	2	
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 2.5 %, 3.75 %	5	PA
ZYCLARA TOPICAL CREAM IN PACKET 3.75 %	5	PA

Diabetic Supplies

Diabetic Supplies

Drug Name	Drug Tier	Requirements/Limits
<i>assure id insulin safety syringe 1 ml 29 gauge x 1/2"</i>	2	
<i>gauze pad topical bandage 2 x 2 "</i>	2	
<i>insulin syringe-needle u-100 syringe 0.3 ml 29 gauge, 1 ml 29 gauge x 1/2", 1/2 ml 28 gauge</i>	2	
<i>pen needle, diabetic needle 29 gauge x 1/2"</i>	2	
Enzyme Replacement/ Modifiers		
Enzyme Replacement/ Modifiers		
ADAGEN INTRAMUSCULAR SOLUTION 250 UNIT/ML	5	PA
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5 ML	5	PA
<i>allopurinol sodium intravenous recon soln 500 mg</i>	4	B/D
CEREZYME INTRAVENOUS RECON SOLN 400 UNIT	5	PA
CHOLBAM ORAL CAPSULE 250 MG, 50 MG	5	PA
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500-15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	3	
CYSTADANE ORAL POWDER 1 GRAM/1.7 ML	4	
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	4	PA
ELAPRASE INTRAVENOUS SOLUTION 6 MG/3 ML	5	PA
ELELYSO INTRAVENOUS RECON SOLN 200 UNIT	5	PA
ELITEK INTRAVENOUS RECON SOLN 1.5 MG	4	PA
ELITEK INTRAVENOUS RECON SOLN 7.5 MG	5	PA
FABRAZYME INTRAVENOUS RECON SOLN 35 MG, 5 MG	5	PA
KUVAN ORAL POWDER IN PACKET 100 MG, 500 MG	5	PA
KUVAN ORAL TABLET,SOLUBLE 100 MG	5	PA

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Drug Name	Drug Tier	Requirements/Limits
NAGLAZYME INTRAVENOUS SOLUTION 5 MG/5 ML	5	PA
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG	5	PA
ORFADIN ORAL SUSPENSION 4 MG/ML	5	PA
RAVICTI ORAL LIQUID 1.1 GRAM/ML	5	PA
STRENSIQ SUBCUTANEOUS SOLUTION 100 MG/ML, 40 MG/ML	5	PA
SUCRAID ORAL SOLUTION 8,500 UNIT/ML	4	PA
VPRIV INTRAVENOUS RECON SOLN 400 UNIT	5	B/D
ZAVESCA ORAL CAPSULE 100 MG	4	PA
ZENPEP ORAL CAPSULE, DELAYED RELEASE (DR/EC) 10,000-34,000 -55,000 UNIT, 15,000-51,000 -82,000 UNIT, 20,000-68,000 -109,000 UNIT, 25,000-85,000- 136,000 UNIT, 3,000-10,000- 16,000 UNIT, 40,000-136,000-218,000 UNIT, 5,000-17,000 -27,000 UNIT	3	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
<i>dicyclomine oral capsule 10 mg</i>	1	
<i>dicyclomine oral solution 10 mg/5 ml</i>	2	
<i>dicyclomine oral tablet 20 mg</i>	1	
Gastrointestinal Agents, Other		
<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	2	
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	2	
GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG	5	PA
GATTEX ONE-VIAL SUBCUTANEOUS KIT 5 MG	5	PA
<i>loperamide oral capsule 2 mg</i>	2	
OICALIVA ORAL TABLET 10 MG, 5 MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
<i>proctozone-hc topical cream with perineal applicator 2.5 %</i>	1	
RELISTOR ORAL TABLET 150 MG	4	PA
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6 ML	4	PA
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/0.6 ML, 8 MG/0.4 ML	4	PA
<i>ursodiol oral capsule 300 mg</i>	2	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	2	
XERMELO ORAL TABLET 250 MG	5	PA
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl oral solution 300 mg/5 ml</i>	1	
<i>cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg</i>	1	
<i>famotidine (pf) intravenous solution 20 mg/2 ml</i>	2	
<i>famotidine intravenous solution 10 mg/ml</i>	2	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
<i>nizatidine oral capsule 150 mg, 300 mg</i>	2	
<i>ranitidine hcl oral syrup 15 mg/ml</i>	2	
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	2	
Irritable Bowel Syndrome Agents		
<i>alosetron oral tablet 0.5 mg, 1 mg</i>	2	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG	3	
<i>budesonide oral capsule, delayed, extend. release 3 mg</i>	2	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	3	
Laxatives		
<i>constulose oral solution 10 gram/15 ml</i>	2	
<i>enulose oral solution 10 gram/15 ml</i>	2	
<i>gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram</i>	2	
<i>gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram</i>	2	
<i>gavilyte-n oral recon soln 420 gram</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>generlac oral solution 10 gram/15 ml</i>	2	
KRISTALOSE ORAL PACKET 10 GRAM, 20 GRAM	4	PA
<i>lactulose oral solution 10 gram/15 ml, 10 gram/15 ml (15 ml), 20 gram/30 ml</i>	2	
<i>peg-3350 with flavor packs oral recon soln 420 gram</i>	2	
<i>peg-electrolyte soln oral recon soln 420 gram</i>	2	
<i>polyethylene glycol 3350 oral powder 17 gram/dose</i>	2	
<i>polyethylene glycol 3350 oral powder in packet 17 gram</i>	2	
<i>trilyte with flavor packets oral recon soln 420 gram</i>	2	
Protectants		
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	2	
<i>sucralfate oral tablet 1 gram</i>	2	
Proton Pump Inhibitors		
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg, 40 mg</i>	2	ST
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg, 30 mg</i>	2	
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>	1	
<i>pantoprazole intravenous recon soln 40 mg</i>	2	
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg, 40 mg</i>	2	
<i>protonix intravenous recon soln 40 mg</i>	2	
Genitourinary Agents		
Antispasmodics, Urinary		
<i>darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg</i>	2	
<i>flavoxate oral tablet 100 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG	4	ST; QL (30 EA per 30 days)
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	1	
<i>oxybutynin chloride oral tablet 5 mg</i>	1	
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	1	
<i>tolterodine oral capsule,extended release 24hr 2 mg, 4 mg</i>	2	ST
<i>tolterodine oral tablet 1 mg, 2 mg</i>	2	ST
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HR 4 MG, 8 MG	3	
Benign Prostatic Hypertrophy Agents		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	2	
<i>dutasteride oral capsule 0.5 mg</i>	2	
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg</i>	2	
<i>finasteride oral tablet 5 mg</i>	2	
<i>tamsulosin oral capsule,extended release 24hr 0.4 mg</i>	2	
Genitourinary Agents, Other		
<i>anodyne lpt topical kit 2.5-2.5 %</i>	2	
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>	2	
DEPEN TITRATABS ORAL TABLET 250 MG	4	PA
ELMIRON ORAL CAPSULE 100 MG	4	
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)</i>	2	
<i>sodium phenylbutyrate oral powder 0.94 gram/gram</i>	5	PA
Phosphate Binders		
<i>calcium acetate oral capsule 667 mg</i>	2	
FOSRENOL ORAL POWDER IN PACKET 1,000 MG, 750 MG	3	
FOSRENOL ORAL TABLET,CHEWABLE 1,000 MG, 500 MG, 750 MG	3	
<i>lanthanum oral tablet,chewable 1,000 mg, 500 mg, 750 mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
RENAGEL ORAL TABLET 400 MG, 800 MG	4	
REVELA ORAL POWDER IN PACKET 0.8 GRAM, 2.4 GRAM	3	
REVELA ORAL TABLET 800 MG	3	
<i>sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram</i>	2	
<i>sevelamer carbonate oral tablet 800 mg</i>	2	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Adrenal)		
<i>ala-cort topical cream 1 %, 2.5 %</i>	1	
<i>alclometasone topical cream 0.05 %</i>	2	
<i>alclometasone topical ointment 0.05 %</i>	2	
<i>clobetasol scalp solution 0.05 %</i>	2	
<i>clobetasol topical cream 0.05 %</i>	2	
<i>clobetasol topical gel 0.05 %</i>	2	ST
<i>clobetasol topical ointment 0.05 %</i>	2	ST
<i>clobetasol-emollient topical cream 0.05 %</i>	2	
<i>desonide topical cream 0.05 %</i>	2	
<i>desonide topical lotion 0.05 %</i>	2	
<i>desonide topical ointment 0.05 %</i>	2	
<i>desoximetasone topical cream 0.05 %, 0.25 %</i>	2	
<i>desoximetasone topical gel 0.05 %</i>	2	
<i>desoximetasone topical ointment 0.05 %, 0.25 %</i>	2	
<i>diflorasone topical cream 0.05 %</i>	2	
<i>fludrocortisone oral tablet 0.1 mg</i>	2	
<i>fluocinolone topical cream 0.01 %, 0.025 %</i>	2	
<i>fluocinolone topical ointment 0.025 %</i>	2	
<i>fluocinolone topical solution 0.01 %</i>	2	
<i>fluocinonide topical cream 0.05 %</i>	1	
<i>fluocinonide topical gel 0.05 %</i>	2	
<i>fluocinonide topical ointment 0.05 %</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>fluocinonide topical solution 0.05 %</i>	2	
<i>fluocinonide-e topical cream 0.05 %</i>	1	
<i>fluocinonide-emollient topical cream 0.05 %</i>	1	
<i>halobetasol propionate topical cream 0.05 %</i>	2	
<i>halobetasol propionate topical ointment 0.05 %</i>	2	
<i>hydrocortisone butyrate topical cream 0.1 %</i>	2	
<i>hydrocortisone butyrate topical ointment 0.1 %</i>	2	
<i>hydrocortisone butyrate topical solution 0.1 %</i>	2	
<i>hydrocortisone butyr-emollient topical cream 0.1 %</i>	2	
<i>hydrocortisone oral tablet 10 mg</i>	2	
<i>hydrocortisone topical cream 1 %, 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	1	
<i>hydrocortisone topical ointment 1 %, 2.5 %</i>	1	
<i>hydrocortisone valerate topical cream 0.2 %</i>	2	
<i>hydrocortisone valerate topical ointment 0.2 %</i>	2	
<i>hydrocortisone-min oil-wht pet topical ointment 1 %</i>	1	
<i>mometasone topical cream 0.1 %</i>	2	
<i>mometasone topical ointment 0.1 %</i>	2	
<i>mometasone topical solution 0.1 %</i>	2	
<i>procto-pak topical cream with perineal applicator 1 %</i>	2	
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %</i>	2	
<i>triamcinolone acetonide topical lotion 0.025 %, 0.1 %</i>	2	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	2	
<i>triderm topical cream 0.1 %</i>	2	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Pituitary)		
<i>chorionic gonadotropin, human intramuscular recon soln 10,000 unit</i>	2	PA
<i>desmopressin injection solution 4 mcg/ml</i>	2	

