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Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) Lista de medicamentos cubiertos de 2019 (Formulario)

LEA ESTA INFORMACIÓN: ESTE DOCUMENTO CONTIENE INFORMACIÓN SOBRE LOS MEDICAMENTOS QUE CUBRIMOS EN ESTE PLAN.

Este formulario se actualizó el 1/23/2019.

Servicios para Afiliados: 1-855-878-1784 (TTY 711)
de lunes a viernes de 8 a. m. a 8 p. m.
www.myamerigroup.com/TXmmp

H8786_19_36642_T_003_SP CMS Approved 09/13/2018
Ident. del formulario: TX_MMP_19259_v7_1902_1 Versión: v7
Emitido 1/23/2019

Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan)

Lista de medicamentos cubiertos de 2019 (Formulario)

Introducción

Este documento se denomina la *Lista de Medicamentos Cubiertos* (también conocida como la Lista de Medicamentos). Le indica qué medicamentos recetados y medicamentos y artículos de venta libre están cubiertos por Amerigroup STAR+PLUS MMP. La Lista de Medicamentos también le indica si hay alguna regla o restricción especial para algún medicamento cubierto por Amerigroup STAR+PLUS MMP. Los términos clave y sus definiciones aparecen en el último capítulo del *Manual para Miembros*.

Índice

A. Exenciones de responsabilidad

Esta es una lista de los medicamentos que los miembros pueden obtener en Amerigroup STAR+PLUS MMP.

- Amerigroup STAR+PLUS MMP es un plan de salud que tiene contratos con el Programa Medicare y el Programa Medicaid para brindar a las personas inscritas los beneficios de ambos programas.
- Puede revisar siempre la Lista de Medicamentos Cubiertos actualizada de Amerigroup STAR+PLUS MMPen línea en www.myamerigroup.com/TXmmp o llamando al 1-855-878-1784 (TTY 711) de lunes a viernes de 8 a. m. a 8 p. m.
- Es posible que se apliquen limitaciones, copagos y restricciones. Para obtener más información, llame a Servicio a Miembros de Amerigroup STAR+PLUS MMP o lea el Manual para Miembros de Amerigroup STAR+PLUS MMP.
- ATENCIÓN: Si habla español, le ofrecemos servicios de asistencia de idiomas sin cargo. Llame al 1-855-878-1784 (TTY 711), de lunes a viernes, de 8 a.m. a 8 p.m., hora local. La llamada no tiene costo.
- Puede obtener este documento en otros formatos, como letra grande, braille o audio, de forma gratuita. Llame al 1-855-878-1784 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m.. La llamada es gratuita.
- Puede hacer una solicitud permanente para obtener esta y cualquier otra información en el futuro de forma gratuita en otros idiomas y formatos. Llame al 1-855-878-1784 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m.. La llamada es gratuita.

B. Preguntas frecuentes

Aquí encontrará las respuestas a las preguntas que pueda tener sobre esta Lista de *Medicamentos Cubiertos*. Puede leer todas las preguntas frecuentes para aprender más o buscar una pregunta y respuesta.

B1. ¿Qué medicamentos recetados se encuentran en la *Lista de Medicamentos Cubiertos*? (A la *Lista de Medicamentos Cubiertos* la llamamos "Lista de Medicamentos" para abreviar).

Los medicamentos en la *Lista de Medicamentos Cubiertos* que inicia en la página 12 son los medicamentos cubiertos por Amerigroup STAR+PLUS MMP. Estos medicamentos están disponibles en farmacias de nuestra red. La farmacia pertenece a nuestra red si tenemos un contrato con ellos para que trabajen con nosotros y brindarle servicios. A estas farmacias las denominamos "farmacias de la red".

- Amerigroup STAR+PLUS MMP cubriremos todos los medicamentos médicamente necesarios que se encuentran en la Lista de Medicamentos si:
    - su médico u otro emisor de recetas indica que los necesita para mejorar o mantenerse saludable **y**
    - abastece la receta en un Amerigroup STAR+PLUS MMP.
- Amerigroup STAR+PLUS MMP puede tener pasos adicionales para acceder a ciertos medicamentos (consulte la pregunta #B4 a continuación).

También puede ver una lista actualizada de medicamentos que cubrimos en nuestro sitio web en www.myamerigroup.com/TXmmp o puede llamar a Servicios para Afiliados al 1-855-878-1784 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m..

B2. ¿Se realizan cambios en la Lista de Medicamentos?

Sí. Amerigroup STAR+PLUS MMP puede agregar o eliminar medicamentos de la Lista de Medicamentos durante el año.

También es posible que cambiemos nuestras normas sobre los medicamentos. Por ejemplo, podríamos:

- Decidir solicitar o no solicitar una aprobación previa para un medicamento. (*La aprobación previa* es un permiso de Amerigroup STAR+PLUS MMP antes de que pueda obtener un medicamento).

- Incrementar o cambiar la cantidad del medicamento que puede obtener (llamada “límites de cantidad”).
- Incrementar o cambiar las restricciones de la terapia escalonada de un medicamento. (*Terapia escalonada* significa que debe probar un medicamento antes de que cubramos otro medicamento).

Para obtener más información sobre estas normas de los medicamentos, consulte la pregunta B4.

Si está tomando un medicamento de la Parte D de Medicare que estaba cubierto al **inicio** del año, por lo general, no retiraremos ni cambiaremos la cobertura de ese medicamento **durante el resto del año** a menos que:

- aparezca un medicamento nuevo y más barato que funcione tan bien como los medicamentos de la Lista de Medicamentos ahora **o**
- sepamos que un medicamento no es seguro **o**
- un medicamento se retire del mercado.

Las preguntas B3 y B6 a continuación tienen más información sobre lo que sucede cuando la Lista de Medicamentos cambia.

- Puede revisar siempre la Lista de Medicamentos actualizada de Amerigroup STAR+PLUS MMPen línea en www.myamerigroup.com/TXmmp.
- También puede llamar a Servicios para Afiliados para revisar la Lista de Medicamentos actual al 1-855-878-1784 (TTY 711) de lunes a viernes de 8 a. m. a 8 p. m..

B3. ¿Qué sucede cuando se realiza un cambio en la Lista de Medicamentos?

Algunos cambios a la Lista de Medicamentos se realizarán **de inmediato**. Por ejemplo:

- **Cuando un nuevo medicamento genérico está disponible**. A veces, aparece un medicamento nuevo y más barato que funciona tan bien como un medicamento de la Lista de Medicamentos. Cuando eso sucede, podemos eliminar el medicamento actual, pero su costo para el nuevo medicamento seguirá siendo el mismo. Cuando agreguemos el nuevo medicamento genérico, también podremos decidir mantener el medicamento actual en la lista, pero cambiar sus reglas o límites de cobertura.
    - Es posible que no le informemos antes de realizar este cambio, pero le enviaremos información sobre el cambio específico o los cambios que realicemos.
    - Usted o su proveedor pueden solicitar una excepción de estos cambios. Le enviaremos una notificación con los pasos que puede seguir para solicitar una excepción. Consulte la pregunta B10 para obtener más información sobre las excepciones.

- **Cuando un medicamento se retira del mercado**. Si la Administración de Alimentos y Medicamentos (FDA) indica que un medicamento que está tomando no es seguro o si el fabricante del medicamento retira un medicamento del mercado, lo retiraremos de la Lista de Medicamentos. Si está tomando el medicamento, le informaremos. Comuníquese con su médico que emite la receta tan pronto como reciba la carta.

Es posible que realicemos otros cambios que afecten los medicamentos que toma. Le informaremos con anticipación sobre estos otros cambios en la Lista de Medicamentos. Se pueden realizar estos cambios si:

- La FDA proporciona una nueva guía o hay nuevas pautas clínicas sobre el medicamento.
- Agregamos un medicamento genérico que no es nuevo en el mercado **y**
    - Reemplazamos un medicamento de marca que actualmente se encuentra en la Lista de Medicamentos **o**
    - Cambiamos las reglas o los límites de cobertura para el medicamento de marca.

Cuando se realicen estos cambios, le informaremos al menos 30 días antes de realizar el cambio en la Lista de Medicamentos **o** cuando solicite un reabastecimiento. Esto le dará tiempo para hablar con su médico u otro emisor de recetas. Él o ella puede ayudarle a decidir si hay un medicamento similar en la Lista de Medicamentos que pueda tomar o si solicitar una excepción. Entonces, podrá:

- Obtener un suministro de 31 días del medicamento antes de que se realice el cambio en la Lista de Medicamentos **o**
- Solicitar una excepción de estos cambios. Consulte la pregunta B10 para obtener más información sobre las excepciones.

B4. ¿Existen restricciones o límites en la cobertura del medicamento o cualquier acción requerida para obtener ciertos medicamentos?

Sí, algunos medicamentos tienen reglas de cobertura o límites en la cantidad que puede obtener. En algunos casos; usted, su médico u otro emisor de recetas deben hacer algo antes de poder obtener el medicamento. Por ejemplo:

- **Aprobación previa (o autorización previa):** Para algunos medicamentos, usted, su médico u otro emisor de recetas deben obtener una aprobación de Amerigroup STAR+PLUS MMP antes de que abastezca su receta. Es posible queAmerigroup STAR+PLUS MMP no cubra el medicamento si no obtiene la aprobación.
- **Límites de cantidad:** A veces Amerigroup STAR+PLUS MMP limita la cantidad que puede obtener de un medicamento.

- **Terapia escalonada:** A veces, Amerigroup STAR+PLUS MMP requiere que siga una terapia escalonada. Esto significa que tendrá que probar los medicamentos en cierto orden para su afección médica. Es posible que deba probar un medicamento antes de que cubramos otro medicamento. Si su médico cree que el primer medicamento no funciona para usted, cubriremos el segundo.

Usted puede averiguar si su medicamento tiene requisitos o límites adicionales consultando las tablas en las páginas 12-133. También puede obtener más información visitando nuestro sitio web en www.myamerigroup.com/TXmmp. También puede solicitarnos que le enviemos una copia.

Puede solicitar una excepción de estos límites. Esto le dará tiempo para hablar con su médico u otro emisor de recetas. Él o ella puede ayudarle a decidir si hay un medicamento similar en la Lista de Medicamentos que pueda tomar o si solicitar una excepción. Consulte las preguntas B10 - B12 para obtener más información sobre las excepciones.

B5. ¿Cómo sabe si el medicamento que desea tiene limitaciones o si se deben tomar medidas para obtener el medicamento?

La *Lista de Medicamentos Cubiertos* en la página 12 tiene una columna titulada “Acciones necesarias, restricciones o límites de uso”.

B6. ¿Qué sucede si cambiamos nuestras reglas sobre algunos medicamentos (por ejemplo, autorización previa (aprobación), límites de cantidad y/o restricciones de terapia escalonada)?

En algunos casos, le informaremos con anticipación si agregamos o cambiamos la aprobación previa, los límites de cantidad y/o las restricciones de terapia escalonada en un medicamento. Consulte la pregunta B3 para obtener más información sobre esta notificación anticipada y las situaciones en las que es posible que no podamos informarle con anticipación cuando las reglas sobre los medicamentos de la Lista de Medicamentos cambien.

B7. ¿Cómo puede encontrar un medicamento en la Lista de Medicamentos?

Hay dos formas de encontrar un medicamento:

- Puede buscar en orden alfabético (si sabe cómo deletrear el medicamento) **o**
- Puede buscar por afección médica.

Para buscar **en orden alfabético,** vaya al índice de la sección de Medicamentos Cubiertos que inicia en la página 134, luego busque el nombre de su medicamento en la lista.

Para buscar **por afección médica**, busque la sección titulada “Lista de medicamentos por afección médica” en la página 12. Los medicamentos en esta sección están agrupados en categorías según el tipo de afección médica para la que se utilizan. Por ejemplo, si tiene una afección cardíaca,

debe buscar en la categoría Cardiovascular/Hipertensión/Lípidos. Ahí es donde encontrará medicamentos que tratan las afecciones cardíacas.

B8. ¿Qué sucede si el medicamento que desea tomar no se encuentra en la Lista de Medicamentos?

Si no ve su medicamento en la Lista de Medicamentos, llame a Servicios para Afiliados al 1-855-878-1784 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m. y pregunte por él. Si se le informa que Amerigroup STAR+PLUS MMP no cubrirá el medicamento, puede hacer una de estas cosas:

- Solicite a Servicio para Afiliados una lista de los medicamentos como el que desea tomar. Luego, muestre la lista a su médico u otro emisor de recetas. Él o ella puede recetar un medicamento de la Lista de Medicamentos que sea como el que usted desea tomar. **O**
- Puede solicitar una excepción al plan de salud para que cubra su medicamento. Consulte las preguntas B10 - B12 para obtener más información sobre las excepciones.

B9. ¿Qué sucede si es un nuevo miembro de Amerigroup STAR+PLUS MMP y no puede encontrar su medicamento en la Lista de Medicamentos o tiene problemas para obtener su medicamento?

Nosotros podemos ayudarle. Es posible que cubramos un suministro temporal de 31 días de su medicamento durante los primeros 90 días desde que es miembro de Amerigroup STAR+PLUS MMP. Esto le dará tiempo para hablar con su médico u otro emisor de recetas. Él o ella puede ayudarle a decidir si hay un medicamento similar en la Lista de Medicamentos que pueda tomar o si solicitar una excepción.

Si en su receta figuran menos días, permitiremos que le entreguen múltiples reabastecimientos hasta un máximo de 31 días de medicamentos.

Cubriremos un suministro de 31 días de su medicamento si:

- está tomando un medicamento que no está en nuestra Lista de Medicamentos **o**
- las reglas del plan de salud no le permiten obtener la cantidad ordenada por el emisor de recetas **o**
- el medicamento requiere la aprobación previa de Amerigroup STAR+PLUS MMP**o**
- está tomando un medicamento que es parte de la restricción de la terapia escalonada.

Si se encuentra en un hogar de ancianos u otro centro de atención a largo plazo y necesita un medicamento que no se encuentra en la Lista de Medicamentos o si no puede obtener fácilmente el medicamento que necesita, podemos ayudarle. Si usted ha estado en el plan más de 90 días, vive en un centro de atención a largo plazo y necesita un suministro de inmediato:

- Cubriremos un suministro de 31 días del medicamento que necesita (a menos que tenga una receta por menos días), sea usted o no un miembro nuevo Amerigroup STAR+PLUS MMP .
- Esto se suma al suministro temporal durante los primeros 90 días como miembro de Amerigroup STAR+PLUS MMP.

B10. ¿Puede solicitar una excepción para cubrir su medicamento?

Sí. Puede solicitar que Amerigroup STAR+PLUS MMP haga una excepción para que cubra un medicamento que no se encuentra en la Lista de Medicamentos.

También puede solicitarnos que cambiemos las reglas de su medicamento.

- Por ejemplo, Amerigroup STAR+PLUS MMP puede limitar la cantidad que cubriremos del medicamento. Si su medicamento tiene un límite, puede solicitarnos que cambiemos el límite y que cubramos más.
- Otros ejemplos: Puede solicitarnos que eliminemos las restricciones de la terapia escalonada o los requisitos de aprobación previa.

B11. ¿Cómo se puede solicitar una excepción?

Para solicitar una excepción, llame a Servicios para Afiliados. Su representante de Servicios para Afiliados trabajará con usted y su proveedor para ayudarle a solicitar una excepción.

También puede leer el Capítulo 9 del *Manual para Miembros* para obtener más información sobre las excepciones.

B12. ¿Cuánto demora obtener una excepción?

Primero, debemos obtener una declaración del emisor de recetas que respalde su solicitud de excepción. Después de recibir la declaración, tomaremos una decisión sobre su solicitud de excepción dentro de 72 horas.

Si usted o el emisor de recetas creen que su salud puede verse perjudicada si debe esperar 72 horas para la decisión, puede solicitar una excepción acelerada. Esto es cuando se toma una decisión más rápidamente. Si el emisor de recetas respalda su solicitud, tomaremos una decisión dentro de las 24 horas posteriores a la recepción de la declaración de respaldo del profesional que emitió la receta.

B13. ¿Qué son medicamentos genéricos?

Los medicamentos genéricos están compuestos de los mismos ingredientes activos que los medicamentos de marca. Por lo general, cuestan menos que los medicamentos de marca y

generalmente no tienen nombres conocidos. Los medicamentos genéricos están aprobados por la Administración de Alimentos y Medicamentos (Food and Drug Administration, FDA).

Amerigroup STAR+PLUS MMP cubre medicamentos de marca y medicamentos genéricos.

B14. ¿Qué son medicamentos OTC?

OTC se refiere a medicamentos “de venta libre”. Amerigroup STAR+PLUS MMP cubre algunos medicamentos de venta libre cuando son recetados por su proveedor.

Puede leer la Lista de Medicamentos de Amerigroup STAR+PLUS MMP para ver qué medicamentos de venta libre están cubiertos.

B15. ¿ Amerigroup STAR+PLUS MMP cubre productos de venta libre que no son medicamentos?

Amerigroup STAR+PLUS MMP cubre algunos productos de venta libre que no son medicamentos cuando son recetados por su proveedor.

Entre los productos de venta libre que no son medicamentos se encuentran las máscaras y los dispositivos bucales.

Puede leer la Lista de Medicamentos de Amerigroup STAR+PLUS MMP para ver qué productos de venta libre que no son medicamentos están cubiertos.

B16. ¿Cuál es su copago?

Puede leer la Lista de Medicamentos de Amerigroup STAR+PLUS MMP para aprender sobre el copago para cada medicamento.

Los miembros deAmerigroup STAR+PLUS MMP que viven en hogares de ancianos u otros centros de atención a largo plazo no tendrán copagos. Algunos miembros que reciben atención a largo plazo en la comunidad tampoco tendrán copagos.

Los copagos se clasifican por niveles. Los niveles son grupos de medicamentos con el mismo copago.

- Nivel 1 - Medicamentos de marca y genéricos preferidos de la Parte D de Medicare.
  El copago es de $0.00.
  (Un suministro de hasta 93 días en una farmacia minorista o de pedido por correo de la red)
- Nivel 2 - Medicamentos de marca y genéricos preferidos y no preferidos de la Parte D de Medicare.
  El copago es de $0 a $8.50.
  (Un suministro de hasta 93 días en una farmacia minorista o de pedido por correo de la red)

- Nivel 3 - Medicamentos recetados de marca y genéricos no cubiertos por Medicare y aprobados por Medicaid (estado).
  El copago es de $0.
  (Un suministro de hasta 31 días en una farmacia minorista de la red)

- Nivel 4 - Medicamentos genéricos de venta libre no cubiertos por Medicare y aprobados por Medicaid (estado).
  El copago es de $0.
  (Un suministro de hasta 31 días en una farmacia minorista de la red)

C. Lista de medicamentos cubiertos

La siguiente lista de medicamentos cubiertos le brinda información sobre los medicamentos cubiertos por Amerigroup STAR+PLUS MMP. Si tiene problemas para encontrar su medicamento en la lista, consulte el Índice de los Medicamentos Cubiertos que comienza en la página 134.

En el índice se encuentran en orden alfabético todos los medicamentos que están cubiertos por Amerigroup STAR+PLUS MMP.

En la primera columna del cuadro se encuentran los nombres de los medicamentos. Los medicamentos de marca figuran en letra mayúscula (por ej., SPIRIVA) y los medicamentos genéricos aparecen en letra minúscula y cursiva (por ej., atenolol).

La información en la columna “Acciones necesarias, restricciones o límites de uso” le indica si Amerigroup STAR+PLUS MMP tiene alguna regla para la cobertura de su medicamento.

Nota: El asterisco (*) al lado del medicamento significa que éste no es un “medicamento de la Parte D”. El monto que pagará cuando surta una receta para este medicamento no cuenta para su costo total de medicamentos (es decir, el monto que paga no le ayuda a ser elegible para la cobertura en caso de catástrofe).

- Además, si está recibiendo Ayuda Adicional para pagar sus recetas, no recibirá Ayuda Adicional para pagar estos medicamentos. Para obtener más información sobre la Ayuda Adicional, consulte el cuadro a continuación.

Ayuda Adicional (Extra Help) es un programa de Medicare que ayuda a las personas con ingresos y recursos limitados a reducir los costos de los medicamentos recetados de la Parte D de Medicare, por ejemplo, las primas, deducibles y copagos. La Ayuda Adicional también se denomina “Subsidio por bajos ingresos” o “LIS”.

- Estos medicamentos también tienen diferentes reglas para las apelaciones. Una apelación es una manera formal de solicitarnos que revisemos una decisión de cobertura y que la modifiquemos si cree que nos equivocamos. Por ejemplo, podemos decidir que un medicamento que desea no esté cubierto o que deje de estar cubierto por Medicare o Texas Medicaid.

- Si usted o su médico no están de acuerdo con nuestra decisión, pueden apelar. Para solicitar instrucciones sobre cómo apelar, llame a Servicio para Afiliados al 1-855-878-1784 (TTY 711), de lunes a viernes de 8 a. m. a 8 p. m.. También puede leer el *Manual para Afiliados* a fin de saber cómo apelar una decisión.

D. Lista de medicamentos por afección médica

Los medicamentos en esta sección están agrupados en categorías según el tipo de afección médica para la que se utilizan. Por ejemplo, si tiene una afección cardíaca, debe buscar en la categoría Cardiovascular, Hipertensión/Lípidos. Ahí es donde encontrará medicamentos que tratan las afecciones cardíacas.

Estos son los significados de los códigos usados en la columna "Acciones necesarias, restricciones o límites de uso":

- **B/D PAR:** Este medicamento recetado puede estar cubierto por la Parte B o D de Medicare, según las circunstancias. Es posible que se deba presentar información describiendo el uso y las circunstancias de uso del medicamento para tomar la decisión.
- **LA:** Disponibilidad limitada. Esta receta puede estar disponible solo en ciertas farmacias. Para obtener más información, llame al Servicios para Afiliados.
- **MO:** Medicamento de venta por correo. Este medicamento con receta está disponible a través de nuestro servicio de pedido por correo, así como a través de nuestras farmacias minoristas de la red. Considere usar el servicio de pedido por correo para sus medicamentos a largo plazo (de mantenimiento) (como medicamentos para la presión arterial alta). Las farmacias minoristas de la red pueden ser más adecuadas para recetas a corto plazo (como antibióticos).
- **NE:** Los suministros no ampliados de medicamentos incluyen medicamentos especializados. El abastecimiento de medicamentos especializados se limita a un suministro de 31 días. Puede averiguar si el abastecimiento de medicamentos especializados o suministro no ampliado de un medicamento están limitados a un suministro de 31 días consultando el cuadro de beneficios que se encuentra al inicio de su Manual para Afiliados.
- **PAR:** Se requiere autorización previa. El plan requiere que usted o su médico obtenga una autorización previa para determinados medicamentos. Esto significa que necesita obtener aprobación antes de poder abastecer su receta. Si no obtiene la aprobación, podríamos no cubrir el medicamento.
- **QLL:** Límite de cantidad. Para ciertos medicamentos, el plan limita la cantidad del medicamento que cubriremos.
- **ST**: Terapia escalonada. En algunos casos, el plan requiere que usted pruebe ciertos medicamentos para tratar su afección médica antes de cubrir otro medicamento para esa afección. Por ejemplo, si ambos medicamentos A y B tratan su afección médica, podemos no cubrir el medicamento B a menos que usted pruebe primero el medicamento A. Si el medicamento A no es efectivo para usted, entonces cubriremos el medicamento B.

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ANTI - INFECTIVES		
abacavir oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (960 per 30 days)
abacavir oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
abacavir-lamivudine	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
abacavir-lamivudine-zidovudine	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
ABELCET	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
acyclovir oral capsule	$0.00-$8.50 (Tier 2)	MO
acyclovir oral suspension 200 mg/5 ml	$0.00-$8.50 (Tier 2)	MO
acyclovir oral tablet	$0.00-$8.50 (Tier 2)	MO
acyclovir sodium 50 mg/ml intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
adefovir	$0.00-$8.50 (Tier 2)	PAR; MO
albendazole	$0.00-$8.50 (Tier 2)	MO; NE
ALBENZA	$0.00-$8.50 (Tier 2)	MO; NE
ALINIA ORAL SUSPENSION FOR RECONSTITUTION	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
ALINIA ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; QLL (6 per 30 days)
amantadine hcl	$0.00-$8.50 (Tier 2)	MO
AMBISOME	$0.00-$8.50 (Tier 2)	B/D PAR; MO
amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml	$0.00-$8.50 (Tier 2)	MO
amoxicillin oral capsule	$0.00-$8.50 (Tier 2)	MO
amoxicillin oral suspension for reconstitution	$0.00-$8.50 (Tier 2)	MO
amoxicillin oral tablet	$0.00-$8.50 (Tier 2)	MO
amoxicillin oral tablet,chewable 125 mg, 250 mg	$0.00-$8.50 (Tier 2)	MO
amoxicillin-pot clavulanate	$0.00-$8.50 (Tier 2)	MO
amphotericin b	$0.00-$8.50 (Tier 2)	B/D PAR; MO
ampicillin oral capsule 500 mg	$0.00-$8.50 (Tier 2)	MO
ampicillin sodium injection	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ampicillin sodium intravenous	$0.00-$8.50 (Tier 2)	
ampicillin-sulbactam injection recon soln 1.5 gram, 3 gram	$0.00-$8.50 (Tier 2)	MO
ampicillin-sulbactam injection recon soln 15 gram	$0.00-$8.50 (Tier 2)	
ampicillin-sulbactam intravenous recon soln 1.5 gram	$0.00-$8.50 (Tier 2)	
ampicillin-sulbactam intravenous recon soln 3 gram	$0.00-$8.50 (Tier 2)	MO
APTIVUS ORAL CAPSULE	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
APTIVUS ORAL SOLUTION	$0.00-$8.50 (Tier 2)	NE; QLL (380 per 30 days)
atazanavir oral capsule 150 mg, 200 mg	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
atazanavir oral capsule 300 mg	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
atovaquone	$0.00-$8.50 (Tier 2)	PAR; MO; NE
atovaquone-proguanil oral tablet 250-100 mg	$0.00-$8.50 (Tier 2)	MO
ATRIPLA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
AZACTAM	$0.00-$8.50 (Tier 2)	MO
AZACTAM IN DEXTROSE (ISO-OSM)	$0.00-$8.50 (Tier 2)	
azithromycin	$0.00-$8.50 (Tier 2)	MO
aztreonam	$0.00-$8.50 (Tier 2)	MO
BARACLUDE ORAL SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; NE
BICILLIN C-R INTRAMUSCULAR SYRINGE 1,200,000 UNIT/ 2 ML(600K/600K)	$0.00-$8.50 (Tier 2)	MO
BIKTARVY	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
BILTRICIDE	$0.00-$8.50 (Tier 2)	MO
CAPASTAT	$0.00-$8.50 (Tier 2)	
CAYSTON	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
cefaclor oral capsule	$0.00-$8.50 (Tier 2)	MO
cefaclor oral suspension for reconstitution 125 mg/ 5 ml, 250 mg/5 ml	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
cefaclor oral suspension for reconstitution 375 mg/5 ml	$0.00-$8.50 (Tier 2)	
cefaclor oral tablet extended release 12 hr	$0.00-$8.50 (Tier 2)	MO
cefadroxil oral capsule	$0.00-$8.50 (Tier 2)	MO
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	$0.00-$8.50 (Tier 2)	MO
cefadroxil oral tablet	$0.00-$8.50 (Tier 2)	MO
cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml	$0.00-$8.50 (Tier 2)	MO
cefazolin injection recon soln 1 gram, 500 mg	$0.00-$8.50 (Tier 2)	MO
cefazolin injection recon soln 10 gram, 100 gram, 20 gram, 300 g	$0.00-$8.50 (Tier 2)	
cefazolin intravenous	$0.00-$8.50 (Tier 2)	
cefdinir	$0.00-$8.50 (Tier 2)	MO
cefepime injection	$0.00-$8.50 (Tier 2)	MO
cefoxitin in dextrose, iso-osm	$0.00-$8.50 (Tier 2)	
cefoxitin intravenous recon soln 1 gram, 2 gram	$0.00-$8.50 (Tier 2)	MO
cefoxitin intravenous recon soln 10 gram	$0.00-$8.50 (Tier 2)	
cefpodoxime	$0.00-$8.50 (Tier 2)	MO
cefprozil	$0.00-$8.50 (Tier 2)	MO
ceftazidime injection recon soln 1 gram, 2 gram	$0.00-$8.50 (Tier 2)	MO
ceftazidime injection recon soln 6 gram	$0.00-$8.50 (Tier 2)	
ceftriaxone in dextrose,iso-os	$0.00-$8.50 (Tier 2)	MO
ceftriaxone intravenous solution	$0.00-$8.50 (Tier 2)	MO
ceftriaxone intravenous solution injection recon soln 1 gram, 2 gram, 250 mg, 500 mg	$0.00-$8.50 (Tier 2)	MO
ceftriaxone intravenous solution injection recon soln 10 gram, 100 gram	$0.00-$8.50 (Tier 2)	
cefuroxime axetil oral tablet	$0.00-$8.50 (Tier 2)	MO
cefuroxime sodium injection recon soln 750 mg	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
cefuroxime sodium intravenous recon soln 1.5 gram	$0.00-$8.50 (Tier 2)	MO
cefuroxime sodium intravenous recon soln 7.5 gram	$0.00-$8.50 (Tier 2)	
cephalexin oral capsule 250 mg, 500 mg	$0.00-$8.50 (Tier 2)	MO
cephalexin oral suspension for reconstitution	$0.00-$8.50 (Tier 2)	MO
chloramphenicol sod succinate	$0.00-$8.50 (Tier 2)	
chloroquine phosphate	$0.00-$8.50 (Tier 2)	MO
CIMDUO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	$0.00-$8.50 (Tier 2)	MO
ciprofloxacin tablet extended release 24 hr mphase	$0.00-$8.50 (Tier 2)	MO
clarithromycin	$0.00-$8.50 (Tier 2)	MO
clindamycin hcl	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate injection	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate intravenous	$0.00-$8.50 (Tier 2)	
clotrimazole mucous membrane	$0.00-$8.50 (Tier 2)	MO
colistin (colistimethate na)	$0.00-$8.50 (Tier 2)	MO
COMPLERA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
CRIXIVAN ORAL CAPSULE 200 MG	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
CRIXIVAN ORAL CAPSULE 400 MG	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
DAPSONE ORAL	$0.00-$8.50 (Tier 2)	MO
DAPTOMYCIN INTRAVENOUS RECON SOLN 350 MG	$0.00-$8.50 (Tier 2)	NE
daptomycin intravenous recon soln 500 mg	$0.00-$8.50 (Tier 2)	MO; NE
DARAPRIM	$0.00-$8.50 (Tier 2)	MO; NE
DELSTRIGO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
demeclocycline	$0.00-$8.50 (Tier 2)	MO
DESCOVY	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
dicloxacillin	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
didanosine oral capsule,delayed release(dr/ec) 200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
didanosine oral capsule,delayed release(dr/ec) 250 mg, 400 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
doxy-100	$0.00-$8.50 (Tier 2)	MO
doxycycline hyclate intravenous	$0.00-$8.50 (Tier 2)	
doxycycline hyclate oral capsule	$0.00-$8.50 (Tier 2)	MO
doxycycline hyclate oral tablet 100 mg, 20 mg	$0.00-$8.50 (Tier 2)	MO
doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg	$0.00-$8.50 (Tier 2)	MO
doxycycline monohydrate oral tablet 100 mg, 50 mg	$0.00-$8.50 (Tier 2)	MO
EDURANT	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
efavirenz oral capsule 200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
efavirenz oral capsule 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
efavirenz oral tablet	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
EMTRIVA ORAL CAPSULE	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
EMTRIVA ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO; QLL (850 per 30 days)
entecavir	$0.00-$8.50 (Tier 2)	PAR; MO; NE
EPCLUSA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
EPIVIR HBV ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO
ERAXIS(WATER DILUENT) INTRAVENOUS RECON SOLN 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ertapenem	$0.00-$8.50 (Tier 2)	MO
ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg	$0.00-$8.50 (Tier 2)	MO
ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	$0.00-$8.50 (Tier 2)	MO
erythrocin (as stearate) oral tablet 250 mg	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	$0.00-$8.50 (Tier 2)	MO
erythromycin ethylsuccinate oral tablet	$0.00-$8.50 (Tier 2)	MO
ethambutol	$0.00-$8.50 (Tier 2)	MO
EVOTAZ	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
famciclovir oral tablet 125 mg, 250 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
famciclovir oral tablet 500 mg	$0.00-$8.50 (Tier 2)	MO; QLL (21 per 7 days)
fluconazole	$0.00-$8.50 (Tier 2)	MO
fluconazole in dextrose(iso-o)	$0.00-$8.50 (Tier 2)	
FLUCONAZOLE IN NACL (ISO-OSM) INTRAVENOUS PIGGYBACK 100 MG/50 ML	$0.00-$8.50 (Tier 2)	
fluconazole in nacl (iso-osm) intravenous piggyback 200 mg/100 ml	$0.00-$8.50 (Tier 2)	MO
fluconazole in nacl (iso-osm) intravenous piggyback 400 mg/200 ml	$0.00-$8.50 (Tier 2)	
flucytosine oral capsule 250 mg	$0.00-$8.50 (Tier 2)	MO
flucytosine oral capsule 500 mg	$0.00-$8.50 (Tier 2)	MO; NE
fosamprenavir	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
FUZEON SUBCUTANEOUS RECON SOLN	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
ganciclovir sodium intravenous recon soln	$0.00-$8.50 (Tier 2)	B/D PAR; MO
gentamicin injection	$0.00-$8.50 (Tier 2)	MO
gentamicin sulfate (ped) (pf) 20 mg/2 ml injection	$0.00-$8.50 (Tier 2)	MO
GENVOYA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
griseofulvin microsize oral suspension	$0.00-$8.50 (Tier 2)	MO
griseofulvin ultramicrosize	$0.00-$8.50 (Tier 2)	MO
HARVONI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (28 per 28 days)
hydroxychloroquine	$0.00-$8.50 (Tier 2)	MO
imipenem-cilastatin	$0.00-$8.50 (Tier 2)	MO
INTELENCE ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
INTELENCE ORAL TABLET 200 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
INTELENCE ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (480 per 30 days)
INVANZ INJECTION	$0.00-$8.50 (Tier 2)	MO
INVIRASE ORAL CAPSULE	$0.00-$8.50 (Tier 2)	NE; QLL (300 per 30 days)
INVIRASE ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
ISENTRESS HD	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
ISENTRESS ORAL POWDER IN PACKET	$0.00-$8.50 (Tier 2)	MO; NE; QLL (180 per 30 days)
ISENTRESS ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
ISENTRESS ORAL TABLET,CHEWABLE 100 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (180 per 30 days)
ISENTRESS ORAL TABLET,CHEWABLE 25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (720 per 30 days)
isoniazid oral	$0.00-$8.50 (Tier 2)	MO
itraconazole oral capsule	$0.00-$8.50 (Tier 2)	PAR; MO
ivermectin	$0.00-$8.50 (Tier 2)	MO
JULUCA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
KALETRA ORAL TABLET 100-25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
KALETRA ORAL TABLET 200-50 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
ketoconazole oral	$0.00-$8.50 (Tier 2)	MO
lamivudine oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (960 per 30 days)
lamivudine oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO
lamivudine oral tablet 150 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
lamivudine oral tablet 300 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
lamivudine-zidovudine	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
levofloxacin in d5w intravenous piggyback 250 mg/ 50 ml	$0.00-$8.50 (Tier 2)	
levofloxacin in d5w intravenous piggyback 500 mg/ 100 ml, 750 mg/150 ml	$0.00-$8.50 (Tier 2)	MO
levofloxacin intravenous	$0.00-$8.50 (Tier 2)	MO

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levofloxacin oral tablet	$0.00-$8.50 (Tier 2)	MO
LEXIVA ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	MO; QLL (1800 per 30 days)
LEXIVA ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
linezolid in dextrose 5%	$0.00-$8.50 (Tier 2)	
linezolid oral suspension for reconstitution	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (1800 per 30 days)
linezolid oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (56 per 28 days)
linezolid-0.9% sodium chloride	$0.00-$8.50 (Tier 2)	
lopinavir-ritonavir	$0.00-$8.50 (Tier 2)	MO; QLL (480 per 30 days)
mefloquine	$0.00-$8.50 (Tier 2)	MO
meropenem	$0.00-$8.50 (Tier 2)	MO
methenamine hippurate	$0.00-$8.50 (Tier 2)	MO
metro i.v.	$0.00-$8.50 (Tier 2)	MO
metronidazole in nacl (iso-os)	$0.00-$8.50 (Tier 2)	MO
metronidazole oral	$0.00-$8.50 (Tier 2)	MO
minocycline oral capsule	$0.00-$8.50 (Tier 2)	MO
minocycline oral tablet	$0.00-$8.50 (Tier 2)	MO
MONUROL	$0.00-$8.50 (Tier 2)	MO
morgidox oral capsule 50 mg	$0.00-$8.50 (Tier 2)	MO
moxifloxacin oral	$0.00-$8.50 (Tier 2)	MO
nafcillin injection recon soln 1 gram, 2 gram	$0.00-$8.50 (Tier 2)	MO
nafcillin injection recon soln 10 gram	$0.00-$8.50 (Tier 2)	MO; NE
nafcillin intravenous recon soln 2 gram	$0.00-$8.50 (Tier 2)	MO
NEBUPENT	$0.00-$8.50 (Tier 2)	B/D PAR; MO
neomycin	$0.00-$8.50 (Tier 2)	MO
nevirapine oral suspension	$0.00-$8.50 (Tier 2)	QLL (1200 per 30 days)
nevirapine oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
nevirapine oral tablet extended release 24 hr 100 mg	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
nevirapine oral tablet extended release 24 hr 400 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	$0.00-$8.50 (Tier 2)	PAR; MO
nitrofurantoin monohyd/m-cryst	$0.00-$8.50 (Tier 2)	PAR; MO
NORVIR ORAL POWDER IN PACKET	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
NORVIR ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO; QLL (480 per 30 days)
NORVIR ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
NOXAFIL ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	PAR; MO; NE
nystatin oral suspension	$0.00-$8.50 (Tier 2)	MO
nystatin oral tablet	$0.00-$8.50 (Tier 2)	MO
ODEFSEY	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
ofloxacin oral tablet 300 mg	$0.00-$8.50 (Tier 2)	
ofloxacin oral tablet 400 mg	$0.00-$8.50 (Tier 2)	MO
okebo oral capsule 75 mg	$0.00-$8.50 (Tier 2)	MO
oseltamivir	$0.00-$8.50 (Tier 2)	MO
oxacillin injection recon soln 1 gram, 10 gram	$0.00-$8.50 (Tier 2)	
oxacillin injection recon soln 2 gram	$0.00-$8.50 (Tier 2)	MO
paromomycin	$0.00-$8.50 (Tier 2)	MO
PASER	$0.00-$8.50 (Tier 2)	MO
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 1 MILLION UNIT/50 ML, 2 MILLION UNIT/50 ML	$0.00-$8.50 (Tier 2)	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 3 MILLION UNIT/50 ML	$0.00-$8.50 (Tier 2)	MO
penicillin g potassium	$0.00-$8.50 (Tier 2)	MO
penicillin g procaine intramuscular syringe 1.2 million unit/2 ml	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
penicillin g procaine intramuscular syringe 600,000 unit/ml	$0.00-$8.50 (Tier 2)	
penicillin g sodium	$0.00-$8.50 (Tier 2)	MO
penicillin v potassium	$0.00-$8.50 (Tier 2)	MO
PENTAM	$0.00-$8.50 (Tier 2)	MO
PIFELTRO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram	$0.00-$8.50 (Tier 2)	MO
praziquantel	$0.00-$8.50 (Tier 2)	MO
PREZCOBIX	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
PREZISTA ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	MO; NE; QLL (400 per 30 days)
PREZISTA ORAL TABLET 150 MG	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
PREZISTA ORAL TABLET 600 MG, 800 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
PREZISTA ORAL TABLET 75 MG	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
PRIFTIN	$0.00-$8.50 (Tier 2)	MO
PRIMAQUINE	$0.00-$8.50 (Tier 2)	MO
pyrazinamide	$0.00-$8.50 (Tier 2)	MO
RELENZA DISKHALER	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 180 days)
RESCRIPTOR ORAL TABLET	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
RESCRIPTOR ORAL TABLET, DISPERSIBLE	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
RETROVIR INTRAVENOUS	$0.00-$8.50 (Tier 2)	MO
REYATAZ ORAL POWDER IN PACKET	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
ribasphere oral capsule	$0.00-$8.50 (Tier 2)	MO
ribasphere oral tablet 200 mg	$0.00-$8.50 (Tier 2)	MO
ribavirin oral capsule	$0.00-$8.50 (Tier 2)	MO
ribavirin oral tablet 200 mg	$0.00-$8.50 (Tier 2)	MO; NE
rifabutin	$0.00-$8.50 (Tier 2)	MO
rifampin	$0.00-$8.50 (Tier 2)	MO
RIFATER	$0.00-$8.50 (Tier 2)	MO

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rimantadine	$0.00-$8.50 (Tier 2)	MO
ritonavir	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
SELZENTRY ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1840 per 30 days)
SELZENTRY ORAL TABLET 150 MG, 300 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
SELZENTRY ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
SELZENTRY ORAL TABLET 75 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
SIRTURO	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
stavudine oral capsule 15 mg, 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
stavudine oral capsule 30 mg, 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
STREPTOMYCIN	$0.00-$8.50 (Tier 2)	MO
STRIBILD	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
sulfadiazine	$0.00-$8.50 (Tier 2)	MO
sulfamethoxazole-trimethoprim	$0.00-$8.50 (Tier 2)	MO
SYMFI	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
SYMFI LO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
SYMTUZA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
SYNAGIS	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
SYNERCID	$0.00-$8.50 (Tier 2)	NE
TECHNIVIE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (56 per 28 days)
TEFLARO	$0.00-$8.50 (Tier 2)	MO; NE
tenofovir disoproxil fumarate	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
terbinafine hcl oral	$0.00-$8.50 (Tier 2)	MO
tetracycline	$0.00-$8.50 (Tier 2)	MO
TIGECYCLINE	$0.00-$8.50 (Tier 2)	NE
TIVICAY ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
TIVICAY ORAL TABLET 25 MG, 50 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
tobramycin in 0.225% nacl for nebulization	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE; QLL (280 per 28 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
tobramycin sulfate injection recon soln	$0.00-$8.50 (Tier 2)	NE
tobramycin sulfate injection solution	$0.00-$8.50 (Tier 2)	MO
TRECATOR	$0.00-$8.50 (Tier 2)	MO
trimethoprim	$0.00-$8.50 (Tier 2)	MO
TRIUMEQ	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
TROGARZO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (10.64 per 28 days)
TRUVADA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
TYBOST	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
valacyclovir oral tablet 1 gram	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
valacyclovir oral tablet 500 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
valganciclovir oral tablet	$0.00-$8.50 (Tier 2)	MO; NE
VANCOMYCIN IN 0.9 % SODIUM CHL INTRAVENOUS PIGGYBACK	$0.00-$8.50 (Tier 2)	B/D PAR
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 1 GRAM/200 ML	$0.00-$8.50 (Tier 2)	B/D PAR; MO
VANCOMYCIN IN DEXTROSE 5 % INTRAVENOUS PIGGYBACK 500 MG/100 ML, 750 MG/150 ML	$0.00-$8.50 (Tier 2)	B/D PAR
vancomycin intravenous recon soln 1,000 mg, 10 gram, 5 gram, 500 mg	$0.00-$8.50 (Tier 2)	MO
VANCOMYCIN INTRAVENOUS RECON SOLN 1.5 GRAM, 250 MG	$0.00-$8.50 (Tier 2)	
VANCOMYCIN INTRAVENOUS RECON SOLN 750 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO
vancomycin oral capsule 125 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (40 per 10 days)
vancomycin oral capsule 250 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (80 per 10 days)
VEMLIDY	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
VIDEX 2 GRAM PEDIATRIC	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)
VIDEX 4 GRAM PEDIATRIC	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
VIDEX EC ORAL CAPSULE,DELAYED RELEASE(DR/EC) 125 MG	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
VIRACEPT ORAL TABLET 250 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (300 per 30 days)
VIRACEPT ORAL TABLET 625 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (120 per 30 days)
VIRAMUNE ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)
VIREAD ORAL POWDER	$0.00-$8.50 (Tier 2)	MO; NE; QLL (240 per 30 days)
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
voriconazole intravenous	$0.00-$8.50 (Tier 2)	MO
voriconazole oral suspension for reconstitution	$0.00-$8.50 (Tier 2)	PAR; MO; NE
voriconazole oral tablet 200 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE
voriconazole oral tablet 50 mg	$0.00-$8.50 (Tier 2)	PAR; MO
VOSEVI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
XOFLUZA	$0.00-$8.50 (Tier 2)	MO
ZERIT ORAL RECON SOLN	$0.00-$8.50 (Tier 2)	MO; QLL (2400 per 30 days)
ZIAGEN ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO; QLL (960 per 30 days)
zidovudine oral capsule	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
zidovudine oral syrup	$0.00-$8.50 (Tier 2)	MO; QLL (1920 per 30 days)
zidovudine oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
ABRAXANE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
adriamycin intravenous recon soln 10 mg	$0.00-$8.50 (Tier 2)	B/D PAR
AFINITOR	$0.00-$8.50 (Tier 2)	PAR; MO; NE
AFINITOR DISPERZ	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ALECENSA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
ALIMTA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ALIQOPA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
ALUNBRIG ORAL TABLET 180 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ALUNBRIG ORAL TABLET 30 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (180 per 30 days)
ALUNBRIG ORAL TABLET 90 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
ALUNBRIG ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 180 days)
anastrozole	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
ARRANON	$0.00-$8.50 (Tier 2)	B/D PAR
ARSENIC TRIOXIDE	$0.00-$8.50 (Tier 2)	NE
ARZERRA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
AVASTIN	$0.00-$8.50 (Tier 2)	PAR; MO; NE
azacitidine	$0.00-$8.50 (Tier 2)	PAR; MO; NE
azathioprine	$0.00-$8.50 (Tier 2)	B/D PAR; MO
azathioprine sodium solution for injection	$0.00-$8.50 (Tier 2)	B/D PAR
BAVENCIO	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
BELEODAQ	$0.00-$8.50 (Tier 2)	PAR; MO; NE
BENDEKA	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
BESPONSA	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
bexarotene	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (300 per 30 days)
bicalutamide	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
BICNU	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
bleomycin	$0.00-$8.50 (Tier 2)	B/D PAR; MO
BLINCYTO INTRAVENOUS KIT	$0.00-$8.50 (Tier 2)	PAR; MO; NE
BORTEZOMIB	$0.00-$8.50 (Tier 2)	PAR; MO; NE
BOSULIF ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
BOSULIF ORAL TABLET 400 MG, 500 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
BRAFTOVI ORAL CAPSULE 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
BRAFTOVI ORAL CAPSULE 75 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
busulfan	$0.00-$8.50 (Tier 2)	B/D PAR
BUSULFEX	$0.00-$8.50 (Tier 2)	B/D PAR

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CABOMETYX	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
CALQUENCE	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
CAPRELSA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (90 per 30 days)
CAPRELSA ORAL TABLET 300 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
carboplatin intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
carmustine	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
CELLCEPT INTRAVENOUS	$0.00-$8.50 (Tier 2)	B/D PAR; MO
cisplatin	$0.00-$8.50 (Tier 2)	B/D PAR; MO
cladribine	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
clofarabine	$0.00-$8.50 (Tier 2)	B/D PAR; NE
CLOLAR	$0.00-$8.50 (Tier 2)	B/D PAR; NE
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (56 per 28 days)
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (112 per 28 days)
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (84 per 28 days)
COPIKTRA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
COTELLIC	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (90 per 30 days)
CYCLOPHOSPHAMIDE ORAL CAPSULE	$0.00-$8.50 (Tier 2)	B/D PAR; MO
cyclosporine intravenous	$0.00-$8.50 (Tier 2)	B/D PAR
cyclosporine modified	$0.00-$8.50 (Tier 2)	B/D PAR; MO
cyclosporine oral capsule	$0.00-$8.50 (Tier 2)	B/D PAR; MO
CYRAMZA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
cytarabine (pf) injection solution 100 mg/5 ml (20 mg/ml), 2 gram/20 ml (100 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
cytarabine (pf) injection solution 20 mg/ml	$0.00-$8.50 (Tier 2)	B/D PAR
cytarabine injection solution 20mg/ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
dacarbazine	$0.00-$8.50 (Tier 2)	B/D PAR; MO
dactinomycin	$0.00-$8.50 (Tier 2)	B/D PAR; NE
DARZALEX	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
daunorubicin intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR
decitabine	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
dexrazoxane hcl intravenous recon soln 250 mg	$0.00-$8.50 (Tier 2)	B/D PAR; NE
dexrazoxane hcl intravenous recon soln 500 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
docetaxel intravenous solution 160 mg/16 ml (10 mg/ml), 20 mg/2 ml (10 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; NE
docetaxel intravenous solution 160 mg/8 ml (20 mg/ml), 20 mg/ml (1 ml), 80 mg/4 ml (20 mg/ml), 80 mg/8 ml (10 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
DOCETAXEL INTRAVENOUS SOLUTION 20 MG/ML	$0.00-$8.50 (Tier 2)	B/D PAR; NE
doxorubicin intravenous recon soln 10 mg	$0.00-$8.50 (Tier 2)	B/D PAR
doxorubicin intravenous recon soln 50 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
doxorubicin intravenous solution 10 mg/5 ml, 20 mg/10 ml, 50 mg/25 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
doxorubicin intravenous solution 2 mg/ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
doxorubicin, peg-liposomal	$0.00-$8.50 (Tier 2)	PAR; MO; NE
DROXIA	$0.00-$8.50 (Tier 2)	MO
ELITEK	$0.00-$8.50 (Tier 2)	PAR; MO; NE
EMCYT	$0.00-$8.50 (Tier 2)	MO
EMPLICITI	$0.00-$8.50 (Tier 2)	PAR; MO; NE
epirubicin intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
ERBITUX	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ERIVEDGE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ERLEADA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ERWINAZE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ETOPOPHOS	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
etoposide intravenous	$0.00-$8.50 (Tier 2)	B/D PAR; MO
EVOMELA	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
exemestane	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
FARESTON	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
FARYDAK ORAL CAPSULE 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
FARYDAK ORAL CAPSULE 15 MG, 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
FASLODEX	$0.00-$8.50 (Tier 2)	PAR; MO; NE
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 365 days)
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (1 per 28 days)
fludarabine intravenous recon soln	$0.00-$8.50 (Tier 2)	B/D PAR; MO
fludarabine intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; NE
fluorouracil intravenous	$0.00-$8.50 (Tier 2)	B/D PAR; MO
flutamide	$0.00-$8.50 (Tier 2)	MO
FOLOTYN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
GAZYVA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
gemcitabine intravenous recon soln 1 gram, 200 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
gemcitabine intravenous recon soln 2 gram	$0.00-$8.50 (Tier 2)	B/D PAR; NE
gemcitabine intravenous solution 1 gram/26.3 ml (38 mg/ml), 200 mg/5.26 ml (38 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
gemcitabine intravenous solution 100 mg/ml	$0.00-$8.50 (Tier 2)	B/D PAR; NE
gemcitabine intravenous solution 2 gram/52.6 ml (38 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; NE
gengraf oral capsule 100 mg, 25 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
gengraf oral solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO