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<i>desmopressin nasal aerosol, spray 10 mcg/spray (0.1 ml)</i>	2	
<i>desmopressin nasal solution 0.1 mg/ml (refrigerate)</i>	2	
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray (0.1 ml)</i>	2	
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	2	
EGRIFTA SUBCUTANEOUS RECON SOLN 1 MG, 2 MG	5	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML	4	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	5	PA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	5	PA
HUMATROPE INJECTION CARTRIDGE 12 MG (36 UNIT), 24 MG (72 UNIT), 6 MG (18 UNIT)	5	PA
HUMATROPE INJECTION RECON SOLN 5 (15 UNIT) MG	5	PA
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	5	PA
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	5	PA
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 30 MG/3 ML (10 MG/ML)	5	PA
NORDITROPIN NORDIFLEX SUBCUTANEOUS PEN INJECTOR 30 MG/3 ML (10 MG/ML)	5	PA

Drug Name	Drug Tier	Requirements/Limits
NUTROPIN AQ NUSPIN SUBCUTANEOUS PEN INJECTOR 10 MG/2 ML (5 MG/ML), 20 MG/2 ML (10 MG/ML), 5 MG/2 ML (2.5 MG/ML)	5	PA
NUTROPIN AQ SUBCUTANEOUS CARTRIDGE 20 MG/2 ML (10 MG/ML)	5	PA
OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML)	5	PA
OMNITROPE SUBCUTANEOUS CARTRIDGE 5 MG/1.5 ML (3.3 MG/ML)	4	PA
OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG	5	PA
SEROSTIM SUBCUTANEOUS RECON SOLN 4 MG, 5 MG, 6 MG	5	PA
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
Anabolic Steroids		
ANADROL-50 ORAL TABLET 50 MG	5	PA
<i>oxandrolone oral tablet 10 mg, 2.5 mg</i>	2	
Androgens		
ANDROGEL TRANSDERMAL GEL IN PACKET 1.62 % (20.25 MG/1.25 GRAM), 1.62 % (40.5 MG/2.5 GRAM)	4	ST
<i>androxy oral tablet 10 mg</i>	2	
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	4	
<i>methyltestosterone oral capsule 10 mg</i>	5	PA
TESTIM TRANSDERMAL GEL 50 MG/5 GRAM (1 %)	4	ST
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i>	2	
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i>	2	
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	2	
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)</i>	2	
Estrogens		
DIVIGEL TRANSDERMAL GEL IN PACKET 0.25 MG/0.25 GRAM (0.1 %), 0.5 MG/0.5 GRAM (0.1 %), 1 MG/GRAM (0.1 %)	4	