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GILOTRIF	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
GLEOSTINE	$0.00-$8.50 (Tier 2)	PAR; MO
HALAVEN	$0.00-$8.50 (Tier 2)	PAR; MO; NE
HERCEPTIN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
hydroxyurea	$0.00-$8.50 (Tier 2)	MO
IBRANCE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
ICLUSIG ORAL TABLET 15 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
ICLUSIG ORAL TABLET 45 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
idarubicin	$0.00-$8.50 (Tier 2)	B/D PAR; NE
IDHIFA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
IDHIFA ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
ifosfamide intravenous recon soln	$0.00-$8.50 (Tier 2)	B/D PAR; MO
ifosfamide intravenous solution 1 gram/20 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
ifosfamide intravenous solution 3 gram/60 ml	$0.00-$8.50 (Tier 2)	B/D PAR
imatinib oral tablet 100 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
imatinib oral tablet 400 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
IMBRUVICA ORAL TABLET 140 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
IMBRUVICA ORAL TABLET 280 MG, 420 MG, 560 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
IMFINZI	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
INLYTA ORAL TABLET 1 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
INLYTA ORAL TABLET 5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
IRESSA	$0.00-$8.50 (Tier 2)	MO; NE
irinotecan intravenous solution 100 mg/5 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
irinotecan intravenous solution 40 mg/2 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
irinotecan intravenous solution 500 mg/25 ml	$0.00-$8.50 (Tier 2)	B/D PAR
ISTODAX	$0.00-$8.50 (Tier 2)	PAR; MO; NE
IXEMPRA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
JAKAFI ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (150 per 30 days)
JAKAFI ORAL TABLET 15 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (100 per 30 days)
JAKAFI ORAL TABLET 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (75 per 30 days)
JAKAFI ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
JAKAFI ORAL TABLET 5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (300 per 30 days)
JEVTANA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
KADCYLA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
KEPIVANCE	$0.00-$8.50 (Tier 2)	MO
KEYTRUDA INTRAVENOUS SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; NE
KISQALI FEMARA CO-PACK ORAL TABLET 200 MG/DAY(200 MG X 1)-2.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (49 per 28 days)
KISQALI FEMARA CO-PACK ORAL TABLET 400 MG/DAY(200 MG X 2)-2.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (70 per 28 days)
KISQALI FEMARA CO-PACK ORAL TABLET 600 MG/DAY(200 MG X 3)-2.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (91 per 28 days)
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (21 per 21 days)
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (42 per 21 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (63 per 21 days)
KYPROLIS	$0.00-$8.50 (Tier 2)	PAR; MO; NE
LARTRUVO	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
letrozole	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
leucovorin calcium injection recon soln 100 mg, 200 mg, 350 mg, 50 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
leucovorin calcium injection recon soln 500 mg	$0.00-$8.50 (Tier 2)	B/D PAR
leucovorin calcium oral	$0.00-$8.50 (Tier 2)	MO
LEUKERAN	$0.00-$8.50 (Tier 2)	MO
leuprolide subcutaneous kit	$0.00-$8.50 (Tier 2)	PAR; MO
levoleucovorin calcium intravenous recon soln 50 mg	$0.00-$8.50 (Tier 2)	PAR; NE
LIBTAYO	$0.00-$8.50 (Tier 2)	PAR; MO; NE
LONSURF	$0.00-$8.50 (Tier 2)	PAR; MO; NE
LORBRENA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
LORBRENA ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
LUMOXITI	$0.00-$8.50 (Tier 2)	PAR; MO; NE
LUPRON DEPOT	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1 per 28 days)
LUPRON DEPOT-PED INTRAMUSCULAR KIT 7.5 MG (PED)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1 per 28 days)
LYNPARZA ORAL CAPSULE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (480 per 30 days)
LYNPARZA ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
LYSODREN	$0.00-$8.50 (Tier 2)	MO
MARQIBO	$0.00-$8.50 (Tier 2)	MO; NE
MATULANE	$0.00-$8.50 (Tier 2)	MO; NE
megestrol oral suspension 400 mg/10 ml (10 ml), 800 mg/20 ml (20 ml)	$0.00-$8.50 (Tier 2)	PAR
megestrol oral suspension 400 mg/10 ml (40 mg/ml)	$0.00-$8.50 (Tier 2)	PAR; MO
megestrol oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO

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MEKINIST ORAL TABLET 0.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
MEKINIST ORAL TABLET 2 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
MEKTOVI	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
melphalan hcl	$0.00-$8.50 (Tier 2)	B/D PAR
mercaptopurine	$0.00-$8.50 (Tier 2)	MO
mesna	$0.00-$8.50 (Tier 2)	PAR; MO
MESNEX ORAL	$0.00-$8.50 (Tier 2)	PAR; MO
methotrexate sodium	$0.00-$8.50 (Tier 2)	MO
methotrexate sodium (pf) injection recon soln	$0.00-$8.50 (Tier 2)	
methotrexate sodium (pf) injection solution	$0.00-$8.50 (Tier 2)	MO
mitomycin intravenous recon soln 20 mg, 5 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
mitomycin intravenous recon soln 40 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
mitoxantrone	$0.00-$8.50 (Tier 2)	B/D PAR; MO
mycophenolate mofetil hcl	$0.00-$8.50 (Tier 2)	B/D PAR
mycophenolate mofetil oral capsule	$0.00-$8.50 (Tier 2)	B/D PAR; MO
mycophenolate mofetil oral suspension for reconstitution	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
mycophenolate mofetil oral tablet	$0.00-$8.50 (Tier 2)	B/D PAR; MO
mycophenolate sodium	$0.00-$8.50 (Tier 2)	B/D PAR; MO
MYLOTARG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
NERLYNX	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
NEXAVAR	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
nilutamide	$0.00-$8.50 (Tier 2)	MO; NE; QLL (30 per 30 days)
NINLARO	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (3 per 28 days)
NIPENT	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
NULOJIX	$0.00-$8.50 (Tier 2)	PAR; MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
octreotide acetate injection solution	$0.00-$8.50 (Tier 2)	PAR; MO
octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml)	$0.00-$8.50 (Tier 2)	PAR; MO
octreotide acetate injection syringe 500 mcg/ml (1 ml)	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ODOMZO	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
OPDIVO	$0.00-$8.50 (Tier 2)	PAR; MO; NE
oxaliplatin intravenous recon soln 100 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
oxaliplatin intravenous recon soln 50 mg	$0.00-$8.50 (Tier 2)	B/D PAR; NE
oxaliplatin intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
paclitaxel	$0.00-$8.50 (Tier 2)	B/D PAR; MO
PERJETA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
POMALYST ORAL CAPSULE 1 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
POMALYST ORAL CAPSULE 2 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
POMALYST ORAL CAPSULE 3 MG, 4 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
PORTRAZZA	$0.00-$8.50 (Tier 2)	MO; NE
POTELIGEO	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
PROGRAF INTRAVENOUS	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
PURIXAN	$0.00-$8.50 (Tier 2)	PAR; MO; NE
RAPAMUNE ORAL SOLUTION	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
REVLIMID ORAL CAPSULE 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
REVLIMID ORAL CAPSULE 15 MG, 2.5 MG, 20 MG, 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
REVLIMID ORAL CAPSULE 5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (150 per 30 days)
RITUXAN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
RITUXAN HYCELA	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
ROMIDEPSIN	$0.00-$8.50 (Tier 2)	PAR; NE
RUBRACA ORAL TABLET 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
RUBRACA ORAL TABLET 250 MG, 300 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
RYDAPT	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
SIGNIFOR	$0.00-$8.50 (Tier 2)	PAR; MO; NE
SIMULECT INTRAVENOUS RECON SOLN 10 MG	$0.00-$8.50 (Tier 2)	B/D PAR; NE
SIMULECT INTRAVENOUS RECON SOLN 20 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
sirolimus	$0.00-$8.50 (Tier 2)	B/D PAR; MO
SOLTAMOX	$0.00-$8.50 (Tier 2)	MO; NE
SOMATULINE DEPOT	$0.00-$8.50 (Tier 2)	PAR; MO; NE
SPRYCEL	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
STIVARGA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
SUTENT ORAL CAPSULE 12.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
SUTENT ORAL CAPSULE 25 MG, 37.5 MG, 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
SYNRIBO	$0.00-$8.50 (Tier 2)	PAR; MO; NE
TABLOID	$0.00-$8.50 (Tier 2)	MO
tacrolimus oral capsule 0.5 mg, 1 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
tacrolimus oral capsule 5 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
TAFINLAR	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
TAGRISSO ORAL TABLET 40 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
TAGRISSO ORAL TABLET 80 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
TALZENNA ORAL CAPSULE 0.25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (180 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
TALZENNA ORAL CAPSULE 1 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
tamoxifen	$0.00-$8.50 (Tier 2)	MO
TARCEVA ORAL TABLET 100 MG, 150 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
TARCEVA ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
TARGRETIN TOPICAL	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
TASIGNA ORAL CAPSULE 150 MG, 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (112 per 28 days)
TASIGNA ORAL CAPSULE 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (56 per 28 days)
TECENTRIQ	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (20 per 21 days)
temsirolimus	$0.00-$8.50 (Tier 2)	PAR; MO; NE
THALOMID ORAL CAPSULE 100 MG, 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
THALOMID ORAL CAPSULE 150 MG, 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
thiotepa	$0.00-$8.50 (Tier 2)	B/D PAR; MO
TIBSOVO	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
toposar	$0.00-$8.50 (Tier 2)	B/D PAR; MO
topotecan intravenous recon soln	$0.00-$8.50 (Tier 2)	B/D PAR; NE
topotecan intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
TORISEL	$0.00-$8.50 (Tier 2)	PAR; MO; NE
TREANDA INTRAVENOUS RECON SOLN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 11.25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1 per 84 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 22.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1 per 168 days)
TRELSTAR INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 3.75 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1 per 28 days)
tretinoin (chemotherapy)	$0.00-$8.50 (Tier 2)	MO; NE
TREXALL	$0.00-$8.50 (Tier 2)	MO
TRISENOX INTRAVENOUS SOLUTION 2 MG/ML	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE

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TYKERB	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
UNITUXIN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
VECTIBIX	$0.00-$8.50 (Tier 2)	PAR; MO; NE
VELCADE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
VENCLEXTA ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; QLL (60 per 30 days)
VENCLEXTA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
VENCLEXTA ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
VENCLEXTA STARTING PACK	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (84 per 365 days)
VERZENIO	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
vinblastine intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
vincasar pfs intravenous solution 1 mg/ml	$0.00-$8.50 (Tier 2)	B/D PAR
vincasar pfs intravenous solution 2 mg/2 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
vincristine	$0.00-$8.50 (Tier 2)	B/D PAR; MO
vinorelbine	$0.00-$8.50 (Tier 2)	B/D PAR; MO
VIZIMPRO ORAL TABLET 15 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
VIZIMPRO ORAL TABLET 30 MG, 45 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
VOTRIENT	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
VYXEOS	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
XALKORI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
XATMEP	$0.00-$8.50 (Tier 2)	MO
XGEVA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1.7 per 28 days)
XTANDI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
YERVOY	$0.00-$8.50 (Tier 2)	PAR; MO; NE
YONDELIS	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
YONSA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
ZALTRAP	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ZANOSAR	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
ZEJULA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (90 per 30 days)
ZELBORAF	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
ZOLINZA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
ZORTRESS ORAL TABLET 1 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
ZYDELIG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
ZYKADIA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
ZYTIGA ORAL TABLET 250 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
ZYTIGA ORAL TABLET 500 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH		
ABILIFY MAINTENA	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1 per 28 days)
acephen	$0 (Tier 4)	[*]
aceta-gesic	$0 (Tier 4)	[*]
acetaminophen oral tablet 325 mg	$0 (Tier 4)	[*]
acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 240 mg-24 mg /10 ml (10 ml), 300 mg-30 mg /12.5 ml	$0.00-$8.50 (Tier 2)	QLL (900 per 30 days)
acetaminophen-codeine oral solution 120-12 mg/5 ml	$0.00-$8.50 (Tier 2)	MO; QLL (900 per 30 days)
acetaminophen-codeine oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
ADASUVE	$0.00-$8.50 (Tier 2)	QLL (30 per 30 days)
all day relief	$0 (Tier 4)	[*]
alprazolam oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
amitriptyline	$0.00-$8.50 (Tier 2)	PAR; MO

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amoxapine	$0.00-$8.50 (Tier 2)	PAR; MO
AMPYRA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
APOKYN	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
APTIOM	$0.00-$8.50 (Tier 2)	ST; MO; NE
aripiprazole oral solution	$0 (Tier 1)	MO; QLL (900 per 30 days)
aripiprazole oral tablet 10 mg	$0 (Tier 1)	MO; QLL (90 per 30 days)
aripiprazole oral tablet 15 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
aripiprazole oral tablet 2 mg	$0 (Tier 1)	MO; QLL (450 per 30 days)
aripiprazole oral tablet 20 mg, 30 mg	$0 (Tier 1)	MO; NE; QLL (30 per 30 days)
aripiprazole oral tablet 5 mg	$0 (Tier 1)	MO; QLL (180 per 30 days)
aripiprazole oral tablet,disintegrating 10 mg	$0 (Tier 1)	MO; NE; QLL (90 per 30 days)
aripiprazole oral tablet,disintegrating 15 mg	$0 (Tier 1)	MO; NE; QLL (60 per 30 days)
arthritis pain relief (acetam)	$0 (Tier 4)	[*]
aspir-low	$0 (Tier 4)	[*]
aspirin oral tablet	$0 (Tier 4)	[*]
aspirin oral tablet,chewable	$0 (Tier 4)	[*]
aspirin oral tablet,delayed release (dr/ec) 325 mg, 81 mg	$0 (Tier 4)	[*]
atomoxetine oral capsule 10 mg, 18 mg, 25 mg, 40 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
atomoxetine oral capsule 100 mg, 60 mg, 80 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
AUBAGIO	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
baclofen	$0.00-$8.50 (Tier 2)	MO
BANZEL ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (2400 per 30 days)
BANZEL ORAL TABLET 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (480 per 30 days)
BANZEL ORAL TABLET 400 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
benztropine oral	$0.00-$8.50 (Tier 2)	PAR; MO
BRIVIACT INTRAVENOUS	$0.00-$8.50 (Tier 2)	PAR

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BRIVIACT ORAL SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (600 per 30 days)
BRIVIACT ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (600 per 30 days)
BRIVIACT ORAL TABLET 100 MG, 75 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
BRIVIACT ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
BRIVIACT ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
bromocriptine	$0.00-$8.50 (Tier 2)	MO
buprenorphine hcl injection solution	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
buprenorphine hcl injection syringe	$0.00-$8.50 (Tier 2)	QLL (90 per 30 days)
buprenorphine hcl sublingual tablet 2 mg	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
buprenorphine hcl sublingual tablet 8 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
buprenorphine-naloxone sublingual tablet 2-0.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
buprenorphine-naloxone sublingual tablet 8-2 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
bupropion hcl oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (135 per 30 days)
bupropion hcl oral tablet 75 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
bupropion hcl oral tablet extended release 24 hr 150 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
bupropion hcl oral tablet extended release 24 hr 300 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
bupropion hcl oral tablet sustained-release 12 hr 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
bupropion hcl oral tablet sustained-release 12 hr 150 mg, 200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
buspirone	$0.00-$8.50 (Tier 2)	MO
butorphanol tartrate injection solution 1 mg/ml vial	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
butorphanol tartrate injection solution 2 mg/ml vial	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
butorphanol tartrate injection solution nasal spray, non-aerosol 10 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (5 per 28 days)
carbamazepine oral capsule, er multiphase 12 hr	$0.00-$8.50 (Tier 2)	MO
carbamazepine oral suspension 100 mg/5 ml	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
carbamazepine oral suspension 200 mg/10 ml	$0.00-$8.50 (Tier 2)	
carbamazepine oral tablet	$0.00-$8.50 (Tier 2)	MO
carbamazepine oral tablet extended release 12 hr	$0.00-$8.50 (Tier 2)	MO
carbamazepine oral tablet,chewable	$0.00-$8.50 (Tier 2)	MO
carbidopa-levodopa	$0.00-$8.50 (Tier 2)	MO
carbidopa-levodopa-entacapone	$0.00-$8.50 (Tier 2)	MO
carisoprodol oral tablet 350 mg	$0.00-$8.50 (Tier 2)	PAR; MO
celecoxib	$0.00-$8.50 (Tier 2)	PAR; MO
CELONTIN ORAL CAPSULE 300 MG	$0.00-$8.50 (Tier 2)	MO
child ibuprofen	$0 (Tier 4)	[*]
children's ibuprofen	$0 (Tier 4)	[*]
children's mapap oral tablet,disintegrating	$0 (Tier 4)	[*]
children's pain-fever relief oral liquid	$0 (Tier 4)	[*]
chlorpromazine	$0.00-$8.50 (Tier 2)	MO
citalopram oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
citalopram oral tablet 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
citalopram oral tablet 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
citalopram oral tablet 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
clobazam oral suspension	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (480 per 30 days)
clobazam oral tablet 10 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)
clobazam oral tablet 20 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
clomipramine	$0.00-$8.50 (Tier 2)	PAR; MO
clonazepam oral tablet 0.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)
clonazepam oral tablet 1 mg	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
clonazepam oral tablet 2 mg	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
clonazepam oral tablet,disintegrating 0.125 mg	$0.00-$8.50 (Tier 2)	MO; QLL (4800 per 30 days)
clonazepam oral tablet,disintegrating 0.25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (2400 per 30 days)
clonazepam oral tablet,disintegrating 0.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
clonazepam oral tablet,disintegrating 1 mg	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
clonazepam oral tablet,disintegrating 2 mg	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
clorazepate dipotassium	$0.00-$8.50 (Tier 2)	MO
clozapine oral tablet 100 mg	$0 (Tier 1)	MO; QLL (270 per 30 days)
clozapine oral tablet 200 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
clozapine oral tablet 25 mg	$0 (Tier 1)	MO; QLL (1080 per 30 days)
clozapine oral tablet 50 mg	$0 (Tier 1)	MO; QLL (540 per 30 days)
clozapine oral tablet,disintegrating 100 mg	$0 (Tier 1)	QLL (270 per 30 days)
clozapine oral tablet,disintegrating 12.5 mg	$0 (Tier 1)	QLL (2160 per 30 days)
CLOZAPINE ORAL TABLET, DISINTEGRATING 150 MG	$0 (Tier 1)	NE; QLL (180 per 30 days)
CLOZAPINE ORAL TABLET, DISINTEGRATING 200 MG	$0 (Tier 1)	NE; QLL (120 per 30 days)
clozapine oral tablet,disintegrating 25 mg	$0 (Tier 1)	QLL (1080 per 30 days)
COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 28 days)
cyclobenzaprine oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO
dalfampridine	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
dantrolene	$0.00-$8.50 (Tier 2)	MO
desipramine	$0.00-$8.50 (Tier 2)	PAR; MO
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR 100 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24 HR 50 MG	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24HR 100 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
DESVENLAFAXINE ORAL TABLET EXTENDED RELEASE 24HR 50 MG	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
desvenlafaxine succinate oral tablet extended release 24 hr 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
desvenlafaxine succinate oral tablet extended release 24 hr 25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (480 per 30 days)
desvenlafaxine succinate oral tablet extended release 24 hr 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
dextroamphetamine oral capsule, extended release 10 mg, 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
dextroamphetamine oral capsule, extended release 15 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
dextroamphetamine oral tablet 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
dextroamphetamine oral tablet 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
dextroamphetamine-amphetamine oral tablet 30 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
DIASTAT	$0.00-$8.50 (Tier 2)	MO
DIASTAT ACUDIAL RECTAL KIT 12.5-15-17.5-20 MG	$0.00-$8.50 (Tier 2)	MO; NE
DIASTAT ACUDIAL RECTAL KIT 5-7.5-10 MG	$0.00-$8.50 (Tier 2)	MO
diazepam injection solution	$0.00-$8.50 (Tier 2)	
diazepam injection syringe	$0.00-$8.50 (Tier 2)	MO
diazepam intensol	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
diazepam oral concentrate	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
diazepam oral solution 5 mg/5 ml (1 mg/ml)	$0.00-$8.50 (Tier 2)	MO; QLL (1200 per 30 days)
diazepam oral solution 5 mg/5 ml (1 mg/ml, 5 ml)	$0.00-$8.50 (Tier 2)	QLL (1200 per 30 days)
diazepam oral tablet 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
diazepam oral tablet 2 mg	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
diazepam oral tablet 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
diazepam rectal	$0.00-$8.50 (Tier 2)	MO
diclofenac potassium	$0.00-$8.50 (Tier 2)	MO
diclofenac sodium oral	$0.00-$8.50 (Tier 2)	MO
diclofenac sodium topical gel 1 %	$0.00-$8.50 (Tier 2)	MO; QLL (1000 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
diflunisal	$0.00-$8.50 (Tier 2)	MO
dihydroergotamine nasal	$0.00-$8.50 (Tier 2)	MO; NE; QLL (8 per 28 days)
DILANTIN EXTENDED ORAL CAPSULE 100 MG	$0.00-$8.50 (Tier 2)	MO
DILANTIN INFATABS	$0.00-$8.50 (Tier 2)	MO
DILANTIN ORAL CAPSULE 30 MG	$0.00-$8.50 (Tier 2)	MO
diphenhydramine-acetaminophen	$0 (Tier 4)	[*]
divalproex	$0.00-$8.50 (Tier 2)	MO
donepezil oral tablet 10 mg, 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
donepezil oral tablet,disintegrating	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
doxepin oral	$0.00-$8.50 (Tier 2)	PAR; MO
duloxetine oral capsule,delayed release(dr/ec) 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 30 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
duloxetine oral capsule,delayed release(dr/ec) 60 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
duramorph (pf) injection solution 0.5 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
duramorph (pf) injection solution 1 mg/ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
ed-apap	$0 (Tier 4)	[*]
EMSAM	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
entacapone	$0.00-$8.50 (Tier 2)	MO
EPIDIOLEX	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
epitol	$0.00-$8.50 (Tier 2)	MO
ergoloid	$0.00-$8.50 (Tier 2)	PAR; MO
ERGOMAR	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
escitalopram oxalate oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
escitalopram oxalate oral tablet 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
escitalopram oxalate oral tablet 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
escitalopram oxalate oral tablet 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
ethosuximide	$0.00-$8.50 (Tier 2)	MO
etodolac oral capsule	$0.00-$8.50 (Tier 2)	MO
etodolac oral tablet	$0.00-$8.50 (Tier 2)	MO
FANAPT ORAL TABLET 1 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (720 per 30 days)
FANAPT ORAL TABLET 10 MG, 12 MG	$0.00-$8.50 (Tier 2)	ST; MO; NE; QLL (60 per 30 days)
FANAPT ORAL TABLET 2 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (360 per 30 days)
FANAPT ORAL TABLET 4 MG	$0.00-$8.50 (Tier 2)	ST; MO; NE; QLL (180 per 30 days)
FANAPT ORAL TABLET 6 MG	$0.00-$8.50 (Tier 2)	ST; MO; NE; QLL (120 per 30 days)
FANAPT ORAL TABLET 8 MG	$0.00-$8.50 (Tier 2)	ST; MO; NE; QLL (90 per 30 days)
FANAPT ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	ST; MO; QLL (16 per 365 days)
felbamate	$0.00-$8.50 (Tier 2)	MO
fenoprofen oral tablet	$0.00-$8.50 (Tier 2)	MO
fentanyl citrate	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (15 per 30 days)
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (56 per 365 days)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 80 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (180 per 30 days)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 40 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
fluoxetine oral capsule 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
fluoxetine oral capsule 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
fluoxetine oral capsule 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
fluoxetine oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
fluphenazine decanoate	$0 (Tier 1)	MO
fluphenazine hcl	$0 (Tier 1)	MO
flurbiprofen	$0.00-$8.50 (Tier 2)	MO
fluvoxamine oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
fluvoxamine oral tablet 25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
fluvoxamine oral tablet 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
fosphenytoin	$0.00-$8.50 (Tier 2)	MO
FYCOMPA ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	MO; QLL (720 per 30 days)
FYCOMPA ORAL TABLET 10 MG, 12 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
FYCOMPA ORAL TABLET 2 MG	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
FYCOMPA ORAL TABLET 4 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (90 per 30 days)
FYCOMPA ORAL TABLET 6 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
FYCOMPA ORAL TABLET 8 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (45 per 30 days)
gabapentin oral capsule 100 mg	$0 (Tier 1)	MO; QLL (1080 per 30 days)
gabapentin oral capsule 300 mg	$0 (Tier 1)	MO; QLL (360 per 30 days)
gabapentin oral capsule 400 mg	$0 (Tier 1)	MO; QLL (270 per 30 days)
gabapentin oral solution 250 mg/5 ml	$0.00-$8.50 (Tier 2)	MO; QLL (2160 per 30 days)
gabapentin oral solution 250 mg/5 ml (5 ml), 300 mg/6 ml (6 ml)	$0.00-$8.50 (Tier 2)	QLL (2160 per 30 days)
gabapentin oral tablet 600 mg	$0 (Tier 1)	MO; QLL (180 per 30 days)
gabapentin oral tablet 800 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
GEODON INTRAMUSCULAR	$0.00-$8.50 (Tier 2)	MO; QLL (6 per 28 days)
GILENYA ORAL CAPSULE 0.5 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
glatiramer subcutaneous syringe 20 mg/ml	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
glatiramer subcutaneous syringe 40 mg/ml	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 28 days)
glatopa subcutaneous syringe 20 mg/ml	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
glatopa subcutaneous syringe 40 mg/ml	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 28 days)
guanfacine oral tablet extended release 24 hr	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
guanidine	$0.00-$8.50 (Tier 2)	MO
haloperidol	$0 (Tier 1)	MO
haloperidol decanoate	$0 (Tier 1)	MO
haloperidol lactate injection	$0 (Tier 1)	MO
haloperidol lactate intramuscular	$0 (Tier 1)	
haloperidol lactate oral	$0 (Tier 1)	MO
HETLIOZ	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml	$0.00-$8.50 (Tier 2)	MO; QLL (2700 per 30 days)
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (50 per 10 days)
hydromorphone oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
ibu	$0.00-$8.50 (Tier 2)	MO
ibu-200	$0 (Tier 4)	[*]
ibuprofen jr strength	$0 (Tier 4)	[*]
ibuprofen oral capsule	$0 (Tier 4)	[*]
ibuprofen oral suspension	$0.00-$8.50 (Tier 2)	MO
ibuprofen oral suspension	$0 (Tier 4)	[*]
ibuprofen oral tablet 200 mg	$0 (Tier 4)	[*]
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	$0.00-$8.50 (Tier 2)	MO
imipramine hcl	$0.00-$8.50 (Tier 2)	PAR; MO
indomethacin oral	$0.00-$8.50 (Tier 2)	PAR; MO
infant's ibuprofen	$0 (Tier 4)	[*]
infants ibu-drops	$0 (Tier 4)	[*]
infants' pain and fever	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (0.75 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1.5 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	$0.00-$8.50 (Tier 2)	MO; QLL (0.25 per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (0.5 per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.875 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (0.875 per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.315 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1.315 per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1.75 per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.625 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (2.625 per 90 days)
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24HR 100 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (120 per 30 days)
KHEDEZLA ORAL TABLET EXTENDED RELEASE 24HR 50 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (240 per 30 days)
lamotrigine oral tablet	$0.00-$8.50 (Tier 2)	MO
lamotrigine oral tablet, chewable dispersible	$0.00-$8.50 (Tier 2)	MO
LATUDA ORAL TABLET 120 MG, 60 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
LATUDA ORAL TABLET 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
LATUDA ORAL TABLET 40 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
LATUDA ORAL TABLET 80 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
LEVETIRACETAM IN NACL (ISO-OS) INTRAVENOUS PIGGYBACK 1,000 MG/100 ML, 1,500 MG/100 ML	$0.00-$8.50 (Tier 2)	