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Drug Name	Drug Tier	Requirements/Limits
DUAVEE ORAL TABLET 0.45-20 MG	3	
ESTRACE VAGINAL CREAM 0.01 % (0.1 MG/GRAM)	4	
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	1	
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	2	
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	2	
<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	2	
ESTRING VAGINAL RING 2 MG (7.5 MCG /24 HOUR)	4	
<i>estropipate oral tablet 0.75 mg, 1.5 mg, 3 mg</i>	2	PA
<i>marlissa oral tablet 0.15-0.03 mg</i>	2	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG	4	PA
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	3	
PREMARIN INJECTION RECON SOLN 25 MG	3	
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	3	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	3	
VAGIFEM VAGINAL TABLET 10 MCG	4	
<i>yuvafem vaginal tablet 10 mcg</i>	2	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Sex Hormones/ Modifiers)		
<i>alyacen 1/35 (28) oral tablet 1-35 mg-mcg</i>	2	
<i>amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	2	
<i>apri oral tablet 0.15-0.03 mg</i>	2	
<i>aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg</i>	2	
<i>aubra oral tablet 0.1-20 mg-mcg</i>	2	
<i>aviane oral tablet 0.1-20 mg-mcg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>balziva (28) oral tablet 0.4-35 mg-mcg</i>	2	
<i>bekyree (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	2	
<i>blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	2	
<i>blisovi fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	2	
<i>briellyn oral tablet 0.4-35 mg-mcg</i>	2	
<i>caziant (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	2	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/24 HR	3	
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	3	
<i>cryselles (28) oral tablet 0.3-30 mg-mcg</i>	2	
<i>cyclafem 1/35 (28) oral tablet 1-35 mg-mcg</i>	2	
<i>cyclafem 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	2	
<i>deblitane oral tablet 0.35 mg</i>	2	
<i>delyla (28) oral tablet 0.1-20 mg-mcg</i>	2	
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	2	
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.03 mg</i>	2	
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	2	
<i>emoquette oral tablet 0.15-0.03 mg</i>	2	
<i>enpresse oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	2	
<i>estradiol-norethindrone acet oral tablet 1-0.5 mg</i>	2	
<i>ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg</i>	2	
<i>falmina (28) oral tablet 0.1-20 mg-mcg</i>	2	
<i>femynor oral tablet 0.25-35 mg-mcg</i>	2	
<i>fyavolv oral tablet 1-5 mg-mcg</i>	2	
<i>gildagia oral tablet 0.4-35 mg-mcg</i>	2	
<i>gildess 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	2	

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<i>introvale oral tablets,dose pack,3 month 0.15 mg-30 mcg</i>	2	
<i>isibloom oral tablet 0.15-0.03 mg</i>	2	
<i>jinteli oral tablet 1-5 mg-mcg</i>	2	
<i>juleber oral tablet 0.15-0.03 mg</i>	2	
<i>junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	2	
<i>junel 1/20 (21) oral tablet 1-20 mg-mcg</i>	2	
<i>junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	2	
<i>junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	2	
<i>kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	2	
<i>kelnor 1/35 (28) oral tablet 1-35 mg-mcg</i>	2	
<i>kimidess (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	2	
<i>larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	2	
<i>larin 1/20 (21) oral tablet 1-20 mg-mcg</i>	2	
<i>larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	2	
<i>larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	2	
<i>larissia oral tablet 0.1-20 mg-mcg</i>	2	
<i>leena 28 oral tablet 0.5/1/0.5-35 mg-mcg</i>	2	
<i>lessina oral tablet 0.1-20 mg-mcg</i>	2	
<i>levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	2	
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg</i>	1	
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg</i>	2	
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	2	
<i>levora-28 oral tablet 0.15-0.03 mg</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>lopreeza oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	2	
<i>low-ogestrel (28) oral tablet 0.3-30 mg-mcg</i>	2	
<i>lutera (28) oral tablet 0.1-20 mg-mcg</i>	2	
<i>microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg</i>	2	
<i>microgestin 1/20 (21) oral tablet 1-20 mg-mcg</i>	2	
<i>microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	2	
<i>microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	2	
<i>mimvey lo oral tablet 0.5-0.1 mg</i>	2	
<i>mononessa (28) oral tablet 0.25-35 mg-mcg</i>	2	
<i>necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	2	
<i>necon 1/35 (28) oral tablet 1-35 mg-mcg</i>	2	
<i>necon 10/11 (28) oral tablet 0.5-35/1-35 mg-mcg/mg-mcg</i>	2	
<i>necon 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	2	
<i>nora-be oral tablet 0.35 mg</i>	2	
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1-5 mg-mcg</i>	2	
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg</i>	2	
<i>norlyroc oral tablet 0.35 mg</i>	2	
<i>nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg</i>	2	
<i>nortrel 1/35 (21) oral tablet 1-35 mg-mcg</i>	2	
<i>nortrel 1/35 (28) oral tablet 1-35 mg-mcg</i>	2	
<i>nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg- 35 mcg</i>	2	
NUVARING VAGINAL RING 0.12-0.015 MG/24 HR	3	
<i>ocella oral tablet 3-0.03 mg</i>	2	
<i>orsythia oral tablet 0.1-20 mg-mcg</i>	2	
<i>pimtreea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	2	
<i>pirmella oral tablet 1-35 mg-mcg</i>	2	
<i>portia oral tablet 0.15-0.03 mg</i>	2	

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PREFEST ORAL TABLET 1 MG (15)/1 MG-0.09 MG (15)	4	
PREMPHASE ORAL TABLET 0.625 MG (14)/0.625MG-5MG(14)	3	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	3	
<i>previfem oral tablet 0.25-35 mg-mcg</i>	2	
<i>quasense oral tablets,dose pack,3 month 0.15 mg-30 mcg</i>	2	
<i>reclipsen (28) oral tablet 0.15-0.03 mg</i>	2	
<i>setlakin oral tablets,dose pack,3 month 0.15 mg-30 mcg</i>	2	
<i>sharobel oral tablet 0.35 mg</i>	2	
<i>sprintec (28) oral tablet 0.25-35 mg-mcg</i>	2	
<i>sronyx oral tablet 0.1-20 mg-mcg</i>	2	
<i>tarina fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)</i>	2	
TRI FEMYNOR ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	2	
<i>tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)</i>	2	
<i>trinessa (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	2	
<i>tri-previfem (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	2	
<i>tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-35 mcg (28)</i>	2	
<i>trivora (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	2	
<i>velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg</i>	2	
<i>vienva oral tablet 0.1-20 mg-mcg</i>	2	
<i>vyfemla (28) oral tablet 0.4-35 mg-mcg</i>	2	
<i>xulane transdermal patch weekly 150-35 mcg/24 hr</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>yuvafem vaginal tablet 10 mcg</i>	2	
<i>zarah oral tablet 3-0.03 mg</i>	2	
<i>zenchent (28) oral tablet 0.4-35 mg-mcg</i>	2	
<i>zovia 1/35e (28) oral tablet 1-35 mg-mcg</i>	2	
<i>zovia 1/50e (28) oral tablet 1-50 mg-mcg</i>	2	
Progestins		
<i>camila oral tablet 0.35 mg</i>	2	
DEPO-PROVERA INTRAMUSCULAR SOLUTION 400 MG/ML	4	PA
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	4	
<i>errin oral tablet 0.35 mg</i>	2	
<i>jolivette oral tablet 0.35 mg</i>	2	
<i>lyza oral tablet 0.35 mg</i>	2	
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	2	
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	1	
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 625 mg/5 ml</i>	2	PA
<i>megestrol oral tablet 20 mg, 40 mg</i>	2	PA
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	2	
<i>norethindrone acetate oral tablet 5 mg</i>	2	
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	2	
Selective Estrogen Receptor Modifying Agents		
<i>raloxifene oral tablet 60 mg</i>	2	
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)		
Hormonal Agents, Stimulant/ Replacement/ Modifying (Thyroid)		
<i>levothyroxine intravenous recon soln 100 mcg</i>	2	
<i>levothyroxine 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</i>	1	
<i>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</i>	1	