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
LEVETIRACETAM IN NACL (ISO-OS) INTRAVENOUS PIGGYBACK 500 MG/100 ML	$0.00-$8.50 (Tier 2)	MO; NE
levetiracetam intravenous	$0.00-$8.50 (Tier 2)	MO
levetiracetam oral solution 100 mg/ml	$0.00-$8.50 (Tier 2)	MO
levetiracetam oral solution 500 mg/5 ml (5 ml)	$0.00-$8.50 (Tier 2)	
levetiracetam oral tablet	$0.00-$8.50 (Tier 2)	MO
levetiracetam oral tablet extended release 24 hr 500 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
levetiracetam oral tablet extended release 24 hr 750 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
levorphanol tartrate	$0.00-$8.50 (Tier 2)	MO; NE; QLL (180 per 30 days)
lithium carbonate	$0 (Tier 1)	MO
lithium citrate oral solution 8 meq/5 ml	$0.00-$8.50 (Tier 2)	MO
lorazepam intensol	$0.00-$8.50 (Tier 2)	MO
lorazepam oral	$0.00-$8.50 (Tier 2)	MO
loxapine succinate	$0.00-$8.50 (Tier 2)	MO
LYRICA ORAL CAPSULE 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (180 per 30 days)
LYRICA ORAL CAPSULE 150 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)
LYRICA ORAL CAPSULE 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
LYRICA ORAL CAPSULE 225 MG, 300 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
LYRICA ORAL CAPSULE 25 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (720 per 30 days)
LYRICA ORAL CAPSULE 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (360 per 30 days)
LYRICA ORAL CAPSULE 75 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (240 per 30 days)
LYRICA ORAL SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (900 per 30 days)
mapap (acetaminophen) oral capsule	$0 (Tier 4)	[*]
mapap (acetaminophen) oral liquid	$0 (Tier 4)	[*]
mapap (acetaminophen) oral suspension	$0 (Tier 4)	[*]
mapap (acetaminophen) oral tablet	$0 (Tier 4)	[*]
mapap arthritis pain	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
mapap extra strength	$0 (Tier 4)	[*]
mapap pm	$0 (Tier 4)	[*]
maprotiline oral tablet 25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (270 per 30 days)
maprotiline oral tablet 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (135 per 30 days)
maprotiline oral tablet 75 mg	$0.00-$8.50 (Tier 2)	MO
MARPLAN	$0.00-$8.50 (Tier 2)	MO
meclofenamate	$0.00-$8.50 (Tier 2)	MO
meloxicam oral tablet	$0.00-$8.50 (Tier 2)	MO
memantine oral capsule,sprinkle,er 24hr	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
memantine oral solution	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (300 per 30 days)
memantine oral tablet 10 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
memantine oral tablet 5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
MESTINON ORAL SYRUP	$0.00-$8.50 (Tier 2)	MO; NE
methadone injection solution	$0.00-$8.50 (Tier 2)	QLL (30 per 30 days)
methadone intensol	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
methadone oral concentrate	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
methadone oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (900 per 30 days)
methadone oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
methocarbamol oral	$0.00-$8.50 (Tier 2)	PAR; MO
methylphenidate hcl oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
mirtazapine oral tablet 15 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
mirtazapine oral tablet 30 mg	$0.00-$8.50 (Tier 2)	MO; QLL (45 per 30 days)
mirtazapine oral tablet 45 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
mirtazapine oral tablet 7.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
mirtazapine oral tablet,disintegrating 15 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
mirtazapine oral tablet,disintegrating 30 mg	$0.00-$8.50 (Tier 2)	MO; QLL (45 per 30 days)
mirtazapine oral tablet,disintegrating 45 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
modafinil oral tablet 100 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
modafinil oral tablet 200 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
molindone	$0.00-$8.50 (Tier 2)	
morphine (pf) injection solution 0.5 mg/ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine (pf) injection solution 1 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
morphine (pf) intravenous patient control.analgesia soln 150 mg/30 ml	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
morphine (pf) intravenous patient control.analgesia soln 30 mg/30 ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine concentrate oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
MORPHINE INJECTION SOLUTION 4 MG/ML	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine injection solution 8 mg/ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine injection syringe 10 mg/ml, 2 mg/ml, 4 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
morphine injection syringe 5 mg/ml, 8 mg/ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine intravenous solution 10 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
MORPHINE INTRAVENOUS SOLUTION 4 MG/ML, 8 MG/ML	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
morphine intravenous syringe 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	$0.00-$8.50 (Tier 2)	QLL (180 per 30 days)
morphine oral solution 20 mg/5 ml (4 mg/ml)	$0.00-$8.50 (Tier 2)	MO; QLL (900 per 30 days)
morphine oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
morphine oral tablet extended release 100 mg, 200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
morphine oral tablet extended release 15 mg, 30 mg, 60 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
nabumetone	$0.00-$8.50 (Tier 2)	MO
nalbuphine injection solution 10 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
nalbuphine injection solution 20 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
naloxone	$0 (Tier 1)	MO
naltrexone	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
NAMZARIC	$0.00-$8.50 (Tier 2)	PAR; MO
naproxen oral tablet	$0.00-$8.50 (Tier 2)	MO
naproxen oral tablet,delayed release (dr/ec)	$0.00-$8.50 (Tier 2)	MO
naproxen sodium oral tablet 220 mg	$0 (Tier 4)	[*]
naproxen sodium oral tablet 275 mg, 550 mg	$0.00-$8.50 (Tier 2)	MO
NARCAN NASAL SPRAY,NON-AEROSOL 4 MG/ACTUATION	$0.00-$8.50 (Tier 2)	MO
nefazodone oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
nefazodone oral tablet 150 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
nefazodone oral tablet 200 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
nefazodone oral tablet 250 mg	$0.00-$8.50 (Tier 2)	MO; QLL (72 per 30 days)
nefazodone oral tablet 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (360 per 30 days)
NEUPRO	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
non-aspirin pm	$0 (Tier 4)	[*]
nortriptyline oral capsule	$0.00-$8.50 (Tier 2)	PAR; MO
NORTRIPTYLINE ORAL SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO
NUEDEXTA	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
NUPLAZID ORAL CAPSULE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
NUPLAZID ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
NUPLAZID ORAL TABLET 17 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
olanzapine intramuscular	$0 (Tier 1)	MO; QLL (60 per 30 days)
olanzapine oral tablet 10 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
olanzapine oral tablet 15 mg	$0 (Tier 1)	MO; QLL (40 per 30 days)
olanzapine oral tablet 2.5 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
olanzapine oral tablet 20 mg	$0 (Tier 1)	MO; QLL (30 per 30 days)
olanzapine oral tablet 5 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
olanzapine oral tablet 7.5 mg	$0 (Tier 1)	MO; QLL (80 per 30 days)
olanzapine oral tablet,disintegrating 10 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
olanzapine oral tablet,disintegrating 15 mg	$0 (Tier 1)	MO; QLL (40 per 30 days)
olanzapine oral tablet,disintegrating 20 mg	$0 (Tier 1)	MO; QLL (30 per 30 days)
olanzapine oral tablet,disintegrating 5 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
ONFI ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (480 per 30 days)
ONFI ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
ONFI ORAL TABLET 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
oxaprozin	$0.00-$8.50 (Tier 2)	MO
oxcarbazepine	$0.00-$8.50 (Tier 2)	MO
oxycodone oral capsule	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
oxycodone oral concentrate	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
oxycodone oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
oxycodone-aspirin	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
pain and fever	$0 (Tier 4)	[*]
paliperidone oral tablet extended release 24hr 1.5 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
paliperidone oral tablet extended release 24hr 3 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
paliperidone oral tablet extended release 24hr 6 mg	$0 (Tier 1)	MO; NE; QLL (60 per 30 days)
paliperidone oral tablet extended release 24hr 9 mg	$0 (Tier 1)	MO; NE; QLL (30 per 30 days)
paroxetine hcl oral tablet 10 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
paroxetine hcl oral tablet 20 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
paroxetine hcl oral tablet 30 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
paroxetine hcl oral tablet 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (45 per 30 days)
PAXIL ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	MO; QLL (900 per 30 days)
PEGANONE	$0.00-$8.50 (Tier 2)	MO
perphenazine	$0 (Tier 1)	MO
phenelzine	$0.00-$8.50 (Tier 2)	MO
phenobarbital oral elixir	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (3000 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
phenobarbital oral tablet 100 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)
phenobarbital oral tablet 15 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (800 per 30 days)
phenobarbital oral tablet 16.2 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (741 per 30 days)
phenobarbital oral tablet 30 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (400 per 30 days)
phenobarbital oral tablet 32.4 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (370 per 30 days)
phenobarbital oral tablet 60 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (200 per 30 days)
phenobarbital oral tablet 64.8 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (185 per 30 days)
phenobarbital oral tablet 97.2 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (123 per 30 days)
PHENYTEK	$0.00-$8.50 (Tier 2)	MO
phenytoin oral suspension 100 mg/4 ml	$0.00-$8.50 (Tier 2)	
phenytoin oral suspension 125 mg/5 ml	$0.00-$8.50 (Tier 2)	MO
phenytoin oral tablet,chewable	$0.00-$8.50 (Tier 2)	MO
phenytoin sodium extended	$0.00-$8.50 (Tier 2)	MO
pimozide	$0.00-$8.50 (Tier 2)	MO
piroxicam	$0.00-$8.50 (Tier 2)	MO
pramipexole oral tablet	$0.00-$8.50 (Tier 2)	MO
primidone	$0.00-$8.50 (Tier 2)	MO
protriptyline	$0.00-$8.50 (Tier 2)	PAR; MO
pyridostigmine bromide oral tablet	$0.00-$8.50 (Tier 2)	MO
quetiapine oral tablet 100 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
quetiapine oral tablet 200 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
quetiapine oral tablet 25 mg	$0 (Tier 1)	MO; QLL (960 per 30 days)
quetiapine oral tablet 300 mg	$0 (Tier 1)	MO; QLL (80 per 30 days)
quetiapine oral tablet 400 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
quetiapine oral tablet 50 mg	$0 (Tier 1)	MO; QLL (480 per 30 days)
quetiapine oral tablet extended release 24 hr 150 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
quetiapine oral tablet extended release 24 hr 200 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
quetiapine oral tablet extended release 24 hr 300 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (80 per 30 days)
quetiapine oral tablet extended release 24 hr 400 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
quetiapine oral tablet extended release 24 hr 50 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (480 per 30 days)
rasagiline	$0.00-$8.50 (Tier 2)	MO
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
REXULTI ORAL TABLET 3 MG, 4 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
RISPERDAL CONSTA INTRAMUSCULAR SYRINGE 12.5 MG/2 ML, 25 MG/2 ML	$0.00-$8.50 (Tier 2)	MO; QLL (2 per 28 days)
RISPERDAL CONSTA INTRAMUSCULAR SYRINGE 37.5 MG/2 ML, 50 MG/2 ML	$0.00-$8.50 (Tier 2)	MO; NE; QLL (2 per 28 days)
risperidone oral solution	$0 (Tier 1)	MO; QLL (480 per 30 days)
risperidone oral tablet 0.25 mg	$0 (Tier 1)	MO; QLL (1920 per 30 days)
risperidone oral tablet 0.5 mg	$0 (Tier 1)	MO; QLL (960 per 30 days)
risperidone oral tablet 1 mg	$0 (Tier 1)	MO; QLL (480 per 30 days)
risperidone oral tablet 2 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
risperidone oral tablet 3 mg	$0 (Tier 1)	MO; QLL (150 per 30 days)
risperidone oral tablet 4 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
risperidone oral tablet,disintegrating 0.25 mg	$0 (Tier 1)	MO; QLL (1920 per 30 days)
risperidone oral tablet,disintegrating 0.5 mg	$0 (Tier 1)	MO; QLL (960 per 30 days)
risperidone oral tablet,disintegrating 1 mg	$0 (Tier 1)	MO; QLL (480 per 30 days)
risperidone oral tablet,disintegrating 2 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
risperidone oral tablet,disintegrating 3 mg	$0 (Tier 1)	MO; QLL (150 per 30 days)
risperidone oral tablet,disintegrating 4 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
rivastigmine tartrate	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
rivastigmine transdermal	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
rizatriptan	$0.00-$8.50 (Tier 2)	MO; QLL (12 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ropinirole oral tablet	$0.00-$8.50 (Tier 2)	MO
roweepra oral tablet 500 mg	$0.00-$8.50 (Tier 2)	MO
SABRIL ORAL POWDER IN PACKET	$0.00-$8.50 (Tier 2)	PAR; MO; LA; QLL (180 per 30 days)
SABRIL ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
SAPHRIS SUBLINGUAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
SAPHRIS SUBLINGUAL TABLET 2.5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
SAPHRIS SUBLINGUAL TABLET 5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
selegiline hcl	$0.00-$8.50 (Tier 2)	MO
sertraline oral concentrate	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
sertraline oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
sertraline oral tablet 25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
sertraline oral tablet 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
sleep aid (doxylamine)	$0 (Tier 4)	[*]
SPRITAM ORAL TABLET FOR SUSPENSION 1,000 MG, 250 MG, 500 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
SPRITAM ORAL TABLET FOR SUSPENSION 750 MG	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)
sulindac	$0.00-$8.50 (Tier 2)	MO
sumatriptan nasal spray	$0.00-$8.50 (Tier 2)	MO
sumatriptan succinate oral	$0.00-$8.50 (Tier 2)	MO; QLL (9 per 30 days)
sumatriptan succinate subcutaneous pen injector	$0.00-$8.50 (Tier 2)	MO
TECFIDERA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
temazepam oral capsule 15 mg, 30 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
tetrabenazine oral tablet 12.5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (240 per 30 days)
tetrabenazine oral tablet 25 mg	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
thioridazine	$0 (Tier 1)	ST; MO
thiothixene	$0 (Tier 1)	MO
tiagabine	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
tizanidine oral tablet	$0.00-$8.50 (Tier 2)	MO
tolcapone	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (180 per 30 days)
topiramate oral capsule, sprinkle	$0.00-$8.50 (Tier 2)	PAR; MO
topiramate oral tablet 100 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (480 per 30 days)
topiramate oral tablet 200 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (240 per 30 days)
topiramate oral tablet 25 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (1920 per 30 days)
topiramate oral tablet 50 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (960 per 30 days)
tramadol oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
tramadol-acetaminophen	$0.00-$8.50 (Tier 2)	MO; QLL (40 per 5 days)
tranylcypromine	$0.00-$8.50 (Tier 2)	MO
trazodone	$0.00-$8.50 (Tier 2)	MO
trifluoperazine	$0 (Tier 1)	MO
trihexyphenidyl	$0.00-$8.50 (Tier 2)	PAR; MO
trimipramine	$0.00-$8.50 (Tier 2)	PAR; MO
TRINTELLIX ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (60 per 30 days)
TRINTELLIX ORAL TABLET 20 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (30 per 30 days)
TRINTELLIX ORAL TABLET 5 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (120 per 30 days)
TYSABRI	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
valproate sodium	$0.00-$8.50 (Tier 2)	MO
valproic acid	$0.00-$8.50 (Tier 2)	MO
valproic acid (as sodium salt) oral solution 250 mg/5 ml	$0.00-$8.50 (Tier 2)	MO
valproic acid (as sodium salt) oral solution 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml)	$0.00-$8.50 (Tier 2)	
venlafaxine oral capsule,extended release 24hr 150 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
venlafaxine oral capsule,extended release 24hr 37.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
venlafaxine oral capsule,extended release 24hr 75 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
venlafaxine oral tablet 100 mg	$0.00-$8.50 (Tier 2)	MO; QLL (113 per 30 days)
venlafaxine oral tablet 25 mg	$0.00-$8.50 (Tier 2)	MO; QLL (450 per 30 days)
venlafaxine oral tablet 37.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
venlafaxine oral tablet 50 mg	$0.00-$8.50 (Tier 2)	MO; QLL (225 per 30 days)
venlafaxine oral tablet 75 mg	$0.00-$8.50 (Tier 2)	MO; QLL (150 per 30 days)
venlafaxine oral tablet extended release 24hr 150 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
venlafaxine oral tablet extended release 24hr 37.5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
venlafaxine oral tablet extended release 24hr 75 mg	$0.00-$8.50 (Tier 2)	MO; QLL (90 per 30 days)
vigabatrin	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (180 per 30 days)
VIIBRYD ORAL TABLET 10 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (120 per 30 days)
VIIBRYD ORAL TABLET 20 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (60 per 30 days)
VIIBRYD ORAL TABLET 40 MG	$0.00-$8.50 (Tier 2)	ST; MO; QLL (30 per 30 days)
VIMPAT INTRAVENOUS	$0.00-$8.50 (Tier 2)	QLL (1200 per 30 days)
VIMPAT ORAL SOLUTION	$0.00-$8.50 (Tier 2)	MO; NE; QLL (1200 per 30 days)
VIMPAT ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
VIMPAT ORAL TABLET 150 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
VIMPAT ORAL TABLET 200 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (60 per 30 days)
VIMPAT ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
VRAYLAR ORAL CAPSULE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (30 per 30 days)
VRAYLAR ORAL CAPSULE,DOSE PACK	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (14 per 365 days)
XYREM	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (540 per 30 days)
zaleplon oral capsule 10 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
zaleplon oral capsule 5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
zenzedi oral tablet 10 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (180 per 30 days)
zenzedi oral tablet 5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
ziprasidone hcl oral capsule 20 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
ziprasidone hcl oral capsule 40 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
ziprasidone hcl oral capsule 60 mg, 80 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
zolmitriptan	$0.00-$8.50 (Tier 2)	MO; QLL (9 per 30 days)
zolpidem oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)
zonisamide	$0.00-$8.50 (Tier 2)	MO
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 210 MG	$0.00-$8.50 (Tier 2)	MO; QLL (2 per 28 days)
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 300 MG, 405 MG	$0.00-$8.50 (Tier 2)	MO; NE; QLL (2 per 28 days)
CARDIOVASCULAR, HYPERTENSION / LIPIDS		
acebutolol	$0 (Tier 1)	MO
afeditab cr oral tablet extended release 30 mg	$0 (Tier 1)	MO
amiloride	$0.00-$8.50 (Tier 2)	MO
amiloride-hydrochlorothiazide	$0.00-$8.50 (Tier 2)	MO
amiodarone intravenous solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
amiodarone intravenous syringe	$0.00-$8.50 (Tier 2)	B/D PAR
amiodarone oral	$0.00-$8.50 (Tier 2)	MO
amlodipine besylate tablet	$0 (Tier 1)	MO
amlodipine-benazepril	$0 (Tier 1)	MO
amlodipine-olmesartan	$0.00-$8.50 (Tier 2)	MO
amlodipine-valsartan	$0.00-$8.50 (Tier 2)	MO
amlodipine-valsartan-hydrochlorothiazide	$0.00-$8.50 (Tier 2)	MO
aspirin-dipyridamole	$0.00-$8.50 (Tier 2)	ST; MO; QLL (60 per 30 days)
atenolol	$0 (Tier 1)	MO
atenolol-chlorthalidone	$0 (Tier 1)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
atorvastatin	$0 (Tier 1)	MO
benazepril	$0 (Tier 1)	MO
benazepril-hydrochlorothiazide	$0 (Tier 1)	MO
betaxolol oral	$0 (Tier 1)	MO
bisoprolol fumarate	$0 (Tier 1)	MO
bisoprolol-hydrochlorothiazide	$0 (Tier 1)	MO
BRILINTA	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
bumetanide	$0.00-$8.50 (Tier 2)	MO
candesartan	$0 (Tier 1)	MO
candesartan-hydrochlorothiazide	$0 (Tier 1)	MO
cartia xt	$0 (Tier 1)	MO
carvedilol	$0 (Tier 1)	MO
chlorothiazide oral tablet	$0.00-$8.50 (Tier 2)	MO
chlorthalidone oral tablet 25 mg, 50 mg	$0.00-$8.50 (Tier 2)	MO
cholestyramine (with sugar)	$0.00-$8.50 (Tier 2)	MO
cholestyramine light	$0.00-$8.50 (Tier 2)	MO
cilostazol	$0.00-$8.50 (Tier 2)	MO
clonidine hcl oral tablet	$0.00-$8.50 (Tier 2)	MO
clonidine transdermal patch	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 28 days)
clopidogrel oral tablet 300 mg	$0 (Tier 1)	MO; QLL (1 per 30 days)
clopidogrel oral tablet 75 mg	$0 (Tier 1)	MO; QLL (30 per 30 days)
colestipol	$0.00-$8.50 (Tier 2)	MO
CORLANOR	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
COUMADIN ORAL	$0.00-$8.50 (Tier 2)	MO
DEMSER	$0.00-$8.50 (Tier 2)	MO; NE
digitek oral tablet 125 mcg	$0.00-$8.50 (Tier 2)	MO
digitek oral tablet 250 mcg	$0.00-$8.50 (Tier 2)	PAR; MO
digox oral tablet 125 mcg	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
digox oral tablet 250 mcg	$0.00-$8.50 (Tier 2)	PAR; MO
digoxin oral solution 50 mcg/ml	$0.00-$8.50 (Tier 2)	MO
digoxin oral tablet 125 mcg	$0.00-$8.50 (Tier 2)	MO
digoxin oral tablet 250 mcg	$0.00-$8.50 (Tier 2)	PAR; MO
dilt-xr	$0 (Tier 1)	MO
diltiazem hcl intravenous solution	$0 (Tier 1)	
diltiazem hcl oral capsule,ext.rel 24h degradable	$0.00-$8.50 (Tier 2)	MO
diltiazem hcl oral capsule,extended release 12 hr	$0 (Tier 1)	MO
diltiazem hcl oral capsule,extended release 24 hr 120 mg, 240 mg, 300 mg	$0.00-$8.50 (Tier 2)	MO
diltiazem hcl oral capsule,extended release 24 hr 180 mg, 360 mg	$0 (Tier 1)	MO
diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	$0 (Tier 1)	MO
diltiazem hcl oral capsule,extended release 24hr 360 mg	$0.00-$8.50 (Tier 2)	MO
diltiazem hcl oral tablet	$0 (Tier 1)	MO
dofetilide	$0.00-$8.50 (Tier 2)	MO
doxazosin	$0 (Tier 1)	MO
ELIQUIS ORAL TABLET 2.5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
ELIQUIS ORAL TABLET 5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (74 per 30 days)
ELIQUIS ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	MO; QLL (74 per 180 days)
enalapril maleate	$0 (Tier 1)	MO
enalapril-hydrochlorothiazide	$0 (Tier 1)	MO
endur-acin oral tablet extended release 250 mg, 500 mg	$0 (Tier 4)	[*]
enoxaparin subcutaneous solution	$0.00-$8.50 (Tier 2)	MO; QLL (84 per 28 days)
enoxaparin subcutaneous syringe 100 mg/ml, 150 mg/ml	$0.00-$8.50 (Tier 2)	MO; QLL (28 per 28 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
enoxaparin subcutaneous syringe 120 mg/0.8 ml, 80 mg/0.8 ml	$0.00-$8.50 (Tier 2)	MO; QLL (22.4 per 28 days)
enoxaparin subcutaneous syringe 30 mg/0.3 ml	$0.00-$8.50 (Tier 2)	MO; QLL (8.4 per 28 days)
enoxaparin subcutaneous syringe 40 mg/0.4 ml	$0.00-$8.50 (Tier 2)	MO; QLL (11.2 per 28 days)
enoxaparin subcutaneous syringe 60 mg/0.6 ml	$0.00-$8.50 (Tier 2)	MO; QLL (16.8 per 28 days)
ENTRESTO	$0.00-$8.50 (Tier 2)	PAR; MO
eplerenone	$0.00-$8.50 (Tier 2)	MO
eprosartan	$0 (Tier 1)	MO
ezetimibe	$0.00-$8.50 (Tier 2)	MO
felodipine	$0 (Tier 1)	MO
fenofibrate micronized	$0.00-$8.50 (Tier 2)	MO
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	$0.00-$8.50 (Tier 2)	MO
fenofibrate oral tablet 160 mg, 54 mg	$0.00-$8.50 (Tier 2)	MO
fenofibric acid (choline) oral capsule,delayed release(dr/ec) 45 mg, 135 mg	$0.00-$8.50 (Tier 2)	MO
flecainide	$0.00-$8.50 (Tier 2)	MO
fondaparinux subcutaneous syringe 10 mg/0.8 ml	$0.00-$8.50 (Tier 2)	MO; NE; QLL (24 per 30 days)
fondaparinux subcutaneous syringe 2.5 mg/0.5 ml	$0.00-$8.50 (Tier 2)	MO; QLL (15 per 30 days)
fondaparinux subcutaneous syringe 5 mg/0.4 ml	$0.00-$8.50 (Tier 2)	MO; NE; QLL (12 per 30 days)
fondaparinux subcutaneous syringe 7.5 mg/0.6 ml	$0.00-$8.50 (Tier 2)	MO; NE; QLL (18 per 30 days)
fosinopril	$0 (Tier 1)	MO
fosinopril-hydrochlorothiazide	$0 (Tier 1)	MO
furosemide injection	$0.00-$8.50 (Tier 2)	MO
furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)	$0.00-$8.50 (Tier 2)	MO
furosemide oral tablet	$0 (Tier 1)	MO
gemfibrozil	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
heparin (porcine) in 5 % dex intravenous parenteral solution 20,000 unit/500 ml (40 unit/ml)	$0.00-$8.50 (Tier 2)	
heparin (porcine) in 5 % dex intravenous parenteral solution 25,000 unit/250 ml(100 unit/ml), 25,000 unit/500 ml (50 unit/ml)	$0.00-$8.50 (Tier 2)	MO
heparin (porcine) injection solution	$0.00-$8.50 (Tier 2)	B/D PAR; MO
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12, 500 UNIT/250 ML	$0.00-$8.50 (Tier 2)	B/D PAR
heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml	$0.00-$8.50 (Tier 2)	MO
heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/500 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO
heparin, porcine (pf) injection	$0.00-$8.50 (Tier 2)	MO
hydralazine	$0.00-$8.50 (Tier 2)	MO
hydrochlorothiazide	$0 (Tier 1)	MO
indapamide	$0.00-$8.50 (Tier 2)	MO
irbesartan	$0 (Tier 1)	MO
irbesartan-hydrochlorothiazide	$0 (Tier 1)	MO
isosorbide dinitrate oral tablet	$0.00-$8.50 (Tier 2)	MO
isosorbide dinitrate oral tablet extended release	$0.00-$8.50 (Tier 2)	
isosorbide mononitrate	$0.00-$8.50 (Tier 2)	MO
jantoven	$0.00-$8.50 (Tier 2)	MO
JUXTAPID	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
labetalol intravenous solution	$0 (Tier 1)	MO
labetalol oral	$0 (Tier 1)	MO
LANOXIN ORAL TABLET 62.5 MCG	$0.00-$8.50 (Tier 2)	MO
lidocaine (pf) intravenous solution	$0.00-$8.50 (Tier 2)	MO
lidocaine (pf) intravenous syringe 100 mg/5 ml (2 %)	$0.00-$8.50 (Tier 2)	

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
lisinopril	$0 (Tier 1)	MO
lisinopril-hydrochlorothiazide	$0 (Tier 1)	MO
losartan	$0 (Tier 1)	MO
losartan-hydrochlorothiazide	$0 (Tier 1)	MO
lovastatin	$0 (Tier 1)	MO
MEPHYTON	$0 (Tier 3)	[*]
methyclothiazide	$0.00-$8.50 (Tier 2)	MO
metolazone	$0.00-$8.50 (Tier 2)	MO
metoprolol succinate	$0 (Tier 1)	MO
metoprolol tartrate intravenous solution	$0 (Tier 1)	MO
metoprolol tartrate intravenous syringe	$0.00-$8.50 (Tier 2)	
metoprolol tartrate oral	$0 (Tier 1)	MO
metoprolol tartrate-hydrochlorothiazide	$0 (Tier 1)	MO
mexiletine	$0.00-$8.50 (Tier 2)	MO
minoxidil oral	$0.00-$8.50 (Tier 2)	MO
MULTAQ	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
nadolol	$0 (Tier 1)	MO
nadolol-bendroflumethiazide	$0 (Tier 1)	MO
niacin oral capsule, extended release 250 mg	$0 (Tier 4)	[*]
niacin oral tablet 100 mg, 50 mg, 500 mg	$0 (Tier 4)	[*]
niacin oral tablet extended release 24 hr	$0.00-$8.50 (Tier 2)	MO
niacin oral tablet extended release 250 mg, 500 mg	$0 (Tier 4)	[*]
NIACOR	$0.00-$8.50 (Tier 2)	MO
nicardipine oral	$0 (Tier 1)	MO
nifedipine oral tablet extended release	$0 (Tier 1)	MO
nifedipine oral tablet extended release 24hr	$0 (Tier 1)	MO
nimodipine	$0 (Tier 1)	MO
nitro-bid	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
nitroglycerin intravenous	$0.00-$8.50 (Tier 2)	B/D PAR
nitroglycerin sublingual	$0.00-$8.50 (Tier 2)	MO
nitroglycerin transdermal patch 24 hour	$0.00-$8.50 (Tier 2)	MO
olmesartan-amlodipine-hydrochlorothiazide	$0.00-$8.50 (Tier 2)	MO
omega-3 acid ethyl esters	$0.00-$8.50 (Tier 2)	MO
pacerone oral tablet 100 mg, 200 mg, 400 mg	$0.00-$8.50 (Tier 2)	MO
pentoxifylline	$0.00-$8.50 (Tier 2)	MO
pindolol	$0 (Tier 1)	MO
PRADAXA	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
PRALUENT PEN	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (2 per 28 days)
prasugrel	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
pravastatin	$0 (Tier 1)	MO
prazosin	$0 (Tier 1)	MO
prevalite	$0.00-$8.50 (Tier 2)	MO
procainamide injection solution 100 mg/ml	$0.00-$8.50 (Tier 2)	MO
procainamide injection solution 500 mg/ml	$0.00-$8.50 (Tier 2)	
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 75 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
PROMACTA ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (90 per 30 days)
propafenone oral tablet	$0.00-$8.50 (Tier 2)	MO
propranolol intravenous	$0 (Tier 1)	
propranolol oral	$0 (Tier 1)	MO
quinapril	$0 (Tier 1)	MO
quinapril-hydrochlorothiazide	$0 (Tier 1)	MO
quinidine sulfate oral tablet	$0.00-$8.50 (Tier 2)	MO
ramipril	$0 (Tier 1)	MO
RANEXA	$0.00-$8.50 (Tier 2)	ST; MO
REPATHA PUSHTRONEX	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (3.5 per 28 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
REPATHA SURECLICK	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (3 per 28 days)
REPATHA SYRINGE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (3 per 28 days)
rosuvastatin	$0.00-$8.50 (Tier 2)	MO
simvastatin	$0 (Tier 1)	MO
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 250 MG	$0 (Tier 4)	[*]
slo-niacin oral tablet extended release 500 mg	$0 (Tier 4)	[*]
sorine oral tablet 120 mg, 160 mg, 80 mg	$0 (Tier 1)	MO
sorine oral tablet 240 mg	$0 (Tier 1)	
sotalol af oral tablet 120 mg	$0 (Tier 1)	MO
sotalol af oral tablet 160 mg, 80 mg	$0.00-$8.50 (Tier 2)	MO
sotalol oral tablet 120 mg	$0.00-$8.50 (Tier 2)	MO
sotalol oral tablet 160 mg, 240 mg, 80 mg	$0 (Tier 1)	MO
spironolactone	$0.00-$8.50 (Tier 2)	MO
spironolactone-hydrochlorothiazide	$0.00-$8.50 (Tier 2)	MO
taztia xt	$0 (Tier 1)	MO
TEKTURNA	$0.00-$8.50 (Tier 2)	MO
telmisartan	$0.00-$8.50 (Tier 2)	MO
telmisartan-amlodipine oral tablet 80-5 mg	$0.00-$8.50 (Tier 2)	MO
telmisartan-hydrochlorothiazide	$0.00-$8.50 (Tier 2)	MO
terazosin capsule	$0 (Tier 1)	MO
timolol maleate oral	$0 (Tier 1)	MO
torsemide oral	$0.00-$8.50 (Tier 2)	MO
trandolapril	$0 (Tier 1)	MO
triamterene-hydrochlorothiazide oral capsule 37.5-25 mg	$0.00-$8.50 (Tier 2)	MO
triamterene-hydrochlorothiazide oral tablet	$0.00-$8.50 (Tier 2)	MO
UPTRAVI ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
UPTRAVI ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (400 per 365 days)
valsartan	$0.00-$8.50 (Tier 2)	MO
valsartan-hydrochlorothiazide	$0 (Tier 1)	MO
VASCEPA	$0.00-$8.50 (Tier 2)	MO
VECAMYL	$0.00-$8.50 (Tier 2)	
verapamil intravenous solution	$0 (Tier 1)	MO
verapamil oral capsule, 24 hr er pellet ct	$0 (Tier 1)	MO
verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg	$0 (Tier 1)	MO
verapamil oral capsule,ext rel. pellets 24 hr 360 mg	$0.00-$8.50 (Tier 2)	MO
verapamil oral tablet	$0 (Tier 1)	MO
verapamil oral tablet extended release	$0 (Tier 1)	MO
vitamin k1 injection	$0 (Tier 3)	[*]
warfarin	$0 (Tier 1)	MO
XARELTO ORAL TABLET 10 MG, 20 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
XARELTO ORAL TABLET 15 MG	$0.00-$8.50 (Tier 2)	MO; QLL (42 per 30 days)
XARELTO ORAL TABLET 2.5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
XARELTO ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	MO; QLL (102 per 365 days)
DERMATOLOGICALS/TOPICAL THERAPY		
acitretin oral capsule 10 mg	$0.00-$8.50 (Tier 2)	MO
acitretin oral capsule 17.5 mg, 25 mg	$0.00-$8.50 (Tier 2)	MO; NE
ACNE MEDICATION	$0 (Tier 4)	[*]
acyclovir topical	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
adapalene topical gel 0.3 %	$0.00-$8.50 (Tier 2)	MO
ala-cort topical cream	$0.00-$8.50 (Tier 2)	MO
alclometasone	$0.00-$8.50 (Tier 2)	MO
amcinonide topical cream	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
amcinonide topical lotion	$0.00-$8.50 (Tier 2)	MO
amcinonide topical ointment	$0.00-$8.50 (Tier 2)	
ammonium lactate	$0.00-$8.50 (Tier 2)	MO
antifungal (tolnaftate) topical cream	$0 (Tier 4)	[*]
antifungal (tolnaftate) topical powder	$0 (Tier 4)	[*]
antifungal cream (miconazole)	$0 (Tier 4)	[*]
antifungal spray	$0 (Tier 4)	[*]
bacitracin topical ointment	$0 (Tier 4)	[*]
bacitracin zinc topical ointment	$0 (Tier 4)	[*]
benzoyl peroxide topical cleanser 10 %, 5 %	$0 (Tier 4)	[*]
benzoyl peroxide topical foam	$0 (Tier 4)	[*]
benzoyl peroxide topical gel 10 %, 2.5 %, 5 %	$0 (Tier 4)	[*]
betamethasone dipropionate	$0.00-$8.50 (Tier 2)	MO
betamethasone valerate topical cream	$0.00-$8.50 (Tier 2)	MO
betamethasone valerate topical lotion	$0.00-$8.50 (Tier 2)	MO
betamethasone valerate topical ointment	$0.00-$8.50 (Tier 2)	MO
betamethasone, augmented topical cream	$0.00-$8.50 (Tier 2)	MO
betamethasone, augmented topical lotion	$0.00-$8.50 (Tier 2)	MO
betamethasone, augmented topical ointment	$0.00-$8.50 (Tier 2)	MO
blue gel	$0 (Tier 4)	[*]
calcipotriene scalp	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
calcipotriene topical	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
CAPEX	$0.00-$8.50 (Tier 2)	MO
capsaicin topical cream 0.025 %	$0 (Tier 4)	[*]
ciclodan topical solution	$0.00-$8.50 (Tier 2)	MO
ciclopirox	$0.00-$8.50 (Tier 2)	MO
claravis	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate topical foam	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
clindamycin phosphate topical gel	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate topical lotion	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate topical solution	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate topical swab	$0.00-$8.50 (Tier 2)	MO
clobetasol scalp	$0.00-$8.50 (Tier 2)	MO
clobetasol topical cream	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
clobetasol-emollient topical cream	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
clotrimazole topical	$0.00-$8.50 (Tier 2)	MO
clotrimazole topical	$0 (Tier 4)	[*]
clotrimazole-betamethasone topical cream	$0.00-$8.50 (Tier 2)	MO
COATS ALOE MOISTURIZING	$0 (Tier 4)	[*]
COATS ALOE TOPICAL CREAM	$0 (Tier 4)	[*]
COATS ALOE TOPICAL GEL	$0 (Tier 4)	[*]
COLEMAN BOTANICALS INSECT	$0 (Tier 4)	[*]
COLEMAN HIGH-DRY INSECT REPEL	$0 (Tier 4)	[*]
COLEMAN SKINSMART INSECT REP	$0 (Tier 4)	[*]
CUTTER BACKWOODS	$0 (Tier 4)	[*]
CUTTER BACKWOODS DRY	$0 (Tier 4)	[*]
CUTTER LEMON EUCALYPTUS	$0 (Tier 4)	[*]
DENAVIR	$0.00-$8.50 (Tier 2)	MO; NE; QLL (5 per 30 days)
desoximetasone topical cream	$0.00-$8.50 (Tier 2)	MO
desoximetasone topical gel	$0.00-$8.50 (Tier 2)	MO
desoximetasone topical ointment	$0.00-$8.50 (Tier 2)	MO
dibucaine	$0 (Tier 4)	[*]
DR. SMITH'S DIAPER	$0 (Tier 4)	[*]
DR. SMITH'S DIAPER RASH	$0 (Tier 4)	[*]
ELIDEL	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (100 per 90 days)
ery pads	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
erythromycin with ethanol	$0.00-$8.50 (Tier 2)	MO
erythromycin-benzoyl peroxide	$0.00-$8.50 (Tier 2)	MO
fluocinolone and shower cap	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
fluocinolone topical cream 0.01 %	$0.00-$8.50 (Tier 2)	MO
fluocinolone topical cream 0.025 %	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
fluocinolone topical oil	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
fluocinolone topical ointment	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
fluocinolone topical solution	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
fluocinonide topical cream 0.05 %	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
fluocinonide topical gel	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
fluocinonide topical ointment	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
fluocinonide topical solution	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
fluocinonide-e	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
FLUOCINONIDE-EMOLLIENT	$0.00-$8.50 (Tier 2)	QLL (240 per 30 days)
fluorouracil topical cream 5 %	$0.00-$8.50 (Tier 2)	MO
fluorouracil topical solution	$0.00-$8.50 (Tier 2)	MO
fluticasone topical	$0.00-$8.50 (Tier 2)	MO
fungoid tincture topical tincture	$0 (Tier 4)	[*]
gentamicin topical	$0.00-$8.50 (Tier 2)	MO
halobetasol propionate	$0.00-$8.50 (Tier 2)	MO
hydrocortisone topical cream 0.5 %, 1 %	$0 (Tier 4)	[*]
hydrocortisone topical cream 1 %, 2.5 %	$0.00-$8.50 (Tier 2)	MO
hydrocortisone topical cream in packet	$0 (Tier 4)	[*]
hydrocortisone topical lotion 2.5 %	$0.00-$8.50 (Tier 2)	MO
hydrocortisone topical ointment 0.5 %, 1 %	$0 (Tier 4)	[*]
hydrocortisone topical ointment 1 %, 2.5 %	$0.00-$8.50 (Tier 2)	MO
hydrocortisone valerate	$0.00-$8.50 (Tier 2)	MO
hydrocortisone-aloe vera topical cream 1 %	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
imiquimod topical cream in packet	$0.00-$8.50 (Tier 2)	MO
INSECT REPELLENT (PICARIDIN)	$0 (Tier 4)	[*]
ketoconazole topical cream	$0.00-$8.50 (Tier 2)	MO
ketoconazole topical shampoo	$0.00-$8.50 (Tier 2)	MO
lice treatment topical liquid 1 %	$0 (Tier 4)	[*]
lidocaine (pf) injection solution 15 mg/ml (1.5 %)	$0.00-$8.50 (Tier 2)	
lidocaine (pf) injection solution 20 mg/ml (2 %), 40 mg/ml (4 %), 5 mg/ml (0.5 %)	$0.00-$8.50 (Tier 2)	MO
lidocaine hcl injection solution 10 mg/ml (1 %), 20 mg/ml (2 %)	$0.00-$8.50 (Tier 2)	MO
lidocaine hcl laryngotracheal	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 30 days)
lidocaine hcl mucous membrane jelly	$0.00-$8.50 (Tier 2)	PAR; MO
lidocaine hcl mucous membrane jelly in applicator	$0.00-$8.50 (Tier 2)	MO
lidocaine hcl mucous membrane solution 4 % (40 mg/ml)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (300 per 30 days)
lidocaine topical adhesive patch,medicated	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (90 per 30 days)
lidocaine topical ointment	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
lidocaine viscous	$0.00-$8.50 (Tier 2)	PAR; MO
lidocaine-prilocaine topical cream	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
lindane topical shampoo	$0.00-$8.50 (Tier 2)	MO
mafenide acetate	$0.00-$8.50 (Tier 2)	MO
methoxsalen	$0.00-$8.50 (Tier 2)	PAR; MO; NE
metronidazole topical cream	$0.00-$8.50 (Tier 2)	MO
metronidazole topical gel 0.75 %	$0.00-$8.50 (Tier 2)	MO
metronidazole topical lotion	$0.00-$8.50 (Tier 2)	MO
miconazole nitrate topical cream	$0 (Tier 4)	[*]
MOISTUREL THERAPEUTIC	$0 (Tier 4)	[*]
mometasone topical	$0.00-$8.50 (Tier 2)	MO
mupirocin topical cream	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
mupirocin topical ointment	$0.00-$8.50 (Tier 2)	MO
myorisan	$0.00-$8.50 (Tier 2)	MO
NATRAPEL	$0 (Tier 4)	[*]
nyamyc	$0.00-$8.50 (Tier 2)	MO
nystatin topical	$0.00-$8.50 (Tier 2)	MO
nystatin-triamcinolone topical cream	$0.00-$8.50 (Tier 2)	MO
nystop	$0.00-$8.50 (Tier 2)	MO
OFF DEEP WOODS	$0 (Tier 4)	[*]
OFF DEEP WOODS DRY	$0 (Tier 4)	[*]
OFF DEEP WOODS SPORTSMEN TOPICAL AEROSOL,SPRAY	$0 (Tier 4)	[*]
OFF DEEP WOODS SPORTSMEN TOPICAL SPRAY,NON-AEROSOL 25 %	$0 (Tier 4)	[*]
PAIN RELIEVING (M-SALIC-MEN)	$0 (Tier 4)	[*]
PANRETIN	$0.00-$8.50 (Tier 2)	MO; NE
permethrin topical cream	$0.00-$8.50 (Tier 2)	MO
PICATO	$0.00-$8.50 (Tier 2)	MO; NE
podofilox	$0.00-$8.50 (Tier 2)	MO
povidone-iodine topical ointment	$0 (Tier 4)	[*]
povidone-iodine topical solution 10 %	$0 (Tier 4)	[*]
REPEL HUNTER'S	$0 (Tier 4)	[*]
REPEL LEMON EUCALYPTUS	$0 (Tier 4)	[*]
REPEL SPORTSMEN	$0 (Tier 4)	[*]
REPEL SPORTSMEN DRY	$0 (Tier 4)	[*]
REPEL SPORTSMEN MAX TOPICAL AEROSOL,SPRAY	$0 (Tier 4)	[*]
rosadan topical cream	$0.00-$8.50 (Tier 2)	MO
SANTYL	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
selenium sulfide topical lotion	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
silver sulfadiazine	$0.00-$8.50 (Tier 2)	MO
ssd	$0.00-$8.50 (Tier 2)	MO
sulfacetamide sodium (acne)	$0.00-$8.50 (Tier 2)	MO
SULFAMYLON TOPICAL CREAM	$0.00-$8.50 (Tier 2)	MO
tacrolimus topical	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (100 per 90 days)
tazarotene	$0.00-$8.50 (Tier 2)	PAR; MO
TAZORAC TOPICAL CREAM 0.05 %	$0.00-$8.50 (Tier 2)	PAR; MO
TAZORAC TOPICAL GEL	$0.00-$8.50 (Tier 2)	PAR; MO
terbinafine hcl topical	$0 (Tier 4)	[*]
tolnaftate topical cream	$0 (Tier 4)	[*]
tolnaftate topical powder	$0 (Tier 4)	[*]
tretinoin topical cream	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (45 per 30 days)
tretinoin topical gel 0.01 %, 0.025 %	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (45 per 30 days)
triamcinolone acetonide topical cream	$0.00-$8.50 (Tier 2)	MO
triamcinolone acetonide topical lotion	$0.00-$8.50 (Tier 2)	MO
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	$0.00-$8.50 (Tier 2)	MO
triderm topical cream	$0.00-$8.50 (Tier 2)	MO
triple antibiotic plus	$0 (Tier 4)	[*]
triple antibiotic topical ointment	$0 (Tier 4)	[*]
triple antibiotic topical ointment in packet	$0 (Tier 4)	[*]
ULTRATHON TOPICAL AEROSOL,SPRAY	$0 (Tier 4)	[*]
UVADEX	$0.00-$8.50 (Tier 2)	B/D PAR
VALCHLOR	$0.00-$8.50 (Tier 2)	PAR; MO; NE
vits a and d-white pet-lanolin topical ointment	$0 (Tier 4)	[*]
white petrolatum topical ointment	$0 (Tier 4)	[*]
white petrolatum topical ointment in packet	$0 (Tier 4)	[*]
Z-BUM	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
zeasorb (miconazole)	$0 (Tier 4)	[*]
zenatane	$0.00-$8.50 (Tier 2)	MO
zinc oxide topical ointment 20 %	$0 (Tier 4)	[*]
DIAGNOSTICS / MISCELLANEOUS AGENTS		
acamprosate	$0.00-$8.50 (Tier 2)	MO; QLL (180 per 30 days)
acetylcysteine intravenous	$0.00-$8.50 (Tier 2)	MO
ADAGEN	$0.00-$8.50 (Tier 2)	MO; NE
alendronate oral tablet 40 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
anagrelide	$0.00-$8.50 (Tier 2)	MO
ARALAST NP	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
BUPHENYL ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; NE
bupropion hcl (smoking deter)	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
CALCIUM WITH BORON	$0 (Tier 4)	[*]
CARBAGLU	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
CHANTIX	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
CHANTIX CONTINUING MONTH BOX	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (56 per 28 days)
CHANTIX STARTING MONTH BOX	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (106 per 365 days)
CLINIMIX 4.25%/D5W SULFIT FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 2.75%/D10W SUL FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 2.75%/D5W SULF FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX N9G20E 2.75%-D10W(SF)	$0.00-$8.50 (Tier 2)	B/D PAR
complete premium vitamin	$0 (Tier 4)	[*]
cranberry urinary comfort	$0 (Tier 4)	[*]
d10 %-0.45 % sodium chloride	$0.00-$8.50 (Tier 2)	
d2.5 %-0.45 % sodium chloride	$0.00-$8.50 (Tier 2)	
d5 % and 0.9 % sodium chloride	$0.00-$8.50 (Tier 2)	MO
d5 %-0.45 % sodium chloride	$0.00-$8.50 (Tier 2)	MO
dextrose 10 % and 0.2 % nacl	$0.00-$8.50 (Tier 2)	

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
dextrose 10 % in water (d10w)	$0.00-$8.50 (Tier 2)	MO
dextrose 20 % in water (d20w)	$0.00-$8.50 (Tier 2)	
dextrose 25 % in water (d25w)	$0.00-$8.50 (Tier 2)	
dextrose 30 % in water (d30w)	$0.00-$8.50 (Tier 2)	
dextrose 40 % in water (d40w)	$0.00-$8.50 (Tier 2)	
dextrose 5 % in water (d5w)	$0.00-$8.50 (Tier 2)	MO
dextrose 5 %-lactated ringers	$0.00-$8.50 (Tier 2)	MO
dextrose 5%-0.2 % sod chloride	$0.00-$8.50 (Tier 2)	
dextrose 5%-0.3 % sod.chloride	$0.00-$8.50 (Tier 2)	
dextrose 50 % in water (d50w)	$0.00-$8.50 (Tier 2)	MO
dextrose 70 % in water (d70w)	$0.00-$8.50 (Tier 2)	MO
dextrose with sodium chloride	$0.00-$8.50 (Tier 2)	
disulfiram	$0.00-$8.50 (Tier 2)	MO
EXJADE	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
INCRELEX	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
kionex (with sorbitol)	$0.00-$8.50 (Tier 2)	MO
lactated ringers irrigation	$0.00-$8.50 (Tier 2)	MO
levocarnitine (with sugar)	$0.00-$8.50 (Tier 2)	B/D PAR; MO
levocarnitine oral tablet	$0.00-$8.50 (Tier 2)	MO
midodrine	$0.00-$8.50 (Tier 2)	MO
neomycin-polymyxin b gu irrigation solution	$0.00-$8.50 (Tier 2)	MO
NICODERM CQ	$0 (Tier 4)	[*]; QLL (30 per 30 days)
nicorelief	$0 (Tier 4)	[*]
NICORETTE BUCCAL GUM	$0 (Tier 4)	[*]
NICORETTE BUCCAL LOZENGE	$0 (Tier 4)	[*]; QLL (20 per 1 day)
NICORETTE BUCCAL MINI LOZENGE	$0 (Tier 4)	[*]; QLL (20 per 1 day)
nicotine (polacrilex) buccal gum	$0 (Tier 4)	[*]
nicotine (polacrilex) buccal lozenge	$0 (Tier 4)	[*]; QLL (20 per 1 day)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr	$0 (Tier 4)	[*]; QLL (30 per 30 days)
nicotine transdermal patch, td daily, sequential	$0 (Tier 4)	[*]
NICOTROL NS	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
NORTHERA ORAL CAPSULE 100 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (540 per 30 days)
NORTHERA ORAL CAPSULE 200 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (270 per 30 days)
NORTHERA ORAL CAPSULE 300 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (180 per 30 days)
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	$0.00-$8.50 (Tier 2)	PAR; LA; NE
ORFADIN ORAL CAPSULE 20 MG	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
ORFADIN ORAL SUSPENSION	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
pilocarpine hcl oral	$0.00-$8.50 (Tier 2)	MO
PROLASTIN-C INTRAVENOUS SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; NE
RAVICTI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (525 per 30 days)
riluzole	$0.00-$8.50 (Tier 2)	MO
ringer's irrigation	$0.00-$8.50 (Tier 2)	MO
sevelamer carbonate oral powder in packet 0.8 gram	$0.00-$8.50 (Tier 2)	MO; NE; QLL (540 per 30 days)
sevelamer carbonate oral powder in packet 2.4 gram	$0.00-$8.50 (Tier 2)	MO; NE; QLL (180 per 30 days)
sevelamer carbonate oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (540 per 30 days)
sodium chloride 0.9 % intravenous	$0.00-$8.50 (Tier 2)	MO
sodium chloride irrigation	$0.00-$8.50 (Tier 2)	MO
sodium phenylbutyrate oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO; NE
sodium polystyrene (sorb free)	$0.00-$8.50 (Tier 2)	MO
sodium polystyrene sulfonate oral	$0.00-$8.50 (Tier 2)	MO
sodium polystyrene sulfonate rectal enema 30 gram/ 120 ml	$0.00-$8.50 (Tier 2)	
SODIUM POLYSTYRENE SULFONATE RECTAL ENEMA 50 GRAM/200 ML	$0.00-$8.50 (Tier 2)	
sps (with sorbitol) oral	$0.00-$8.50 (Tier 2)	MO
sps (with sorbitol) rectal	$0.00-$8.50 (Tier 2)	