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<i>liothyronine intravenous solution 10 mcg/ml</i>	2	
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i>	2	
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	4	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	4	
<i>unithroid oral tablet 137 mcg</i>	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/ Modifiers)		
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/ Modifiers)		
<i>norlyda oral tablet 0.35 mg</i>	2	
Hormonal Agents, Suppressant (Adrenal)		
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN ORAL TABLET 500 MG	3	
Hormonal Agents, Suppressant (Parathyroid)		
Hormonal Agents, Suppressant (Parathyroid)		
SENSIPAR ORAL TABLET 30 MG	3	QL (60 EA per 30 days)
SENSIPAR ORAL TABLET 60 MG	5	QL (60 EA per 30 days)
SENSIPAR ORAL TABLET 90 MG	5	QL (120 EA per 30 days)
Hormonal Agents, Suppressant (Pituitary)		
Hormonal Agents, Suppressant (Pituitary)		
<i>cabergoline oral tablet 0.5 mg</i>	2	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	4	PA
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	4	PA
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	4	PA
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	4	PA

Drug Name	Drug Tier	Requirements/Limits
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	5	PA
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	4	PA
FIRMAGON SUBCUTANEOUS RECON SOLN 120 MG	5	PA
FIRMAGON SUBCUTANEOUS RECON SOLN 80 MG	4	PA
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	2	
<i>leuprolide subcutaneous solution 1 mg/0.2 ml</i>	2	
LUPRON DEPOT (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG, 22.5 MG	5	PA
LUPRON DEPOT (4 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	5	PA
LUPRON DEPOT (6 MONTH) INTRAMUSCULAR SYRINGE KIT 45 MG	5	PA
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	4	PA
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT 11.25 MG	4	PA
LUPRON DEPOT-PED (3 MONTH) INTRAMUSCULAR SYRINGE KIT 30 MG	5	PA
LUPRON DEPOT-PED INTRAMUSCULAR KIT 11.25 MG, 15 MG	5	PA
LUPRON DEPOT-PED INTRAMUSCULAR KIT 7.5 MG (PED)	4	PA
<i>octreotide acetate injection solution 1,000 mcg/ml</i>	5	PA
<i>octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml</i>	4	PA
<i>octreotide acetate injection solution 200 mcg/ml</i>	4	PA
<i>octreotide acetate injection solution 500 mcg/ml</i>	5	PA
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG	5	PA
SANDOSTATIN LAR DEPOT INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 10 MG, 20 MG, 30 MG	5	PA

Drug Name	Drug Tier	Requirements/Limits
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	5	PA
SOMATULINE DEPOT SUBCUTANEOUS SYRINGE 120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML	5	PA
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	5	PA
SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML	5	PA
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	5	PA
TRELSTAR INTRAMUSCULAR SYRINGE 11.25 MG/2 ML, 3.75 MG/2 ML	4	PA
TRELSTAR INTRAMUSCULAR SYRINGE 22.5 MG/2 ML	5	PA
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
<i>methimazole oral tablet 10 mg, 5 mg</i>	2	
<i>propylthiouracil oral tablet 50 mg</i>	2	
Horomonal Agents , Stimulant/ Replacement/ Modifying (Sex Hormones/Modifiers)		
Estrogens		
<i>lillow oral tablet 0.15-0.03 mg</i>	2	
Immunological Agents		
Angioedema (Hae) Agents		
CINRYZE INTRAVENOUS RECON SOLN 500 UNIT (5 ML)	5	PA
FIRAZYR SUBCUTANEOUS SYRINGE 30 MG/3 ML	5	PA
Immune Suppressants		
ASTAGRAF XL ORAL CAPSULE, EXTENDED RELEASE 24HR 0.5 MG, 1 MG, 5 MG	4	B/D
ATGAM INTRAVENOUS SOLUTION 50 MG/ML	5	B/D

Drug Name	Drug Tier	Requirements/Limits
AZASAN ORAL TABLET 100 MG, 75 MG	4	PA
<i>azathioprine oral tablet 50 mg</i>	2	B/D
<i>azathioprine sodium injection recon soln 100 mg</i>	2	B/D
BENLYSTA INTRAVENOUS RECON SOLN 120 MG, 400 MG	5	PA
CELLCEPT INTRAVENOUS INTRAVENOUS RECON SOLN 500 MG	4	PA
CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS)	5	PA
CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA
CIMZIA SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2)	5	PA
<i>cyclosporine intravenous solution 250 mg/5 ml</i>	2	B/D
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	2	B/D
<i>cyclosporine modified oral solution 100 mg/ml</i>	2	B/D
<i>cyclosporine oral capsule 100 mg, 25 mg</i>	2	B/D
ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	5	PA
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5ML (0.51), 50 MG/ML (0.98 ML)	5	PA
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (0.98 ML)	5	PA
ENVARBUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	3	B/D
<i>gengraf oral capsule 100 mg, 25 mg, 50 mg</i>	2	B/D
<i>gengraf oral solution 100 mg/ml</i>	2	B/D
HUMIRA PEDIATRIC CROHN'S START SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML, 40 MG/0.8 ML (6 PACK)	5	PA
HUMIRA PEN CROHN'S-UC-HS START SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	5	PA
HUMIRA PEN PSORIASIS-UVEITIS SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	5	PA