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SUSPENDOL-S	$0 (Tier 4)	[*]
trientine	$0.00-$8.50 (Tier 2)	MO; NE
VELPHORO	$0.00-$8.50 (Tier 2)	MO; NE; QLL (180 per 30 days)
water for irrigation, sterile	$0.00-$8.50 (Tier 2)	MO
EAR, NOSE / THROAT MEDICATIONS		
acetic acid otic (ear)	$0.00-$8.50 (Tier 2)	MO
azelastine nasal	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 25 days)
chlorhexidine gluconate mucous membrane	$0.00-$8.50 (Tier 2)	MO
CIPRODEX	$0.00-$8.50 (Tier 2)	MO
COLY-MYCIN S	$0.00-$8.50 (Tier 2)	MO
deep sea nasal	$0 (Tier 4)	[*]
ear drops (carbamide peroxide)	$0 (Tier 4)	[*]
fluocinolone acetonide oil otic (ear)	$0.00-$8.50 (Tier 2)	MO
hydrocortisone-acetic acid	$0.00-$8.50 (Tier 2)	MO
ipratropium bromide nasal	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
nasal decongestant (oxymetazl)	$0 (Tier 4)	[*]
nasal spray 12 hour nasal spray,non-aerosol	$0 (Tier 4)	[*]
neomycin-polymyxin-hc otic (ear)	$0.00-$8.50 (Tier 2)	MO
ofloxacin otic (ear)	$0.00-$8.50 (Tier 2)	MO
paroex oral rinse	$0.00-$8.50 (Tier 2)	MO
periogard	$0.00-$8.50 (Tier 2)	MO
triamcinolone acetonide dental	$0.00-$8.50 (Tier 2)	MO
ENDOCRINE/DIABETES		
acarbose oral tablet 100 mg	$0 (Tier 1)	MO; QLL (90 per 30 days)
acarbose oral tablet 25 mg	$0 (Tier 1)	MO; QLL (360 per 30 days)
acarbose oral tablet 50 mg	$0 (Tier 1)	MO; QLL (180 per 30 days)
ACTHAR H.P.	$0.00-$8.50 (Tier 2)	PAR; MO; NE
alcohol pads	$0 (Tier 1)	MO

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ALDURAZYME	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ANADROL-50	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ANDROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP 20.25 MG/1.25 GRAM (1.62 %)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
ANDROGEL TRANSDERMAL GEL IN PACKET 1.62 % (20.25 MG/1.25 GRAM)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (112.5 per 30 days)
ANDROGEL TRANSDERMAL GEL IN PACKET 1.62 % (40.5 MG/2.5 GRAM)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
BYDUREON	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 28 days)
BYDUREON BCISE	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 28 days)
BYETTA SUBCUTANEOUS PEN INJECTOR 10 MCG/DOSE(250 MCG/ML) 2.4 ML	$0.00-$8.50 (Tier 2)	MO; QLL (2.4 per 30 days)
BYETTA SUBCUTANEOUS PEN INJECTOR 5 MCG/DOSE (250 MCG/ML) 1.2 ML	$0.00-$8.50 (Tier 2)	MO; QLL (1.2 per 30 days)
cabergoline	$0.00-$8.50 (Tier 2)	MO
calcitonin (salmon)	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 30 days)
calcitriol intravenous solution 1 mcg/ml	$0.00-$8.50 (Tier 2)	MO
calcitriol oral capsule	$0.00-$8.50 (Tier 2)	MO
CERDELGA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
CEREZYME INTRAVENOUS RECON SOLN 400 UNIT	$0.00-$8.50 (Tier 2)	PAR; MO; NE
cortisone tablet	$0.00-$8.50 (Tier 2)	MO
CYCLOSET	$0.00-$8.50 (Tier 2)	ST; MO; QLL (180 per 30 days)
danazol	$0.00-$8.50 (Tier 2)	MO
desmopressin injection	$0.00-$8.50 (Tier 2)	MO
desmopressin nasal spray with pump	$0.00-$8.50 (Tier 2)	MO
desmopressin nasal spray,non-aerosol	$0.00-$8.50 (Tier 2)	MO
desmopressin oral	$0.00-$8.50 (Tier 2)	MO
dexamethasone oral elixir	$0.00-$8.50 (Tier 2)	MO

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dexamethasone oral solution	$0.00-$8.50 (Tier 2)	MO
dexamethasone oral tablet	$0.00-$8.50 (Tier 2)	MO
dexamethasone sodium phos (pf)	$0.00-$8.50 (Tier 2)	MO
dexamethasone sodium phosphate injection	$0.00-$8.50 (Tier 2)	MO
doxercalciferol oral capsule 0.5 mcg	$0.00-$8.50 (Tier 2)	B/D PAR; MO
ELAPRASE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
FABRAZYME	$0.00-$8.50 (Tier 2)	PAR; MO; NE
fludrocortisone	$0.00-$8.50 (Tier 2)	MO
GAUZE PADS 2 X 2	$0 (Tier 1)	MO; QLL (200 per 30 days)
glimepiride oral tablet 1 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
glimepiride oral tablet 2 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
glimepiride oral tablet 4 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
glipizide oral tablet 10 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
glipizide oral tablet 5 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
glipizide oral tablet extended release 24hr 10 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
glipizide oral tablet extended release 24hr 2.5 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
glipizide oral tablet extended release 24hr 5 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
glipizide-metformin oral tablet 2.5-250 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
glipizide-metformin oral tablet 2.5-500 mg, 5-500 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
GLUCAGEN HYPOKIT	$0 (Tier 1)	MO
GLUCAGON EMERGENCY KIT (HUMAN)	$0 (Tier 1)	MO
glyburide oral tablet 1.25 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (480 per 30 days)
glyburide oral tablet 2.5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (240 per 30 days)
glyburide oral tablet 5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (120 per 30 days)
HUMALOG JUNIOR KWIKPEN U-100	$0 (Tier 1)	MO
HUMALOG KWIKPEN INSULIN	$0 (Tier 1)	MO
HUMALOG MIX 50-50 INSULN U-100	$0 (Tier 1)	MO

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HUMALOG MIX 50-50 KWIKPEN	$0 (Tier 1)	MO
HUMALOG MIX 75-25 KWIKPEN	$0 (Tier 1)	MO
HUMALOG MIX 75-25(U-100)INSULN	$0 (Tier 1)	MO
HUMALOG U-100 INSULIN	$0 (Tier 1)	MO
HUMULIN 70/30 U-100 INSULIN	$0 (Tier 1)	MO
HUMULIN 70/30 U-100 KWIKPEN	$0 (Tier 1)	MO
HUMULIN N NPH INSULIN KWIKPEN	$0 (Tier 1)	MO
HUMULIN N NPH U-100 INSULIN	$0 (Tier 1)	MO
HUMULIN R REGULAR U-100 INSULN	$0 (Tier 1)	MO
HUMULIN R U-500 (CONC) INSULIN	$0 (Tier 1)	PAR; MO; NE
HUMULIN R U-500 (CONC) KWIKPEN	$0 (Tier 1)	PAR; MO; NE
hydrocortisone oral	$0.00-$8.50 (Tier 2)	MO
insulin pen needle	$0 (Tier 1)	MO; QLL (200 per 30 days)
INSULIN SYRINGE (DISP) U-100 0.3 ML, 1 ML, 1/2 ML	$0 (Tier 1)	MO; QLL (200 per 30 days)
IOSAT	$0 (Tier 4)	[*]
JANUMET	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 100-1,000 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
JANUMET XR ORAL TABLET, ER MULTIPHASE 24 HR 50-1,000 MG, 50-500 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
JANUVIA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
JANUVIA ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
JANUVIA ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
JARDIANCE	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
JENTADUETO	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
JENTADUETO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
KORLYM	$0.00-$8.50 (Tier 2)	PAR; MO; NE
KUVAN ORAL TABLET,SOLUBLE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
LANTUS SOLOSTAR U-100 INSULIN	$0 (Tier 1)	MO
LANTUS U-100 INSULIN	$0 (Tier 1)	MO
LEVEMIR FLEXTOUCH U-100 INSULN	$0 (Tier 1)	MO
LEVEMIR U-100 INSULIN	$0 (Tier 1)	MO
levothyroxine oral	$0 (Tier 1)	MO
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	$0.00-$8.50 (Tier 2)	MO
liothyronine oral	$0.00-$8.50 (Tier 2)	MO
metformin oral tablet 1,000 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
metformin oral tablet 500 mg	$0 (Tier 1)	MO; QLL (150 per 30 days)
metformin oral tablet 850 mg	$0 (Tier 1)	MO; QLL (90 per 30 days)
metformin oral tablet extended release 24 hr 500 mg	$0 (Tier 1)	MO; QLL (120 per 30 days)
metformin oral tablet extended release 24 hr 750 mg	$0 (Tier 1)	MO; QLL (60 per 30 days)
methimazole oral tablet 10 mg, 5 mg	$0.00-$8.50 (Tier 2)	MO
methylprednisolone	$0.00-$8.50 (Tier 2)	MO
methylprednisolone acetate	$0.00-$8.50 (Tier 2)	MO
methylprednisolone sodium succ injection recon soln 125 mg, 40 mg	$0.00-$8.50 (Tier 2)	MO
methylprednisolone sodium succ intravenous	$0.00-$8.50 (Tier 2)	MO
MIACALCIN INJECTION	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
miglustat	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
mouthpiece	$0 (Tier 4)	[*]
NAGLAZYME	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
nateglinide oral tablet 120 mg	$0 (Tier 1)	MO; QLL (90 per 30 days)
nateglinide oral tablet 60 mg	$0 (Tier 1)	MO; QLL (180 per 30 days)
NATPARA	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (2 per 28 days)
NEEDLES, INSULIN DISP.,SAFETY	$0 (Tier 1)	MO; QLL (200 per 30 days)
one way valved mouthpiece	$0 (Tier 4)	[*]
oxandrolone oral tablet 10 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
oxandrolone oral tablet 2.5 mg	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (240 per 30 days)
OZEMPIC	$0.00-$8.50 (Tier 2)	MO
pamidronate intravenous recon soln	$0.00-$8.50 (Tier 2)	MO
pamidronate intravenous solution 30 mg/10 ml (3 mg/ml), 90 mg/10 ml (9 mg/ml)	$0.00-$8.50 (Tier 2)	MO
pamidronate intravenous solution 60 mg/10 ml (6 mg/ml)	$0.00-$8.50 (Tier 2)	B/D PAR; MO
panda mask	$0 (Tier 4)	[*]
paricalcitol oral capsule 1 mcg, 2 mcg	$0.00-$8.50 (Tier 2)	MO
paricalcitol oral capsule 4 mcg	$0.00-$8.50 (Tier 2)	MO; NE
pediatric medium mask	$0 (Tier 4)	[*]
pediatric panda mask	$0 (Tier 4)	[*]
pediatric small mask	$0 (Tier 4)	[*]
pioglitazone oral tablet 15 mg	$0 (Tier 1)	MO; QLL (90 per 30 days)
pioglitazone oral tablet 30 mg	$0 (Tier 1)	MO; QLL (45 per 30 days)
pioglitazone oral tablet 45 mg	$0 (Tier 1)	MO; QLL (30 per 30 days)
prednisolone oral solution 15 mg/5 ml	$0.00-$8.50 (Tier 2)	MO
prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)	$0.00-$8.50 (Tier 2)	MO
prednisone	$0.00-$8.50 (Tier 2)	MO
prednisone intensol	$0.00-$8.50 (Tier 2)	MO
PROGLYCEM	$0.00-$8.50 (Tier 2)	MO; NE
propylthiouracil	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
repaglinide oral tablet 0.5 mg	$0 (Tier 1)	MO; QLL (960 per 30 days)
repaglinide oral tablet 1 mg	$0 (Tier 1)	MO; QLL (480 per 30 days)
repaglinide oral tablet 2 mg	$0 (Tier 1)	MO; QLL (240 per 30 days)
SENSIPAR ORAL TABLET 30 MG, 60 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE; QLL (60 per 30 days)
SENSIPAR ORAL TABLET 90 MG	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE; QLL (120 per 30 days)
sidestream pediatric face mask	$0 (Tier 4)	[*]
SOMAVERT	$0.00-$8.50 (Tier 2)	PAR; MO; NE
STIMATE	$0.00-$8.50 (Tier 2)	MO; NE
SYMLINPEN 120	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (11 per 30 days)
SYMLINPEN 60	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (6 per 30 days)
SYNAREL	$0.00-$8.50 (Tier 2)	PAR; MO; NE
SYNJARDY	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 12.5-1,000 MG, 5-1,000 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 25-1,000 MG	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
SYNTHROID	$0.00-$8.50 (Tier 2)	MO
testosterone cypionate	$0.00-$8.50 (Tier 2)	PAR; MO
testosterone enanthate	$0.00-$8.50 (Tier 2)	PAR; MO
testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
testosterone transdermal gel in packet 1 % (25 mg/ 2.5gram)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (300 per 30 days)
TESTOSTERONE TRANSDERMAL GEL IN PACKET 1 % (50 MG/5 GRAM)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (300 per 30 days)
testosterone transdermal gel in packet 1.62 % (20.25 mg/1.25 gram)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (112.5 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
testosterone transdermal gel in packet 1.62 % (40.5 mg/2.5 gram)	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (150 per 30 days)
THYROSAFE	$0 (Tier 4)	[*]
TOUJEO MAX U-300 SOLOSTAR	$0.00-$8.50 (Tier 2)	MO
TOUJEO SOLOSTAR U-300 INSULIN	$0.00-$8.50 (Tier 2)	MO
TRADJENTA	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
triamcinolone acetonide injection	$0.00-$8.50 (Tier 2)	MO
TRULICITY	$0.00-$8.50 (Tier 2)	MO; QLL (2 per 28 days)
unithroid	$0.00-$8.50 (Tier 2)	MO
VICTOZA 2-PAK	$0.00-$8.50 (Tier 2)	MO; QLL (9 per 30 days)
VICTOZA 3-PAK	$0.00-$8.50 (Tier 2)	MO; QLL (9 per 30 days)
VPRIV	$0.00-$8.50 (Tier 2)	PAR; MO; NE
zoledronic acid intravenous solution 4 mg/5 ml	$0.00-$8.50 (Tier 2)	PAR; MO
ZOMETA INTRAVENOUS PIGGYBACK	$0.00-$8.50 (Tier 2)	PAR; MO; NE
GASTROENTEROLOGY		
acid gone antacid	$0 (Tier 4)	[*]
acid reducer (famotidine) oral tablet 20 mg	$0 (Tier 4)	[*]
actidose/sorbitol oral suspension 50 gram/240 ml	$0 (Tier 4)	[*]
almacone oral suspension	$0 (Tier 4)	[*]
ALMACONE ORAL TABLET,CHEWABLE	$0 (Tier 4)	[*]
almacone-2	$0 (Tier 4)	[*]
alosetron	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
aluminum hydroxide gel oral suspension 320 mg/5 ml	$0 (Tier 4)	[*]
AMITIZA	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
antacid	$0 (Tier 4)	[*]
antacid anti-gas oral suspension 400-400-40 mg/5 ml	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
antacid extra-strength oral suspension 200-200-20 mg/5 ml	$0 (Tier 4)	[*]
antacid plus anti-gas oral suspension 200-200-20 mg/5 ml	$0 (Tier 4)	[*]
anti-diarrheal (loperamide) oral tablet	$0 (Tier 4)	[*]
anu-med	$0 (Tier 4)	[*]
aprepitant oral capsule 125 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (5 per 30 days)
aprepitant oral capsule 40 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (1 per 28 days)
aprepitant oral capsule 80 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (10 per 30 days)
APRISO	$0.00-$8.50 (Tier 2)	MO
atropine injection syringe 0.05 mg/ml	$0.00-$8.50 (Tier 2)	
atropine injection syringe 0.1 mg/ml	$0.00-$8.50 (Tier 2)	MO
balsalazide	$0.00-$8.50 (Tier 2)	MO
bisacodyl	$0 (Tier 4)	[*]
biscolax	$0 (Tier 4)	[*]
bismatrol	$0 (Tier 4)	[*]
budesonide oral capsule,delayed,extend.release	$0.00-$8.50 (Tier 2)	MO; NE
CANASA	$0.00-$8.50 (Tier 2)	MO; NE
colocort	$0.00-$8.50 (Tier 2)	MO
compro	$0.00-$8.50 (Tier 2)	MO
constulose	$0.00-$8.50 (Tier 2)	MO
CREON	$0.00-$8.50 (Tier 2)	MO
CYSTADANE	$0.00-$8.50 (Tier 2)	MO; NE
dicyclomine oral capsule	$0.00-$8.50 (Tier 2)	PAR; MO
dicyclomine oral solution	$0.00-$8.50 (Tier 2)	PAR; MO
dicyclomine oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO
DIPENTUM	$0.00-$8.50 (Tier 2)	MO; NE
diphenoxylate-atropine	$0.00-$8.50 (Tier 2)	PAR; MO
doc-q-lace	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
DOCUSOL KIDS	$0 (Tier 4)	[*]
DOCUSOL PLUS	$0 (Tier 4)	[*]
dok oral capsule 100 mg	$0 (Tier 4)	[*]
dok oral tablet	$0 (Tier 4)	[*]
dok plus	$0 (Tier 4)	[*]
dronabinol oral capsule 10 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE; QLL (120 per 30 days)
dronabinol oral capsule 2.5 mg, 5 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (120 per 30 days)
enema rectal enema 19-7 gram/118 ml	$0 (Tier 4)	[*]
ENEMEEZ	$0 (Tier 4)	[*]
ENEMEEZ PLUS	$0 (Tier 4)	[*]
enulose	$0.00-$8.50 (Tier 2)	MO
famotidine (pf)	$0.00-$8.50 (Tier 2)	MO
famotidine (pf)-nacl (iso-os)	$0.00-$8.50 (Tier 2)	MO
famotidine intravenous solution	$0.00-$8.50 (Tier 2)	MO
famotidine oral tablet 10 mg	$0 (Tier 4)	[*]
famotidine oral tablet 20 mg, 40 mg	$0.00-$8.50 (Tier 2)	MO
fiber (calcium polycarbophil)	$0 (Tier 4)	[*]
fiber laxative (psyllium husk)	$0 (Tier 4)	[*]
fiber-lax	$0 (Tier 4)	[*]
FLEET PEDIATRIC	$0 (Tier 4)	[*]
formula em	$0 (Tier 4)	[*]
gas relief	$0 (Tier 4)	[*]
GATTEX 30-VIAL	$0.00-$8.50 (Tier 2)	PAR; MO; NE
GATTEX ONE-VIAL	$0.00-$8.50 (Tier 2)	PAR; MO; NE
gavilyte-c	$0.00-$8.50 (Tier 2)	MO
gavilyte-g	$0.00-$8.50 (Tier 2)	MO
gavilyte-n	$0.00-$8.50 (Tier 2)	MO

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generlac	$0.00-$8.50 (Tier 2)	MO
glycopyrrolate oral tablet 1 mg, 2 mg	$0.00-$8.50 (Tier 2)	MO
heartburn treatment 24 hour	$0 (Tier 4)	[*]; QLL (30 per 30 days)
hemorrhoidal suppository	$0 (Tier 4)	[*]
hydrocortisone rectal	$0.00-$8.50 (Tier 2)	MO
hydrocortisone topical cream with perineal applicator 2.5 %	$0.00-$8.50 (Tier 2)	MO
infants gas relief	$0 (Tier 4)	[*]
kao-tin (bismuth subsalicylat)	$0 (Tier 4)	[*]
lactulose oral solution	$0.00-$8.50 (Tier 2)	MO
lansoprazole oral capsule,delayed release(dr/ec)	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
lansoprazole oral capsule,delayed release(dr/ec) 15 mg	$0 (Tier 4)	[*]
LINZESS	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
liquid antacid oral suspension 200-200-20 mg/5 ml	$0 (Tier 4)	[*]
loperamide oral capsule	$0.00-$8.50 (Tier 2)	MO
loperamide oral liquid	$0 (Tier 4)	[*]
magnesium oral tablet 250 mg	$0 (Tier 4)	[*]
MAGTAB	$0 (Tier 4)	[*]
MAJOR-PREP HEMORRHOIDAL RECTAL OINTMENT 0.25-14-74.9 %	$0 (Tier 4)	[*]
masanti double strength	$0 (Tier 4)	[*]
meclizine oral tablet 12.5 mg	$0 (Tier 4)	[*]
meclizine oral tablet 12.5 mg, 25 mg	$0.00-$8.50 (Tier 2)	MO
mesalamine oral tablet,delayed release (dr/ec) 1.2 gram	$0.00-$8.50 (Tier 2)	MO
mesalamine rectal enema	$0.00-$8.50 (Tier 2)	MO
mesalamine with cleansing wipe	$0.00-$8.50 (Tier 2)	MO
metoclopramide hcl injection solution	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
metoclopramide hcl injection syringe	$0.00-$8.50 (Tier 2)	
metoclopramide hcl oral solution	$0.00-$8.50 (Tier 2)	MO
metoclopramide hcl oral tablet	$0.00-$8.50 (Tier 2)	MO
mi-acid gas relief	$0 (Tier 4)	[*]
mi-acid oral suspension	$0 (Tier 4)	[*]
milk of magnesia	$0 (Tier 4)	[*]
milk of magnesia concentrated	$0 (Tier 4)	[*]
mintox maximum strength	$0 (Tier 4)	[*]
misoprostol	$0.00-$8.50 (Tier 2)	MO
MOVANTIK	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
MOVIPREP	$0.00-$8.50 (Tier 2)	MO
natural fiber laxative (sugar) oral powder 3.4 gram/ 7 gram	$0 (Tier 4)	[*]
natural fiber laxative therapy	$0 (Tier 4)	[*]
omeprazole magnesium	$0 (Tier 4)	[*]
omeprazole oral capsule,delayed release(dr/ec)	$0 (Tier 1)	MO; QLL (30 per 30 days)
omeprazole oral tablet,delayed release (dr/ec)	$0 (Tier 4)	[*]
ondansetron disintegrating tablet	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (90 per 30 days)
ondansetron hcl (pf)	$0.00-$8.50 (Tier 2)	MO
ondansetron hcl intravenous	$0.00-$8.50 (Tier 2)	MO
ondansetron hcl oral tablet 24 mg	$0.00-$8.50 (Tier 2)	B/D PAR; QLL (30 per 30 days)
ondansetron hcl oral tablet 4 mg, 8 mg	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (90 per 30 days)
pantoprazole intravenous	$0.00-$8.50 (Tier 2)	MO
pantoprazole oral	$0 (Tier 1)	MO; QLL (30 per 30 days)
peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram	$0.00-$8.50 (Tier 2)	MO
peg 3350-electrolytes oral recon soln 240-22.72-6.72 -5.84 gram	$0.00-$8.50 (Tier 2)	
peg-electrolyte soln	$0.00-$8.50 (Tier 2)	