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HUMIRA PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.8 ML	5	PA
HUMIRA SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.8 ML	5	PA
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	5	PA
KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	5	PA
<i>mercaptopurine oral tablet 50 mg</i>	2	
<i>methotrexate sodium (pf) injection recon soln 1 gram</i>	2	
<i>methotrexate sodium (pf) injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium injection solution 25 mg/ml</i>	2	
<i>methotrexate sodium oral tablet 2.5 mg</i>	1	
<i>mycophenolate mofetil hcl intravenous recon soln 500 mg</i>	2	PA
<i>mycophenolate mofetil oral capsule 250 mg</i>	2	B/D
<i>mycophenolate mofetil oral suspension for reconstitution 200 mg/ml</i>	2	B/D
<i>mycophenolate mofetil oral tablet 500 mg</i>	2	B/D
<i>mycophenolate sodium oral tablet, delayed release (dr/ec) 180 mg, 360 mg</i>	2	B/D
NULOJIX INTRAVENOUS RECON SOLN 250 MG	5	B/D
ORENCIA (WITH MALTOSE) INTRAVENOUS RECON SOLN 250 MG	5	PA
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	5	PA
ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML, 50 MG/0.4 ML, 87.5 MG/0.7 ML	5	PA
OTEZLA ORAL TABLET 30 MG	5	PA
OTEZLA STARTER ORAL TABLETS, DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	5	PA

Drug Name	Drug Tier	Requirements/Limits
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG(19)	5	PA
PROGRAF INTRAVENOUS SOLUTION 5 MG/ML	4	PA
RAPAMUNE ORAL SOLUTION 1 MG/ML	4	B/D
REMICADE INTRAVENOUS RECON SOLN 100 MG	5	PA
SANDIMMUNE ORAL SOLUTION 100 MG/ML	3	B/D
SIMPONI ARIA INTRAVENOUS SOLUTION 12.5 MG/ML	5	PA
SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML	5	PA
SIMPONI SUBCUTANEOUS SYRINGE 50 MG/0.5 ML	5	PA
SIMULECT INTRAVENOUS RECON SOLN 10 MG, 20 MG	5	PA
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	2	B/D
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	2	B/D
TORISEL INTRAVENOUS RECON SOLN 30 MG/3 ML (10 MG/ML) (FIRST)	5	PA
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG	4	PA
XATMEP ORAL SOLUTION 2.5 MG/ML	4	PA
ZORTRESS ORAL TABLET 0.25 MG	4	B/D
ZORTRESS ORAL TABLET 0.5 MG, 0.75 MG	5	B/D
Immunizing Agents, Passive		
BIVIGAM INTRAVENOUS SOLUTION 10 %	5	B/D
CARIMUNE NF NANOFILTERED INTRAVENOUS RECON SOLN 12 GRAM, 6 GRAM	5	B/D
<i>carimune nf nanofiltered intravenous recon soln 3 gram</i>	2	
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 %	5	B/D
GAMASTAN S/D INTRAMUSCULAR SOLUTION 15-18 % RANGE	3	B/D

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Drug Name	Drug Tier	Requirements/Limits
GAMASTAN S/D INTRAMUSCULAR SOLUTION 15-18 % RANGE (10 ML), 15-18 % RANGE (2 ML)	3	B/D
GAMMAGARD LIQUID INJECTION SOLUTION 10 %	5	B/D
GAMMAGARD S-D (IGA < 1 MCG/ML) INTRAVENOUS RECON SOLN 10 GRAM, 5 GRAM	5	B/D
GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	4	B/D
GAMMAPLEX (WITH SORBITOL) INTRAVENOUS SOLUTION 5 %	5	B/D
GAMMAPLEX INTRAVENOUS SOLUTION 10 %	5	B/D
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %)	4	B/D
HYPERRAB S/D (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML	3	
HYPERRAB S/D (PF) INTRAMUSCULAR SOLUTION 150 UNIT/ML (10 ML)	3	
PRIVIGEN INTRAVENOUS SOLUTION 10 %	5	B/D
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5 ML	4	PA
THYMOGLOBULIN INTRAVENOUS RECON SOLN 25 MG	5	B/D
Immunomodulators		
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML), 80 MG/4 ML (20 MG/ML)	5	PA
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	5	PA

Drug Name	Drug Tier	Requirements/Limits
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	5	PA
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	5	PA
ILARIS (PF) SUBCUTANEOUS RECON SOLN 180 MG/1.2 ML (150 MG/ML)	5	PA
ILARIS (PF) SUBCUTANEOUS SOLUTION 150 MG/ML	5	PA
<i>leflunomide oral tablet 10 mg, 20 mg</i>	2	
SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML	5	PA
Vaccines		
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	3	
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5- 3-5 MCG)-5LF/0.5 ML	3	
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	3	
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG	3	
BEXSERO INTRAMUSCULAR SYRINGE 50- 50-50-25 MCG/0.5 ML	3	
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	3	
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	3	
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF- MCG-LF/0.5ML	3	
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	3	B/D
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	3	B/D
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SUSPENSION 10 MCG/0.5 ML	3	B/D
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	3	B/D

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GARDASIL (PF) INTRAMUSCULAR SUSPENSION 20-40-40-20 MCG/0.5 ML	3	
GARDASIL (PF) INTRAMUSCULAR SYRINGE 20-40-40-20 MCG/0.5 ML	3	
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	3	
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	3	
HAVRIX (PF) INTRAMUSCULAR SUSPENSION 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	3	
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	3	
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	3	
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	3	
INFANRIX (DTAP) (PF) INTRAMUSCULAR SUSPENSION 25-58-10 LF-MCG-LF/0.5ML	3	
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	3	
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	3	
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	3	
KINRIX (PF) INTRAMUSCULAR SUSPENSION 25 LF-58 MCG-10 LF/0.5 ML	3	
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	3	
MENACTRA (PF) INTRAMUSCULAR SOLUTION 4 MCG/0.5 ML	3	
MENOMUNE - A/C/Y/W-135 (PF) SUBCUTANEOUS RECON SOLN 50 MCG	3	
MENOMUNE - A/C/Y/W-135 SUBCUTANEOUS RECON SOLN 50 MCG	3	

Drug Name	Drug Tier	Requirements/Limits
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	3	
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	3	
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	3	
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	3	
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	3	
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	3	
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	3	
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	3	B/D
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	3	B/D
ROTARIX ORAL SUSPENSION FOR RECONSTITUTION 10EXP6 CCID50/ML	3	
ROTATEQ VACCINE ORAL SOLUTION 2 ML	3	
STAMARIL (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,000 UNIT/0.5 ML	3	
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	3	
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	3	
<i>tetanus,diphtheria tox ped(pf) intramuscular suspension 5-25 lf unit/0.5 ml</i>	2	
<i>tetanus-diphtheria toxoids-td intramuscular suspension 2-2 lf unit/0.5 ml</i>	2	
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	3	
TWINRIX (PF) INTRAMUSCULAR SUSPENSION 720 ELISA UNIT -20 MCG/ML	3	B/D

Drug Name	Drug Tier	Requirements/Limits
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT -20 MCG/ML	3	B/D
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5 ML	3	
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	3	
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	3	
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	3	
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	3	
VARIZIG INTRAMUSCULAR RECON SOLN 125 UNIT	1	
VARIZIG INTRAMUSCULAR SOLUTION 125 UNIT/1.2 ML	3	
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	3	
ZOSTAVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 19,400 UNIT/0.65 ML	3	
Inflammatory Bowel Disease Agents		
Aminosalicylates		
<i>balsalazide oral capsule 750 mg</i>	2	
CANASA RECTAL SUPPOSITORY 1,000 MG	3	
DELZICOL ORAL CAPSULE (WITH DEL REL TABLETS) 400 MG	3	
DELZICOL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 400 MG	3	
DIPENTUM ORAL CAPSULE 250 MG	4	
LIALDA ORAL TABLET,DELAYED RELEASE (DR/EC) 1.2 GRAM	3	
<i>mesalamine oral tablet, delayed release (dr/ec) 1.2 gram</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mesalamine rectal enema 4 gram/60 ml</i>	2	
<i>mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml</i>	2	
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG, 500 MG	3	
Glucocorticoids		
<i>colocort rectal enema 100 mg/60 ml</i>	2	
<i>hydrocortisone rectal enema 100 mg/60 ml</i>	2	
<i>hydrocortisone topical cream with perineal applicator 1 %</i>	1	
<i>hydrocortisone topical cream with perineal applicator 2.5 %</i>	1	
<i>prednisone intensol oral concentrate 5 mg/ml</i>	2	
<i>procto-med hc topical cream with perineal applicator 2.5 %</i>	1	
<i>proctosol hc rectal cream with applicator 2.5 %</i>	1	
<i>proctosol hc topical cream with perineal applicator 2.5 %</i>	1	
Sulfonamides		
<i>sulfasalazine oral tablet 500 mg</i>	2	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i>	2	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate oral tablet 10 mg, 35 mg, 40 mg, 5 mg, 70 mg</i>	1	
<i>calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation</i>	2	
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	2	
<i>calcitriol oral solution 1 mcg/ml</i>	2	
<i>doxercalciferol intravenous solution 4 mcg/2 ml</i>	2	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	2	
<i>etidronate disodium oral tablet 200 mg, 400 mg</i>	2	
FORTEO SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE - 600 MCG/2.4 ML	5	PA

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<i>ibandronate intravenous solution 3 mg/3 ml</i>	2	PA
<i>ibandronate intravenous syringe 3 mg/3 ml</i>	2	PA
MIACALCIN INJECTION SOLUTION 200 UNIT/ML	4	B/D
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG/DOSE, 25 MCG/DOSE, 50 MCG/DOSE, 75 MCG/DOSE	5	PA
<i>pamidronate intravenous recon soln 30 mg, 90 mg</i>	2	
<i>pamidronate intravenous solution 30 mg/10 ml (3 mg/ml), 60 mg/10 ml (6 mg/ml), 90 mg/10 ml (9 mg/ml)</i>	2	
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	2	
PROLIA SUBCUTANEOUS SYRINGE 60 MG/ML	4	PA
<i>risedronate oral tablet 150 mg, 30 mg, 35 mg, 35 mg (12 pack), 35 mg (4 pack), 5 mg</i>	2	
TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML)	5	PA
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	5	PA
<i>zoledronic acid intravenous recon soln 4 mg</i>	2	PA
<i>zoledronic acid intravenous solution 4 mg/5 ml</i>	2	PA
<i>zoledronic acid-mannitol-water intravenous piggyback 5 mg/100 ml</i>	2	PA
ZOMETA INTRAVENOUS PIGGYBACK 4 MG/100 ML	5	PA
Ophthalmic Agents		
Ophthalmic Agents		
<i>ak-poly-bac ophthalmic (eye) ointment 500-10,000 unit/gram</i>	2	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	2	
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	2	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i>	1	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	1	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	2	
<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml</i>	2	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	1	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	2	
Ophthalmic Agents, Other		
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	5	
<i>naphazoline ophthalmic (eye) drops 0.1 %</i>	2	
<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	2	
RESTASIS MULTIDOSE OPHTHALMIC (EYE) DROPS 0.05 %	3	QL (11 ML per 30 days)
RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 %	3	QL (60 EA per 30 days)
XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 %	3	QL (60 EA per 30 days)
Ophthalmic Anti-Allergy Agents		
<i>azelastine ophthalmic (eye) drops 0.05 %</i>	2	
<i>cromolyn ophthalmic (eye) drops 4 %</i>	2	
<i>epinastine ophthalmic (eye) drops 0.05 %</i>	2	
<i>olopatadine ophthalmic (eye) drops 0.1 %</i>	2	ST
Ophthalmic Antiglaucoma Agents		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	3	
AZOPT OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %	3	ST
<i>brimonidine ophthalmic (eye) drops 0.15 %</i>	2	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>carteolol ophthalmic (eye) drops 1 %</i>	2	
COMBIGAN OPHTHALMIC (EYE) DROPS 0.2-0.5 %	3	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	2	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i>	2	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	2	
<i>metipranolol ophthalmic (eye) drops 0.3 %</i>	2	
PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 %	3	
SIMBRINZA OPHTHALMIC (EYE) DROPS,SUSPENSION 1-0.2 %	3	
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	2	
TIMOPTIC OCUDOSE (PF) OPHTHALMIC (EYE) DROPPERETTE 0.25 %, 0.5 %	4	
TIMOPTIC OPHTHALMIC (EYE) DROPS 0.25 %, 0.5 %	4	
Ophthalmic Anti-Inflammatories		
ALAWAY 0.025% EYE DROPS 0.025 % (0.035 %)	1	
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	2	
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	2	
DUREZOL OPHTHALMIC (EYE) DROPS 0.05 %	3	
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i>	2	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	2	
FML FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %	4	

Drug Name	Drug Tier	Requirements/Limits
<i>ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %</i>	2	
<i>ketotifen fum 0.025% eye drops (otc) 0.025 % (0.035 %)</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	2	
<i>sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	2	
<i>zaditor 0.025% (0.035%) drops 12 hour (otc) 0.025 % (0.035 %)</i>	1	
Ophthalmic Prostaglandin And Prostamide Analogs		
<i>latanoprost ophthalmic (eye) drops 0.005 %</i>	1	
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	3	
TRAVATAN Z OPHTHALMIC (EYE) DROPS 0.004 %	3	
Otic Agents		
Otic Agents		
CIPRODEX OTIC (EAR) DROPS,SUSPENSION 0.3-0.1 %	3	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	2	
<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	2	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%</i>	2	
Respiratory Tract Agents		
Respiratory Tract Agents, Other		
<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	2	B/D
ARALAST NP INTRAVENOUS RECON SOLN 1,000 MG, 500 MG	4	PA
GLASSIA INTRAVENOUS SOLUTION 1 GRAM/50 ML (2 %)	4	PA
LUMIZYME INTRAVENOUS RECON SOLN 50 MG	5	PA
PROLASTIN-C INTRAVENOUS RECON SOLN 1,000 MG	4	PA