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PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG	$0.00-$8.50 (Tier 2)	MO
PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG	$0.00-$8.50 (Tier 2)	MO; NE
peptic relief oral tablet,chewable	$0 (Tier 4)	[*]
polyethylene glycol 3350	$0 (Tier 4)	[*]
polyethylene glycol 3350 oral powder	$0.00-$8.50 (Tier 2)	MO
prochlorperazine	$0.00-$8.50 (Tier 2)	MO
prochlorperazine edisylate	$0.00-$8.50 (Tier 2)	MO
prochlorperazine maleate	$0.00-$8.50 (Tier 2)	MO
procto-med hc	$0.00-$8.50 (Tier 2)	MO
procto-pak	$0.00-$8.50 (Tier 2)	MO
proctosol hc topical	$0.00-$8.50 (Tier 2)	MO
proctozone-hc	$0.00-$8.50 (Tier 2)	MO
ranitidine hcl injection	$0.00-$8.50 (Tier 2)	MO
ranitidine hcl oral syrup	$0.00-$8.50 (Tier 2)	MO
ranitidine hcl oral tablet 150 mg, 300 mg	$0.00-$8.50 (Tier 2)	MO
ranitidine hcl oral tablet 150 mg, 75 mg	$0 (Tier 4)	[*]
RELISTOR SUBCUTANEOUS SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (18 per 30 days)
RELISTOR SUBCUTANEOUS SYRINGE 12 MG/ 0.6 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (18 per 30 days)
RELISTOR SUBCUTANEOUS SYRINGE 8 MG/ 0.4 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 30 days)
REMICADE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
RULOX	$0 (Tier 4)	[*]
sani-supp (adult)	$0 (Tier 4)	[*]
sani-supp (infant)	$0 (Tier 4)	[*]
scopolamine transdermal	$0.00-$8.50 (Tier 2)	MO; QLL (10 per 28 days)
senexon oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
senexon-s	$0 (Tier 4)	[*]
senna lax	$0 (Tier 4)	[*]
senna oral syrup 8.8 mg/5 ml	$0 (Tier 4)	[*]
senna oral tablet	$0 (Tier 4)	[*]
senna plus	$0 (Tier 4)	[*]
senna with docusate sodium	$0 (Tier 4)	[*]
simethicone oral capsule 180 mg	$0 (Tier 4)	[*]
simethicone oral drops,suspension	$0 (Tier 4)	[*]
sodium bicarbonate oral	$0 (Tier 4)	[*]
stool softener (docusate cal)	$0 (Tier 4)	[*]
stool softener oral capsule 100 mg	$0 (Tier 4)	[*]
sucralfate oral tablet	$0.00-$8.50 (Tier 2)	MO
sulfasalazine	$0.00-$8.50 (Tier 2)	MO
TRANSDERM-SCOP	$0.00-$8.50 (Tier 2)	MO; QLL (10 per 28 days)
travel sickness	$0 (Tier 4)	[*]
travel sickness (meclizine)	$0 (Tier 4)	[*]
ursodiol	$0.00-$8.50 (Tier 2)	MO
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84, 000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT	$0.00-$8.50 (Tier 2)	ST; MO
IMMUNOLOGY, VACCINES / BIOTECHNOLOGY		
ACTHIB (PF)	$0 (Tier 1)	MO
ACTIMMUNE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ADACEL(TDAP ADOLESN/ADULT)(PF)	$0 (Tier 1)	MO
ARCALYST	$0.00-$8.50 (Tier 2)	PAR; MO; NE
ATGAM	$0.00-$8.50 (Tier 2)	B/D PAR

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
AVONEX (WITH ALBUMIN)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
AVONEX INTRAMUSCULAR SYRINGE KIT	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
BCG VACCINE, LIVE (PF)	$0.00-$8.50 (Tier 2)	MO
BETASERON SUBCUTANEOUS KIT	$0.00-$8.50 (Tier 2)	PAR; MO; NE
BEXSERO	$0.00-$8.50 (Tier 2)	MO
BOOSTRIX TDAP	$0 (Tier 1)	MO
DAPTACEL (DTAP PEDIATRIC) (PF)	$0 (Tier 1)	MO
ENGERIX-B (PF)	$0 (Tier 1)	B/D PAR; MO
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE	$0 (Tier 1)	B/D PAR; MO
FULPHILA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1.2 per 28 days)
GAMUNEX-C	$0.00-$8.50 (Tier 2)	PAR; MO; NE
GARDASIL 9 (PF)	$0.00-$8.50 (Tier 2)	MO
HAVRIX (PF) INTRAMUSCULAR SUSPENSION	$0 (Tier 1)	MO
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1, 440 ELISA UNIT/ML	$0 (Tier 1)	MO
HAVRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT/0.5 ML	$0 (Tier 1)	
HIBERIX (PF)	$0 (Tier 1)	MO
ILARIS (PF) SUBCUTANEOUS SOLUTION	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
IMOVAX RABIES VACCINE (PF)	$0.00-$8.50 (Tier 2)	MO
INFANRIX (DTAP) (PF) INTRAMUSCULAR SUSPENSION	$0.00-$8.50 (Tier 2)	MO
INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML), 18 MILLION UNIT (1 ML)	$0.00-$8.50 (Tier 2)	MO
INTRON A INJECTION RECON SOLN 50 MILLION UNIT (1 ML)	$0.00-$8.50 (Tier 2)	MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
INTRON A INJECTION SOLUTION	$0.00-$8.50 (Tier 2)	MO; NE
IPOL	$0 (Tier 1)	MO
IXIARO (PF)	$0.00-$8.50 (Tier 2)	MO
KINRIX (PF) INTRAMUSCULAR SUSPENSION	$0.00-$8.50 (Tier 2)	
KINRIX (PF) INTRAMUSCULAR SYRINGE	$0.00-$8.50 (Tier 2)	MO
M-M-R II (PF)	$0 (Tier 1)	MO
MENACTRA (PF) INTRAMUSCULAR SOLUTION	$0.00-$8.50 (Tier 2)	MO
MENVEO A-C-Y-W-135-DIP (PF)	$0.00-$8.50 (Tier 2)	MO
MOZOBIL	$0.00-$8.50 (Tier 2)	PAR; MO; NE
NEULASTA	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (1.2 per 28 days)
NEUPOGEN	$0.00-$8.50 (Tier 2)	PAR; MO; NE
NORDITROPIN FLEXPRO	$0.00-$8.50 (Tier 2)	PAR; MO; NE
OCTAGAM	$0.00-$8.50 (Tier 2)	PAR; MO; NE
OMNITROPE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
PEDIARIX (PF)	$0.00-$8.50 (Tier 2)	MO
PEDVAX HIB (PF)	$0 (Tier 1)	MO
PEGASYS	$0.00-$8.50 (Tier 2)	MO; NE
PEGASYS PROCLICK SUBCUTANEOUS PEN INJECTOR 180 MCG/0.5 ML	$0.00-$8.50 (Tier 2)	MO; NE
PEGINTRON SUBCUTANEOUS KIT 50 MCG/ 0.5 ML	$0.00-$8.50 (Tier 2)	MO; NE
PENTACEL (PF)	$0.00-$8.50 (Tier 2)	MO
PROCRIT INJECTION SOLUTION 10,000 UNIT/ ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 3,000 UNIT/ML, 4,000 UNIT/ML	$0.00-$8.50 (Tier 2)	PAR; MO
PROCRIT INJECTION SOLUTION 20,000 UNIT/ ML, 40,000 UNIT/ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE
PROLEUKIN	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE
PROQUAD (PF)	$0.00-$8.50 (Tier 2)	MO

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QUADRACEL (PF)	$0.00-$8.50 (Tier 2)	MO
RABAVERT (PF)	$0.00-$8.50 (Tier 2)	MO
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION	$0 (Tier 1)	B/D PAR; MO
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML	$0 (Tier 1)	B/D PAR; MO
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 5 MCG/0.5 ML	$0 (Tier 1)	B/D PAR
ROTARIX	$0.00-$8.50 (Tier 2)	
ROTATEQ VACCINE	$0 (Tier 1)	MO
SHINGRIX (PF)	$0.00-$8.50 (Tier 2)	MO
STAMARIL (PF)	$0.00-$8.50 (Tier 2)	
SYLATRON	$0.00-$8.50 (Tier 2)	PAR; MO; NE
TENIVAC (PF) INTRAMUSCULAR SYRINGE	$0.00-$8.50 (Tier 2)	MO
TETANUS,DIPHTHERIA TOX PED(PF)	$0.00-$8.50 (Tier 2)	MO
TETANUS-DIPHTHERIA TOXOIDS-TD	$0 (Tier 1)	MO
THYMOGLOBULIN	$0.00-$8.50 (Tier 2)	B/D PAR; NE
TICE BCG	$0.00-$8.50 (Tier 2)	B/D PAR; MO
TRUMENBA	$0.00-$8.50 (Tier 2)	MO
TWINRIX (PF) INTRAMUSCULAR SYRINGE	$0 (Tier 1)	MO
TYPHIM VI INTRAMUSCULAR SOLUTION	$0.00-$8.50 (Tier 2)	
TYPHIM VI INTRAMUSCULAR SYRINGE	$0.00-$8.50 (Tier 2)	MO
VAQTA (PF)	$0.00-$8.50 (Tier 2)	MO
VARIVAX (PF)	$0.00-$8.50 (Tier 2)	MO
VARIZIG INTRAMUSCULAR SOLUTION	$0.00-$8.50 (Tier 2)	MO
YF-VAX (PF)	$0.00-$8.50 (Tier 2)	MO
ZOSTAVAX (PF)	$0.00-$8.50 (Tier 2)	MO
MUSCULOSKELETAL / RHEUMATOLOGY		
alendronate oral solution	$0.00-$8.50 (Tier 2)	MO; QLL (300 per 28 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
alendronate oral tablet 10 mg, 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
alendronate oral tablet 35 mg, 70 mg	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 28 days)
allopurinol	$0.00-$8.50 (Tier 2)	MO
BENLYSTA	$0.00-$8.50 (Tier 2)	PAR; MO; NE
COLCRYS	$0.00-$8.50 (Tier 2)	MO
DEPEN TITRATABS	$0.00-$8.50 (Tier 2)	MO; NE
ENBREL MINI	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (8 per 28 days)
ENBREL SUBCUTANEOUS RECON SOLN	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (8 per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 25 MG/ 0.5ML (0.51)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4.08 per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ ML (0.98 ML)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (8 per 28 days)
ENBREL SURECLICK	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (8 per 28 days)
FORTEO	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (3 per 28 days)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (6 per 365 days)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML (6 PACK)	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 365 days)
HUMIRA PEN	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
HUMIRA PEN CROHNS-UC-HS START	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (12 per 365 days)
HUMIRA PEN PSOR-UVEITS-ADOL HS	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (8 per 365 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 10 MG/0.2 ML, 20 MG/0.4 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (2 per 28 days)
HUMIRA SUBCUTANEOUS SYRINGE KIT 40 MG/0.8 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (6 per 365 days)
HUMIRA(CF) PEDI CROHNS STARTER SUBCUTANEOUS SYRINGE KIT 80 MG/0.8 ML-40 MG/0.4 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 365 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
HUMIRA(CF) PEN	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
HUMIRA(CF) PEN CROHNS-UC-HS	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (6 per 365 days)
HUMIRA(CF) PEN PSOR-UV-ADOL HS	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (6 per 365 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML, 20 MG/0.2 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (2 per 28 days)
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (4 per 28 days)
ibandronate oral	$0.00-$8.50 (Tier 2)	MO; QLL (1 per 28 days)
leflunomide	$0.00-$8.50 (Tier 2)	MO
probenecid	$0.00-$8.50 (Tier 2)	MO
probenecid-colchicine	$0.00-$8.50 (Tier 2)	MO
PROLIA	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (2 per 365 days)
raloxifene	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
RIDAURA	$0.00-$8.50 (Tier 2)	MO; NE
SAVELLA ORAL TABLET 100 MG	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
SAVELLA ORAL TABLET 12.5 MG	$0.00-$8.50 (Tier 2)	MO; QLL (480 per 30 days)
SAVELLA ORAL TABLET 25 MG	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
SAVELLA ORAL TABLET 50 MG	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
SAVELLA ORAL TABLETS,DOSE PACK	$0.00-$8.50 (Tier 2)	MO; QLL (110 per 365 days)
ULORIC	$0.00-$8.50 (Tier 2)	ST; MO
XELJANZ	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
OBSTETRICS / GYNECOLOGY		
altavera (28)	$0.00-$8.50 (Tier 2)	MO
alyacen 1/35 (28)	$0.00-$8.50 (Tier 2)	MO
alyacen 7/7/7 (28)	$0.00-$8.50 (Tier 2)	MO
apri	$0.00-$8.50 (Tier 2)	MO
aranelle (28)	$0.00-$8.50 (Tier 2)	MO
aviane	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
azurette (28)	$0.00-$8.50 (Tier 2)	MO
blisovi fe 1.5/30 (28)	$0.00-$8.50 (Tier 2)	MO
camila	$0.00-$8.50 (Tier 2)	MO
caziant (28)	$0.00-$8.50 (Tier 2)	MO
clindamycin phosphate vaginal	$0.00-$8.50 (Tier 2)	MO
clotrimazole vaginal cream	$0 (Tier 4)	[*]
cryselle (28)	$0.00-$8.50 (Tier 2)	MO
cyclafem 1/35 (28)	$0.00-$8.50 (Tier 2)	MO
cyclafem 7/7/7 (28)	$0.00-$8.50 (Tier 2)	MO
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	$0.00-$8.50 (Tier 2)	MO
drospirenone-ethinyl estradiol oral tablet 3-0.03 mg	$0.00-$8.50 (Tier 2)	MO
econtra ez	$0 (Tier 4)	[*]
elinest	$0.00-$8.50 (Tier 2)	MO
ELLA	$0.00-$8.50 (Tier 2)	
enpresse	$0.00-$8.50 (Tier 2)	MO
errin	$0.00-$8.50 (Tier 2)	MO
estradiol oral	$0.00-$8.50 (Tier 2)	PAR; MO
estradiol transdermal patch weekly	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (4 per 28 days)
estradiol vaginal cream	$0.00-$8.50 (Tier 2)	MO
ESTRING	$0.00-$8.50 (Tier 2)	MO; QLL (1 per 90 days)
falmina (28)	$0.00-$8.50 (Tier 2)	MO
hydroxyprogesterone caproate	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (25 per 147 days)
junel 1.5/30 (21)	$0.00-$8.50 (Tier 2)	MO
junel 1/20 (21)	$0.00-$8.50 (Tier 2)	MO
junel fe 1.5/30 (28)	$0.00-$8.50 (Tier 2)	MO
junel fe 1/20 (28)	$0.00-$8.50 (Tier 2)	MO
kariva (28)	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
kelnor 1/35 (28)	$0.00-$8.50 (Tier 2)	MO
larin 1/20 (21)	$0.00-$8.50 (Tier 2)	MO
larin fe 1.5/30 (28)	$0.00-$8.50 (Tier 2)	MO
larin fe 1/20 (28)	$0.00-$8.50 (Tier 2)	MO
lessina	$0.00-$8.50 (Tier 2)	MO
levonest (28)	$0.00-$8.50 (Tier 2)	MO
levonorg-eth estrad triphasic	$0.00-$8.50 (Tier 2)	MO
levonorgestrel-ethinyl estrad oral tablet 0.15-0.03 mg	$0.00-$8.50 (Tier 2)	MO
levonorgestrel-ethinyl estrad oral tablets,dose pack, 3 month	$0.00-$8.50 (Tier 2)	MO
low-ogestrel (28)	$0.00-$8.50 (Tier 2)	MO
lutera (28)	$0.00-$8.50 (Tier 2)	MO
lyza	$0.00-$8.50 (Tier 2)	MO
marlissa	$0.00-$8.50 (Tier 2)	MO
medroxyprogesterone	$0.00-$8.50 (Tier 2)	MO
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	$0.00-$8.50 (Tier 2)	PAR; MO
metronidazole vaginal	$0.00-$8.50 (Tier 2)	MO
miconazole 7	$0 (Tier 4)	[*]
miconazole nitrate vaginal cream	$0 (Tier 4)	[*]
miconazole nitrate vaginal suppository	$0 (Tier 4)	[*]
miconazole-3 vaginal suppository	$0.00-$8.50 (Tier 2)	MO
microgestin 1.5/30 (21)	$0.00-$8.50 (Tier 2)	MO
microgestin 1/20 (21)	$0.00-$8.50 (Tier 2)	MO
microgestin fe 1.5/30 (28)	$0.00-$8.50 (Tier 2)	MO
microgestin fe 1/20 (28)	$0.00-$8.50 (Tier 2)	MO
mono-linyah	$0.00-$8.50 (Tier 2)	MO
mononessa (28)	$0.00-$8.50 (Tier 2)	MO

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my way	$0 (Tier 4)	[*]
myzilra	$0.00-$8.50 (Tier 2)	MO
necon 0.5/35 (28)	$0.00-$8.50 (Tier 2)	MO
nora-be	$0.00-$8.50 (Tier 2)	MO
norethindrone (contraceptive)	$0.00-$8.50 (Tier 2)	MO
norethindrone acetate	$0.00-$8.50 (Tier 2)	MO
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg	$0.00-$8.50 (Tier 2)	MO
nortrel 0.5/35 (28)	$0.00-$8.50 (Tier 2)	MO
nortrel 1/35 (21)	$0.00-$8.50 (Tier 2)	MO
nortrel 1/35 (28)	$0.00-$8.50 (Tier 2)	MO
nortrel 7/7/7 (28)	$0.00-$8.50 (Tier 2)	MO
NUVARING	$0.00-$8.50 (Tier 2)	MO
ocella	$0.00-$8.50 (Tier 2)	MO
ogestrel (28)	$0.00-$8.50 (Tier 2)	MO
opcicon one-step	$0 (Tier 4)	[*]
portia	$0.00-$8.50 (Tier 2)	MO
PREMARIN ORAL	$0.00-$8.50 (Tier 2)	PAR; MO
PREMARIN VAGINAL	$0.00-$8.50 (Tier 2)	MO
PREMPRO	$0.00-$8.50 (Tier 2)	PAR; MO
previfem	$0.00-$8.50 (Tier 2)	MO
progesterone micronized	$0.00-$8.50 (Tier 2)	MO
reclipsen (28)	$0.00-$8.50 (Tier 2)	MO
sprintec (28)	$0.00-$8.50 (Tier 2)	MO
syeda	$0.00-$8.50 (Tier 2)	MO
terconazole	$0.00-$8.50 (Tier 2)	MO
tioconazole-1	$0 (Tier 4)	[*]
tranexamic acid oral	$0.00-$8.50 (Tier 2)	MO

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tri-previfem (28)	$0.00-$8.50 (Tier 2)	MO
tri-sprintec (28)	$0.00-$8.50 (Tier 2)	MO
trivora (28)	$0.00-$8.50 (Tier 2)	MO
velivet triphasic regimen (28)	$0.00-$8.50 (Tier 2)	MO
viorele (28)	$0.00-$8.50 (Tier 2)	MO
zarah	$0.00-$8.50 (Tier 2)	MO
zenchent (28)	$0.00-$8.50 (Tier 2)	MO
zovia 1/35e (28)	$0.00-$8.50 (Tier 2)	MO
OPHTHALMOLOGY		
acetazolamide	$0.00-$8.50 (Tier 2)	MO
acetazolamide sodium solution for injection	$0.00-$8.50 (Tier 2)	MO
ak-poly-bac	$0.00-$8.50 (Tier 2)	MO
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	$0.00-$8.50 (Tier 2)	MO
apraclonidine	$0.00-$8.50 (Tier 2)	MO
artificial tears (petro/min)	$0 (Tier 4)	[*]
artificial tears (polyvin alc)	$0 (Tier 4)	[*]
ATROPINE OPHTHALMIC (EYE) DROPS	$0.00-$8.50 (Tier 2)	MO
azelastine ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
AZOPT	$0.00-$8.50 (Tier 2)	MO
bacitracin ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
bacitracin-polymyxin b ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
betaxolol ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
BETIMOL	$0.00-$8.50 (Tier 2)	MO
bimatoprost ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
BLEPHAMIDE S.O.P.	$0.00-$8.50 (Tier 2)	MO
brimonidine	$0.00-$8.50 (Tier 2)	MO
carteolol	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ciprofloxacin hcl ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
COMBIGAN	$0.00-$8.50 (Tier 2)	MO
cromolyn ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
CYSTARAN	$0.00-$8.50 (Tier 2)	MO; NE
dexamethasone sodium phosphate ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
diclofenac sodium ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
dorzolamide	$0.00-$8.50 (Tier 2)	MO
dorzolamide-timolol	$0.00-$8.50 (Tier 2)	MO
erythromycin ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
eye drops (tetrahydrozoline)	$0 (Tier 4)	[*]
eye itch relief	$0 (Tier 4)	[*]
fluorometholone	$0.00-$8.50 (Tier 2)	MO
flurbiprofen ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
FRESHKOTE	$0 (Tier 4)	[*]
gentak ophthalmic (eye) ointment	$0.00-$8.50 (Tier 2)	MO
gentamicin ophthalmic (eye) drops	$0.00-$8.50 (Tier 2)	MO
gentamicin ophthalmic (eye) ointment	$0.00-$8.50 (Tier 2)	
ILEVRO	$0.00-$8.50 (Tier 2)	MO
ISOPTO TEARS	$0 (Tier 4)	[*]
ketorolac ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
latanoprost	$0.00-$8.50 (Tier 2)	MO
levobunolol ophthalmic (eye) drops 0.5 %	$0.00-$8.50 (Tier 2)	MO
liquitears	$0 (Tier 4)	[*]
LUBRICANT EYE (PG-PEG 400)	$0 (Tier 4)	[*]
lubricating plus	$0 (Tier 4)	[*]
LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 %	$0.00-$8.50 (Tier 2)	MO
methazolamide	$0.00-$8.50 (Tier 2)	MO

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metipranolol	$0.00-$8.50 (Tier 2)	
MOXIFLOXACIN OPHTHALMIC (EYE)	$0.00-$8.50 (Tier 2)	MO
MURO 128 OPHTHALMIC (EYE) DROPS	$0 (Tier 4)	[*]
NATACYN	$0.00-$8.50 (Tier 2)	MO
NATURAL BALANCE TEARS	$0 (Tier 4)	[*]
NATURE'S TEARS	$0 (Tier 4)	[*]
neo-polycin	$0.00-$8.50 (Tier 2)	MO
neo-polycin hc	$0.00-$8.50 (Tier 2)	MO
neomycin-bacitracin-poly-hc	$0.00-$8.50 (Tier 2)	MO
neomycin-bacitracin-polymyxin	$0.00-$8.50 (Tier 2)	MO
neomycin-polymyxin b-dexameth	$0.00-$8.50 (Tier 2)	MO
neomycin-polymyxin-gramicidin	$0.00-$8.50 (Tier 2)	MO
neomycin-polymyxin-hc ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
ofloxacin ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
olopatadine ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
opti-clear	$0 (Tier 4)	[*]
PAZEO	$0.00-$8.50 (Tier 2)	MO
PHOSPHOLINE IODIDE	$0.00-$8.50 (Tier 2)	MO
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	$0.00-$8.50 (Tier 2)	MO
polycin	$0.00-$8.50 (Tier 2)	MO
polymyxin b sulf-trimethoprim	$0.00-$8.50 (Tier 2)	MO
prednisolone acetate	$0.00-$8.50 (Tier 2)	MO
prednisolone sodium phosphate ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
puralube	$0 (Tier 4)	[*]
REFRESH CELLUVISC	$0 (Tier 4)	[*]
REFRESH LACRI-LUBE	$0 (Tier 4)	[*]
REFRESH OPTIVE MEGA-3 (PF)	$0 (Tier 4)	[*]