Drug Name	Drug Tier	Requirements/Limits
ZEMAIRA INTRAVENOUS RECON SOLN 1,000 MG	4	PA
Respiratory Tract/ Pulmonary Agents		
Antihistamines		
<i>azelastine nasal aerosol,spray 137 mcg (0.1 %)</i>	2	
<i>azelastine nasal spray,non-aerosol 0.15 % (205.5 mcg)</i>	2	
<i>clemastine oral tablet 2.68 mg</i>	2	PA
<i>cyproheptadine oral syrup 2 mg/5 ml</i>	2	PA
<i>cyproheptadine oral tablet 4 mg</i>	2	PA
<i>levocetirizine oral solution 2.5 mg/5 ml</i>	2	
<i>levocetirizine oral tablet 5 mg</i>	2	
Anti-Inflammatories, Inhaled Corticosteroids		
ADVAIR DISKUS INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	3	
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	3	
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i>	2	B/D
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION	3	
FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION, 220 MCG/ACTUATION, 44 MCG/ACTUATION	3	
<i>flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)</i>	2	
<i>fluticasone nasal spray,suspension 50 mcg/actuation</i>	2	
<i>fluticasone-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>mometasone nasal spray,non-aerosol 50 mcg/actuation</i>	2	
NASONEX NASAL SPRAY,NON-AEROSOL 50 MCG/ACTUATION	4	
QVAR INHALATION AEROSOL 40 MCG/ACTUATION, 80 MCG/ACTUATION	3	
Antileukotrienes		
<i>montelukast oral granules in packet 4 mg</i>	1	
<i>montelukast oral tablet 10 mg</i>	1	
<i>montelukast oral tablet,chewable 4 mg, 5 mg</i>	1	
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	2	PA
<i>zileuton oral tablet, er multiphase 12 hr 600 mg</i>	2	PA
ZYFLO CR ORAL TABLET, ER MULTIPHASE 12 HR 600 MG	5	PA
ZYFLO ORAL TABLET 600 MG	5	PA
Bronchodilators, Anticholinergic		
<i>ipratropium bromide inhalation solution 0.02 %</i>	2	B/D
<i>ipratropium bromide nasal spray,non-aerosol 0.03 %, 0.06 %</i>	2	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	3	
SPIRIVA WITH HANDIHALER INHALATION CAPSULE, W/INHALATION DEVICE 18 MCG	3	
TUDORZA PRESSAIR INHALATION AEROSOL POWDR BREATH ACTIVATED 400 MCG/ACTUATION, 400 MCG/ACTUATION (30 ACTUAT)	3	
Bronchodilators, Sympathomimetic		
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1	B/D
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	1	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	1	
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	2	
<i>aprepitant oral capsule 125 mg</i>	2	B/D

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<i>epinephrine injection auto-injector 0.15 mg/0.15 ml, 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	2	QL (2 EA per 30 days)
EPIPEN 2-PAK INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	4	QL (2 EA per 30 days)
EPIPEN INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	4	QL (2 EA per 30 days)
EPIPEN JR 2-PAK INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML	4	QL (2 EA per 30 days)
EPIPEN JR INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML	4	QL (2 EA per 30 days)
<i>metaproterenol oral syrup 10 mg/5 ml</i>	2	
<i>metaproterenol oral tablet 10 mg, 20 mg</i>	2	
PROVENTIL HFA INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION	3	
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	3	
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	2	
<i>terbutaline subcutaneous solution 1 mg/ml</i>	2	
VENTOLIN HFA INHALATION HFA AEROSOL INHALER 90 MCG/ACTUATION	3	
Cystic Fibrosis Agents		
BETHKIS INHALATION SOLUTION FOR NEBULIZATION 300 MG/4 ML	5	PA; QL (224 ML per 28 days)
KALYDECO ORAL GRANULES IN PACKET 50 MG, 75 MG	5	PA
KALYDECO ORAL TABLET 150 MG	5	PA
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	5	PA
PULMOZYME INHALATION SOLUTION 1 MG/ML	5	PA
Mast Cell Stabilizers		
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	2	B/D
Phosphodiesterase Inhibitors, Airways Disease		

Drug Name	Drug Tier	Requirements/Limits
<i>aminophylline intravenous solution 250 mg/10 ml, 500 mg/20 ml</i>	2	
DALIRESP ORAL TABLET 500 MCG	4	
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	4	
<i>theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg</i>	2	
<i>theophylline oral tablet extended release 24 hr 400 mg, 600 mg</i>	2	
<i>theophylline oral tablet extended release 400 mg, 600 mg</i>	2	
Pulmonary Antihypertensives		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	5	PA
LETAIRIS ORAL TABLET 10 MG, 5 MG	5	PA
REMODULIN INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML	5	PA
REVATIO ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML	5	PA
<i>sildenafil intravenous solution 10 mg/12.5 ml</i>	5	PA
<i>sildenafil oral tablet 20 mg</i>	2	PA
TRACLEER ORAL TABLET 125 MG, 62.5 MG	5	PA; LA
VENTAVIS INHALATION SOLUTION FOR NEBULIZATION 10 MCG/ML, 20 MCG/ML	5	PA
Respiratory Tract/ Pulmonary Agents		
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	3	
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION	3	
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	3	
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	4	ST
ESBRIET ORAL CAPSULE 267 MG	5	PA
ESBRIET ORAL TABLET 267 MG, 801 MG	5	PA
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	3	

Drug Name	Drug Tier	Requirements/Limits
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	2	B/D
<i>promethazine vc oral syrup 6.25-5 mg/5 ml</i>	2	PA
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	2	PA
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	3	
SYMBICORT INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	3	
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	5	PA
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>carisoprodol oral tablet 250 mg, 350 mg</i>	2	PA
<i>chlorzoxazone oral tablet 500 mg</i>	2	PA
<i>comfort pac-cyclobenzaprine kit 10 mg</i>	2	PA
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	2	PA
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	2	PA
<i>orphenadrine citrate oral tablet extended release 100 mg</i>	2	PA
Sleep Disorder Agents		
Gaba Receptor Modulators		
<i>zaleplon oral capsule 10 mg, 5 mg</i>	2	QL (90 EA per 365 days)
<i>zolpidem oral tablet 10 mg, 5 mg</i>	2	QL (90 EA per 365 days)
Sleep Disorders, Other		
HETLIOZ ORAL CAPSULE 20 MG	5	PA
MODAFINIL ORAL TABLET 100 MG, 200 MG	3	PA
ROZEREM ORAL TABLET 8 MG	4	QL (30 EA per 30 days)
XYREM ORAL SOLUTION 500 MG/ML	4	LA
Therapeutic Nutrients/ Minerals/ Electrolytes		
Electrolyte/ Mineral Modifiers		

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN 7 % WITH ELECTROLYTES INTRAVENOUS PARENTERAL SOLUTION 7 %	4	B/D
AMINOSYN-RF 5.2 % INTRAVENOUS PARENTERAL SOLUTION 5.2 %	4	B/D
EXJADE ORAL TABLET, DISPERSIBLE 125 MG, 250 MG, 500 MG	5	PA
FERRIPROX ORAL TABLET 500 MG	5	PA
<i>kionex (with sorbitol) oral suspension 15-19.3 gram/60 ml</i>	2	
<i>kionex oral powder</i>	2	
SAMSCA ORAL TABLET 15 MG, 30 MG	5	
<i>sodium polystyrene (sorb free) oral suspension 15 gram/60 ml</i>	2	
<i>sodium polystyrene sulfonate oral powder</i>	2	
<i>sodium polystyrene sulfonate oral suspension 15 gram/60 ml</i>	2	
<i>sodium polystyrene sulfonate rectal enema 30 gram/120 ml, 50 gram/200 ml</i>	2	
<i>sps (with sorbitol) oral suspension 15-20 gram/60 ml</i>	2	
<i>sps (with sorbitol) rectal enema 30-40 gram/120 ml</i>	2	
SYPRINE ORAL CAPSULE 250 MG	4	PA
Electrolyte/ Mineral Replacement		
CARBAGLU ORAL TABLET, DISPERSIBLE 200 MG	5	PA
FLUORIDE (SODIUM) ORAL TABLET 1 MG (2.2 MG SOD. FLUORIDE)	4	
<i>klor-con 10 oral tablet extended release 10 meq</i>	2	
<i>klor-con 8 oral tablet extended release 8 meq</i>	2	
<i>klor-con m10 oral tablet,er particles/crystals 10 meq</i>	2	
<i>klor-con m15 oral tablet,er particles/crystals 15 meq</i>	2	
<i>klor-con m20 oral tablet,er particles/crystals 20 meq</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>klor-con sprinkle oral capsule, extended release 10 meq, 8 meq</i>	2	
<i>k-sol oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	2	
<i>magnesium sulfate injection solution 4 meq/ml (50 %)</i>	2	
<i>normosol-r intravenous parenteral solution</i>	2	
<i>normosol-r ph 7.4 intravenous parenteral solution</i>	2	
<i>potassium chloride intravenous piggyback 20 meq/50 ml, 40 meq/100 ml</i>	2	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	2	
<i>potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml</i>	2	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	2	
<i>potassium chloride oral tablet, er particles/crystals 10 meq, 20 meq</i>	2	
<i>sodium chlor 0.9% bacteriostat injection solution 0.9 %</i>	2	
<i>sodium chloride 0.9 % injection solution 0.9 %</i>	2	
<i>sodium chloride 0.9 % intravenous parenteral solution 0.9 %</i>	2	
<i>sodium chloride 0.9 % intravenous piggyback 0.9 %</i>	2	
<i>sodium chloride 3 % intravenous parenteral solution 3 %</i>	2	
<i>sodium chloride intravenous parenteral solution 2.5 meq/ml</i>	2	B/D
<i>sodium chloride irrigation solution 0.9 %</i>	2	
Therapeutic Nutrients/ Minerals/ Electrolytes		
<i>amino acids 15 % intravenous parenteral solution 15 %</i>	2	B/D
<i>aminosyn 8.5 %-electrolytes intravenous parenteral solution 8.5 %</i>	2	B/D

Drug Name	Drug Tier	Requirements/Limits
AMINOSYN II 10 % INTRAVENOUS PARENTERAL SOLUTION 10 %	4	B/D
AMINOSYN II 15 % INTRAVENOUS PARENTERAL SOLUTION 15 %	4	B/D
AMINOSYN II 8.5 % INTRAVENOUS PARENTERAL SOLUTION 8.5 %	4	B/D
<i>aminosyn ii 8.5 %-electrolytes intravenous parenteral solution 8.5 %</i>	2	B/D
AMINOSYN M 3.5 % INTRAVENOUS PARENTERAL SOLUTION 3.5 %	4	B/D
AMINOSYN-HBC 7% INTRAVENOUS PARENTERAL SOLUTION 7 %	4	B/D
AMINOSYN-PF 10 % INTRAVENOUS PARENTERAL SOLUTION 10 %	4	B/D
AMINOSYN-PF 7 % (SULFITE-FREE) INTRAVENOUS PARENTERAL SOLUTION 7 %	4	B/D
<i>climix 4.25%/d10w sulf free intravenous parenteral solution 4.25 %</i>	2	B/D
<i>climix 4.25%-d20w sulf-free intravenous parenteral solution 4.25 %</i>	2	B/D
<i>climix 4.25%-d25w sulf-free intravenous parenteral solution 4.25 %</i>	2	B/D
<i>clinsol sf 15 % intravenous parenteral solution 15 %</i>	2	B/D
<i>d10 %-0.45 % sodium chloride intravenous parenteral solution</i>	2	
<i>d2.5 %-0.45 % sodium chloride intravenous parenteral solution</i>	2	
<i>d5 % and 0.9 % sodium chloride intravenous parenteral solution</i>	2	
<i>d5 %-0.45 % sodium chloride intravenous parenteral solution</i>	2	
<i>dextrose 10 % and 0.2 % nacl intravenous parenteral solution</i>	2	
<i>dextrose 10 % in water (d10w) intravenous parenteral solution 10 %</i>	2	
<i>dextrose 5 % in water (d5w) intravenous parenteral solution</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>dextrose 5 % in water (d5w) intravenous piggyback 5 %</i>	2	
<i>dextrose 5 %-lactated ringers intravenous parenteral solution</i>	2	
<i>dextrose 5%-0.2 % sod chloride intravenous parenteral solution</i>	2	
<i>dextrose 5%-0.3 % sod.chloride intravenous parenteral solution</i>	2	
<i>intralipid intravenous emulsion 20 %</i>	2	B/D
<i>lactated ringers intravenous parenteral solution</i>	2	
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	2	
<i>levocarnitine oral tablet 330 mg</i>	2	
<i>potassium chlorid-d5-0.45%nacl intravenous parenteral solution 20 meq/l</i>	2	
<i>potassium chloride in lr-d5 intravenous parenteral solution 40 meq/l</i>	2	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	4	
<i>water for irrigation, sterile irrigation solution</i>	2	

OTC Drugs

Drug Name	Drug Tier	Requirements/Limits
ALAWAY OPHTHALMIC (EYE) DROPS 0.025 % (0.035 %)	1	
<i>ketotifen fumarate ophthalmic (eye) drops 0.025 % (0.035 %)</i>	1	
ZADITOR OPHTHALMIC (EYE) DROPS 0.025 % (0.035 %)	1	

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