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REFRESH PLUS	$0 (Tier 4)	[*]
SIMBRINZA	$0.00-$8.50 (Tier 2)	MO
sodium chloride ophthalmic (eye)	$0 (Tier 4)	[*]
sulfacetamide sodium ophthalmic (eye) drops	$0.00-$8.50 (Tier 2)	MO
sulfacetamide-prednisolone	$0.00-$8.50 (Tier 2)	MO
timolol maleate ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
tobramycin	$0.00-$8.50 (Tier 2)	MO
tobramycin-dexamethasone ophthalmic (eye)	$0.00-$8.50 (Tier 2)	MO
TRAVATAN Z	$0.00-$8.50 (Tier 2)	MO
trifluridine	$0.00-$8.50 (Tier 2)	MO
ULTRA LUBRICANT EYE	$0 (Tier 4)	[*]
XIIDRA	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (60 per 30 days)
ZIRGAN	$0.00-$8.50 (Tier 2)	MO
RESPIRATORY AND ALLERGY		
acetylcysteine	$0 (Tier 1)	B/D PAR; MO
ADEMPAS	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE
ADVAIR DISKUS	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
ADVAIR HFA	$0.00-$8.50 (Tier 2)	MO; QLL (12 per 30 days)
ala-hist ir	$0 (Tier 4)	[*]
ALA-HIST PE	$0 (Tier 4)	[*]
ALAHIST CF	$0 (Tier 4)	[*]
ALAHIST DM	$0 (Tier 4)	[*]
albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %)	$0 (Tier 1)	B/D PAR; MO; QLL (360 per 30 days)
albuterol sulfate inhalation solution for nebulization 2.5 mg/0.5 ml, 5 mg/ml	$0 (Tier 1)	B/D PAR; MO; QLL (60 per 30 days)
albuterol sulfate oral	$0 (Tier 1)	MO
all day allergy (cetirizine) oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
all day allergy-d	$0 (Tier 4)	[*]
ALL-NITE COLD-FLU	$0 (Tier 4)	[*]
aller-chlor oral tablet	$0 (Tier 4)	[*]
allergy (chlorpheniramine)	$0 (Tier 4)	[*]
allergy 4-hour	$0 (Tier 4)	[*]
allergy relief (clemastine)	$0 (Tier 4)	[*]
allergy relief (loratadine) oral solution	$0 (Tier 4)	[*]
allergy relief (loratadine) oral tablet	$0 (Tier 4)	[*]
allergy relief d-24hr	$0 (Tier 4)	[*]
allergy relief(diphenhydramin) oral liquid	$0 (Tier 4)	[*]
ANORO ELLIPTA	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
ap-hist dm	$0 (Tier 4)	[*]
aprodine	$0 (Tier 4)	[*]
ARNUITY ELLIPTA	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
ATROVENT HFA	$0.00-$8.50 (Tier 2)	MO; QLL (26 per 30 days)
banophen oral capsule	$0 (Tier 4)	[*]
banophen oral liquid	$0 (Tier 4)	[*]
benzonatate	$0 (Tier 3)	[*]
BREO ELLIPTA	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
BROMFED DM	$0 (Tier 3)	[*]
brompheniramine-pseudoeph-dm oral syrup	$0 (Tier 3)	[*]
brotapp dm	$0 (Tier 4)	[*]
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (120 per 30 days)
budesonide inhalation suspension for nebulization 1 mg/2 ml	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (60 per 30 days)
budesonide nasal	$0 (Tier 4)	[*]
cetirizine oral solution 1 mg/ml	$0 (Tier 4)	[*]
cetirizine oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
cetirizine oral tablet,chewable	$0 (Tier 4)	[*]
cetirizine-pseudoephedrine	$0 (Tier 4)	[*]
cheratussin ac	$0 (Tier 3)	[*]
CHILD MUCINEX CONGESTION-COUGH	$0 (Tier 4)	[*]
CHILD MUCINEX M-S COLD DAY-NTE	$0 (Tier 4)	[*]
child's all day allergy(cetir)	$0 (Tier 4)	[*]
children's allergy (diphenhyd) oral liquid	$0 (Tier 4)	[*]
children's cetirizine	$0 (Tier 4)	[*]
CHILDREN'S DELSYM COUGH	$0 (Tier 4)	[*]
CHILDREN'S MUCINEX COLD-FEVER	$0 (Tier 4)	[*]
children's mucinex cough	$0 (Tier 4)	[*]
CHILDREN'S MUCINEX MULTI-SYMP	$0 (Tier 4)	[*]
CHILDREN'S MUCINEX NIGHT TIME	$0 (Tier 4)	[*]
children's silfedrine	$0 (Tier 4)	[*]
CHLO TUSS	$0 (Tier 4)	[*]
CHLORPHEN SR	$0 (Tier 4)	[*]
CINRYZE	$0.00-$8.50 (Tier 2)	PAR; MO; NE
clemastine oral tablet 2.68 mg	$0.00-$8.50 (Tier 2)	PAR; MO
codeine-guaifenesin	$0 (Tier 3)	[*]
COMBIVENT RESPIMAT	$0.00-$8.50 (Tier 2)	MO; QLL (8 per 30 days)
complete allergy medicine oral capsule	$0 (Tier 4)	[*]
cough dm er	$0 (Tier 4)	[*]
cough syrup	$0 (Tier 4)	[*]
cough syrup dm	$0 (Tier 4)	[*]
cromolyn inhalation	$0 (Tier 1)	B/D PAR; MO; QLL (240 per 30 days)
cromolyn nasal	$0 (Tier 4)	[*]
cyproheptadine oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO
DALIRESP	$0.00-$8.50 (Tier 2)	PAR; MO; QLL (30 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
dayhist allergy	$0 (Tier 4)	[*]
DECONEX DMX ORAL TABLET 10-17.5-385 MG	$0 (Tier 4)	[*]
DECONEX IR ORAL TABLET 10-385 MG	$0 (Tier 4)	[*]
DELSYM 12 HOUR	$0 (Tier 4)	[*]
delsym cough-chest congest dm	$0 (Tier 4)	[*]
dextromethorphan polistirex	$0 (Tier 4)	[*]
dimaphen (pe)	$0 (Tier 4)	[*]
dimaphen dm	$0 (Tier 4)	[*]
diphenhist oral capsule	$0 (Tier 4)	[*]
diphenhist oral liquid	$0 (Tier 4)	[*]
diphenhydramine hcl injection solution 50 mg/ml	$0.00-$8.50 (Tier 2)	MO
diphenhydramine hcl injection syringe	$0.00-$8.50 (Tier 2)	MO
diphenhydramine hcl oral capsule 25 mg	$0 (Tier 4)	[*]
diphenhydramine hcl oral capsule 50 mg	$0 (Tier 3)	[*]
DULERA	$0.00-$8.50 (Tier 2)	MO; QLL (13 per 30 days)
ed a-hist	$0 (Tier 4)	[*]
ed a-hist dm oral liquid	$0 (Tier 4)	[*]
ED A-HIST DM ORAL TABLET	$0 (Tier 4)	[*]
ed a-hist pse	$0 (Tier 4)	[*]
ed bron gp	$0 (Tier 4)	[*]
ed chlorped jr	$0 (Tier 4)	[*]
endacof - dm	$0 (Tier 4)	[*]
EPINEPHRINE INJECTION AUTO-INJECTOR 0.15 MG/0.3 ML, 0.3 MG/0.3 ML	$0 (Tier 1)	MO; QLL (2 per 28 days)
ESBRIET ORAL CAPSULE	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (270 per 30 days)
ESBRIET ORAL TABLET 267 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (270 per 30 days)
ESBRIET ORAL TABLET 801 MG	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
FEXOFENADINE ORAL SUSPENSION	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
fexofenadine oral tablet 180 mg, 60 mg	$0 (Tier 4)	[*]
FIRAZYR	$0.00-$8.50 (Tier 2)	PAR; MO; NE
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 50 MCG/ ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
FLOVENT DISKUS INHALATION BLISTER WITH DEVICE 250 MCG/ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (240 per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 110 MCG/ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (12 per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 220 MCG/ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (24 per 30 days)
FLOVENT HFA INHALATION HFA AEROSOL INHALER 44 MCG/ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (11 per 30 days)
flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)	$0.00-$8.50 (Tier 2)	MO; QLL (75 per 30 days)
fluticasone nasal	$0.00-$8.50 (Tier 2)	MO; QLL (16 per 30 days)
fluticasone nasal	$0 (Tier 4)	[*]
guaifenesin ac	$0 (Tier 3)	[*]
guaifenesin oral liquid	$0 (Tier 4)	[*]
GUAIFENESIN ORAL TABLET EXTENDED RELEASE 12HR 1,200 MG	$0 (Tier 4)	[*]
HISTEX (TRIPROLIDINE) ORAL LIQUID	$0 (Tier 4)	[*]
HISTEX DM	$0 (Tier 4)	[*]
HISTEX PD	$0 (Tier 4)	[*]
HISTEX PE	$0 (Tier 4)	[*]
hydrocodone-chlorpheniramine	$0 (Tier 3)	[*]
hydrocodone-cpm-pseudoephed	$0 (Tier 3)	[*]
hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml	$0 (Tier 3)	[*]
hydrocodone-homatropine oral tablet	$0 (Tier 3)	[*]
hydromet	$0 (Tier 3)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
hydroxyzine hcl oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO
hydroxyzine pamoate oral capsule 25 mg, 50 mg	$0.00-$8.50 (Tier 2)	PAR; MO
ipratropium bromide inhalation	$0 (Tier 1)	B/D PAR; MO
ipratropium-albuterol inhalation	$0.00-$8.50 (Tier 2)	B/D PAR; MO; QLL (540 per 30 days)
KALYDECO ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
kidkare cough/cold	$0 (Tier 4)	[*]
LETAIRIS	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (30 per 30 days)
levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml	$0 (Tier 1)	B/D PAR; MO; QLL (270 per 30 days)
levalbuterol hcl inhalation solution for nebulization 0.63 mg/3 ml	$0 (Tier 1)	B/D PAR; MO; QLL (540 per 30 days)
LEVALBUTEROL HFA	$0.00-$8.50 (Tier 2)	MO; QLL (45 per 30 days)
levocetirizine oral tablet	$0.00-$8.50 (Tier 2)	MO
LODRANE D	$0 (Tier 4)	[*]
lohist - d	$0 (Tier 4)	[*]
lohist-dm	$0 (Tier 4)	[*]
lorata-dine d	$0 (Tier 4)	[*]
loratadine oral solution	$0 (Tier 4)	[*]
loratadine oral tablet	$0 (Tier 4)	[*]
loratadine-d	$0 (Tier 4)	[*]
LORTUSS DM	$0 (Tier 4)	[*]
lortuss ex oral syrup	$0 (Tier 3)	[*]
LORTUSS LQ	$0 (Tier 4)	[*]
M-END DMX	$0 (Tier 4)	[*]
M-HIST PD	$0 (Tier 4)	[*]
mapap cold formula	$0 (Tier 4)	[*]
mapap sinus max strength (pe)	$0 (Tier 4)	[*]
metaproterenol	$0 (Tier 1)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
montelukast	$0 (Tier 1)	MO
MUCINEX COLD,FLU,SORE THROAT	$0 (Tier 4)	[*]
MUCINEX COUGH MINI-MELTS	$0 (Tier 4)	[*]
mucinex d	$0 (Tier 4)	[*]
mucinex d maximum strength	$0 (Tier 4)	[*]
mucinex dm oral tablet extended release 12 hr 30-600 mg	$0 (Tier 4)	[*]
MUCINEX DM ORAL TABLET EXTENDED RELEASE 12 HR 60-1,200 MG	$0 (Tier 4)	[*]
mucinex fast-max cold-flu-thrt oral tablet	$0 (Tier 4)	[*]
MUCINEX FAST-MAX COLD-SINUS	$0 (Tier 4)	[*]
MUCINEX FAST-MAX CONGEST-COUGH ORAL TABLET	$0 (Tier 4)	[*]
MUCINEX FAST-MAX DAY-NITE CONG ORAL TABLETS, SEQUENTIAL 5 MG (DY)/25 MG -5 MG-325MG(NT)	$0 (Tier 4)	[*]
mucinex fast-max dm max	$0 (Tier 4)	[*]
MUCINEX FAST-MAX NITE COLD-FLU ORAL LIQUID	$0 (Tier 4)	[*]
MUCINEX FAST-MAX SEVERE COLD	$0 (Tier 4)	[*]
MUCINEX FST-MX DY-NT COLD(DPH) ORAL LIQUID, SEQUENTIAL	$0 (Tier 4)	[*]
MUCINEX MINI-MELTS ORAL GRANULES IN PACKET 100 MG	$0 (Tier 4)	[*]
MUCINEX ORAL TABLET EXTENDED RELEASE 12HR 1,200 MG	$0 (Tier 4)	[*]
mucinex oral tablet extended release 12hr 600 mg	$0 (Tier 4)	[*]
mucus relief oral tablet 400 mg	$0 (Tier 4)	[*]
mucus relief sinus	$0 (Tier 4)	[*]
NASOPEN PE	$0 (Tier 4)	[*]
nighttime sleep aid (diphen) oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
NINJACOF	$0 (Tier 4)	[*]
NINJACOF-A	$0 (Tier 4)	[*]
NINJACOF-XG	$0 (Tier 3)	[*]
NITE TIME COLD-FLU RELIEF ORAL CAPSULE	$0 (Tier 4)	[*]
nohist-dm	$0 (Tier 4)	[*]
nohist-lq	$0 (Tier 4)	[*]
non-drowsy allergy	$0 (Tier 4)	[*]
OFEV	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (60 per 30 days)
ORKAMBI ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (120 per 30 days)
PAIN RELIEF SINUS PE	$0 (Tier 4)	[*]
pediatric cough and cold oral liquid 1-15-5 mg/5 ml	$0 (Tier 4)	[*]
POLY HIST FORTE (DOXYLAMINE)	$0 (Tier 4)	[*]
POLY HIST PD	$0 (Tier 4)	[*]
POLY-HIST DM (THONZYLAMINE)	$0 (Tier 4)	[*]
POLY-VENT DM ORAL TABLET 60-20-380 MG	$0 (Tier 4)	[*]
POLY-VENT IR ORAL TABLET 60-380 MG	$0 (Tier 4)	[*]
PROAIR HFA	$0.00-$8.50 (Tier 2)	MO; QLL (18 per 30 days)
PROAIR RESPICLICK	$0.00-$8.50 (Tier 2)	MO; QLL (2 per 30 days)
promethazine oral tablet	$0.00-$8.50 (Tier 2)	PAR; MO
promethazine-codeine	$0 (Tier 3)	[*]
promethazine-dm	$0 (Tier 3)	[*]
promethegan rectal suppository 12.5 mg	$0.00-$8.50 (Tier 2)	PAR; MO
pseudoephedrine hcl oral liquid	$0 (Tier 4)	[*]
pseudoephedrine hcl oral tablet 30 mg	$0 (Tier 4)	[*]
pseudoephedrine-guaifenesin	$0 (Tier 4)	[*]
PULMOZYME	$0.00-$8.50 (Tier 2)	B/D PAR; MO; NE

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
PYRILAMINE-PHENYLEPHRINE ORAL TABLET	$0 (Tier 4)	[*]
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (11 per 30 days)
QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 80 MCG/ ACTUATION	$0.00-$8.50 (Tier 2)	MO; QLL (22 per 30 days)
RESCON	$0 (Tier 4)	[*]
RESCON-DM	$0 (Tier 4)	[*]
rescon-gg	$0 (Tier 4)	[*]
RESPAIRE-30	$0 (Tier 4)	[*]
robafen	$0 (Tier 4)	[*]
robafen cf (phenylephrine)	$0 (Tier 4)	[*]
robafen cough	$0 (Tier 4)	[*]
robafen dm	$0 (Tier 4)	[*]
robafen dm cough	$0 (Tier 4)	[*]
robafen dm cough-chest congest	$0 (Tier 4)	[*]
RU-HIST D	$0 (Tier 4)	[*]
RYMED (DEXCHLORPHENIRAMINE-PE)	$0 (Tier 4)	[*]
rynex dm	$0 (Tier 4)	[*]
rynex pe	$0 (Tier 4)	[*]
rynex pse	$0 (Tier 4)	[*]
S2 RACEPINEPHRINE	$0 (Tier 4)	[*]
SEREVENT DISKUS	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
siladryl sa	$0 (Tier 4)	[*]
sildenafil (antihypertensive) oral	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (90 per 30 days)
siltussin dm das	$0 (Tier 4)	[*]
siltussin sa	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
siltussin-dm	$0 (Tier 4)	[*]
SPIRIVA RESPIMAT	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 30 days)
SPIRIVA WITH HANDIHALER	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
STAHIST AD	$0 (Tier 4)	[*]
STIOLTO RESPIMAT	$0.00-$8.50 (Tier 2)	MO; QLL (4 per 30 days)
sudogest	$0 (Tier 4)	[*]
sudogest 12-hour	$0 (Tier 4)	[*]
sudogest pe	$0 (Tier 4)	[*]
sudogest sinus and allergy	$0 (Tier 4)	[*]
terbutaline	$0 (Tier 1)	MO
theophylline oral tablet extended release 12 hr	$0.00-$8.50 (Tier 2)	MO
theophylline oral tablet extended release 24 hr	$0.00-$8.50 (Tier 2)	MO
TRACLEER ORAL TABLET	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (60 per 30 days)
TRACLEER ORAL TABLET FOR SUSPENSION	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (120 per 30 days)
triamcinolone acetonide nasal	$0 (Tier 4)	[*]
TRIPROLIDINE HCL ORAL DROPS 0.625 MG/ML	$0 (Tier 4)	[*]
tussin dm oral liquid	$0 (Tier 4)	[*]
tussin dm oral syrup 10-100 mg/5 ml	$0 (Tier 4)	[*]
VANACLEAR PD	$0 (Tier 4)	[*]
VANACOF	$0 (Tier 4)	[*]
VANACOF DM	$0 (Tier 4)	[*]
VANAHIST PD	$0 (Tier 4)	[*]
VANAMINE PD	$0 (Tier 4)	[*]
VANATAB AC	$0 (Tier 4)	[*]
VANATAB DM	$0 (Tier 4)	[*]
VENTAVIS	$0.00-$8.50 (Tier 2)	PAR; MO; NE; QLL (270 per 30 days)

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
VENTOLIN HFA	$0.00-$8.50 (Tier 2)	MO; QLL (36 per 30 days)
virtussin ac	$0 (Tier 3)	[*]
virtussin dac	$0 (Tier 3)	[*]
XOLAIR SUBCUTANEOUS RECON SOLN	$0.00-$8.50 (Tier 2)	PAR; MO; LA; NE; QLL (6 per 28 days)
zafirlukast	$0 (Tier 1)	MO
UROLOGICALS		
alfuzosin	$0.00-$8.50 (Tier 2)	MO
bethanechol chloride	$0.00-$8.50 (Tier 2)	MO
CYSTAGON	$0.00-$8.50 (Tier 2)	MO; LA
dutasteride	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
dutasteride-tamsulosin	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
finasteride oral tablet 5 mg	$0.00-$8.50 (Tier 2)	MO
MYRBETRIQ	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
oxybutynin chloride oral syrup	$0.00-$8.50 (Tier 2)	MO; QLL (600 per 30 days)
oxybutynin chloride oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (120 per 30 days)
oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
oxybutynin chloride oral tablet extended release 24hr 5 mg	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
potassium citrate	$0.00-$8.50 (Tier 2)	MO
tamsulosin	$0.00-$8.50 (Tier 2)	MO
tolterodine oral capsule,extended release 24hr	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
tolterodine oral tablet	$0.00-$8.50 (Tier 2)	MO; QLL (60 per 30 days)
TOVIAZ	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
VESICARE	$0.00-$8.50 (Tier 2)	MO; QLL (30 per 30 days)
VITAMINS, HEMATINICS / ELECTROLYTES		
a thru z	$0 (Tier 4)	[*]
a thru z advanced formula	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
A THRU Z MEN'S ULTIMATE	$0 (Tier 4)	[*]
a thru z select 50plus formula	$0 (Tier 4)	[*]
a thru z select oral tablet 500-300-250 mcg	$0 (Tier 4)	[*]
a thru z select women's	$0 (Tier 4)	[*]
abc plus	$0 (Tier 4)	[*]
acerola c-500	$0 (Tier 4)	[*]
actical	$0 (Tier 4)	[*]
adult one daily multivitamin	$0 (Tier 4)	[*]
adults 50 plus	$0 (Tier 4)	[*]
ALBA-LYBE	$0 (Tier 4)	[*]
AMINOSYN 7 % WITH ELECTROLYTES	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN 8.5 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN 8.5 %-ELECTROLYTES	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN II 10 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN II 15 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN II 8.5 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN II 8.5 %-ELECTROLYTES	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN M 3.5 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN-HBC 7%	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN-PF 10 %	$0.00-$8.50 (Tier 2)	B/D PAR
AMINOSYN-PF 7 % (SULFITE-FREE)	$0.00-$8.50 (Tier 2)	B/D PAR
animal chews	$0 (Tier 4)	[*]
animal shape vitamins	$0 (Tier 4)	[*]
antacid ext str (calcium carb)	$0 (Tier 4)	[*]
antacid extra-strength oral tablet,chewable 300 mg (750 mg)	$0 (Tier 4)	[*]
apatate forte	$0 (Tier 4)	[*]
APETEX	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
APETIGEN	$0 (Tier 4)	[*]
apetigen plus oral liquid	$0 (Tier 4)	[*]
APETIGEN PLUS ORAL TABLET	$0 (Tier 4)	[*]
AQUADEKS ORAL TABLET,CHEWABLE	$0 (Tier 4)	[*]
AQUADEKS PEDIATRIC	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral capsule, extended release	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral granules	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral syrup	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral tablet	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral tablet extended release 1,500 mg, 500 mg	$0 (Tier 4)	[*]
ascorbic acid (vitamin c) oral tablet,chewable 500 mg	$0 (Tier 4)	[*]
b complex 1	$0 (Tier 4)	[*]
b complex 100 oral	$0 (Tier 4)	[*]
B COMPLEX W-VIT C	$0 (Tier 4)	[*]
b complex-vitamin b12	$0 (Tier 4)	[*]
b-12 dots	$0 (Tier 4)	[*]
b-complex	$0 (Tier 4)	[*]
b-complex with vitamin c oral capsule	$0 (Tier 4)	[*]
b-complex with vitamin c oral tablet	$0 (Tier 4)	[*]
b-complex with vitamin c oral tablet extended release	$0 (Tier 4)	[*]
balance b-100	$0 (Tier 4)	[*]
balance b-50	$0 (Tier 4)	[*]
balanced b-100 oral tablet 0.4 mg	$0 (Tier 4)	[*]
balanced b-50 complex	$0 (Tier 4)	[*]
balanced b-50 oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
beta carotene oral capsule 25,000 unit	$0 (Tier 4)	[*]
BIOCAL	$0 (Tier 4)	[*]
biosupp	$0 (Tier 4)	[*]
biotin oral capsule 2,500 mcg, 5 mg	$0 (Tier 4)	[*]
biotin oral tablet 1 mg, 300 mcg	$0 (Tier 4)	[*]
biovol	$0 (Tier 4)	[*]
C 1000-BIOFLAVONOIDS-ROSE HIPS	$0 (Tier 4)	[*]
c complex	$0 (Tier 4)	[*]
c-1000	$0 (Tier 4)	[*]
c-1000 with rose hips	$0 (Tier 4)	[*]
c-500	$0 (Tier 4)	[*]
ca-d3-mag ox-zinc-cop-mang-bor oral tablet, chewable 600 mg calcium- 400 unit-40 mg	$0 (Tier 4)	[*]
CA-D3-MAG OX-ZINC-COP-MANG-BOR ORAL TABLET,CHEWABLE 600 MG CALCIUM- 800 UNIT-40 MG	$0 (Tier 4)	[*]
cal-gest antacid	$0 (Tier 4)	[*]
CALCET PETITES	$0 (Tier 4)	[*]
calci-chew	$0 (Tier 4)	[*]
calcidol	$0 (Tier 4)	[*]
calcitrate	$0 (Tier 4)	[*]
CALCITRATE-VITAMIN D	$0 (Tier 4)	[*]
calcium 500 + d	$0 (Tier 4)	[*]
calcium 500 oral tablet,chewable	$0 (Tier 4)	[*]
calcium 500 with d	$0 (Tier 4)	[*]
calcium 600	$0 (Tier 4)	[*]
calcium 600 + d(3) oral tablet 600 mg(1,500mg) - 200 unit, 600 mg(1,500mg) -400 unit	$0 (Tier 4)	[*]
calcium 600 + minerals	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
calcium 600 with vitamin d3 oral capsule 600 mg(1, 500mg) -400 unit	$0 (Tier 4)	[*]
calcium 600 with vitamin d3 oral tablet,chewable	$0 (Tier 4)	[*]
calcium acetate oral capsule	$0.00-$8.50 (Tier 2)	MO
calcium antacid oral tablet,chewable 200 mg calcium (500 mg), 300 mg (750 mg)	$0 (Tier 4)	[*]
calcium carbonate oral suspension	$0 (Tier 4)	[*]
calcium carbonate oral tablet 500 mg calcium (1, 250 mg), 600 mg calcium (1,500 mg), 650 mg calcium (1,625 mg)	$0 (Tier 4)	[*]
calcium carbonate oral tablet,chewable 500 mg calcium (1,250 mg)	$0 (Tier 4)	[*]
calcium carbonate-vit d3-min oral tablet	$0 (Tier 4)	[*]
calcium carbonate-vitamin d3 oral capsule 600 mg(1,500mg) -400 unit	$0 (Tier 4)	[*]
calcium carbonate-vitamin d3 oral tablet 250-125 mg-unit, 500 mg(1,250mg) -200 unit, 500 mg(1, 250mg) -400 unit, 500mg (1,250mg) -600 unit, 600 mg(1,500mg) -200 unit, 600 mg(1,500mg) -400 unit	$0 (Tier 4)	[*]
CALCIUM CARBONATE-VITAMIN D3 ORAL TABLET 600 MG(1,500MG) -800 UNIT	$0 (Tier 4)	[*]
calcium carbonate-vitamin d3 oral tablet,chewable 500 mg(1,250mg) -400 unit	$0 (Tier 4)	[*]
calcium citrate + d	$0 (Tier 4)	[*]
CALCIUM CITRATE MALATE-VIT D3	$0 (Tier 4)	[*]
calcium citrate oral tablet 200 mg (950 mg)	$0 (Tier 4)	[*]
calcium citrate plus (vit b6)	$0 (Tier 4)	[*]
calcium citrate-vitamin d3 oral tablet 200-125 mg-unit, 315-200 mg-unit, 315-250 mg-unit	$0 (Tier 4)	[*]
calcium for women	$0 (Tier 4)	[*]
calcium gluconate oral tablet 45 mg (500 mg)	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
calcium soft chew oral tablet,chewable 500-200-40 mg-unit-mcg	$0 (Tier 4)	[*]
calcium with vitamin d	$0 (Tier 4)	[*]
CALCIUM-MAGNESIUM	$0 (Tier 4)	[*]
calcium-magnesium-copper-zinc	$0 (Tier 4)	[*]
calcium-magnesium-zinc oral tablet , 333-133-5 mg	$0 (Tier 4)	[*]
calcium-vitamin d3-vitamin k oral tablet,chewable 500-200-40 mg-unit-mcg	$0 (Tier 4)	[*]
CALTRATE 600 + D	$0 (Tier 4)	[*]
CALTRATE 600-D PLUS MINERALS ORAL TABLET	$0 (Tier 4)	[*]
CALTRATE WITH VITAMIN D3	$0 (Tier 4)	[*]
centamin	$0 (Tier 4)	[*]
CENTRAL-VITE WOMEN'S MATURE	$0 (Tier 4)	[*]
CENTRAM-CARE	$0 (Tier 4)	[*]
centravites 50 plus oral tablet 0.4-300-250 mg-mcg-mcg	$0 (Tier 4)	[*]
CENTRUM CHEWABLES	$0 (Tier 4)	[*]
CENTRUM COMPLETE	$0 (Tier 4)	[*]
CENTRUM KIDS	$0 (Tier 4)	[*]
CENTRUM MEN	$0 (Tier 4)	[*]
CENTRUM ORAL LIQUID	$0 (Tier 4)	[*]
CENTRUM SILVER ORAL TABLET	$0 (Tier 4)	[*]
CENTRUM SILVER WOMEN	$0 (Tier 4)	[*]
CENTRUM SPECIALIST HEART	$0 (Tier 4)	[*]
CENTRUM ULTRA MEN'S	$0 (Tier 4)	[*]
centrum women	$0 (Tier 4)	[*]
century adults 50 plus	$0 (Tier 4)	[*]
century cardio	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
century mature oral tablet 0.4-300-250 mg-mcg-mcg	$0 (Tier 4)	[*]
century oral tablet 18-400 mg-mcg	$0 (Tier 4)	[*]
CENTURY ULTIMATE MEN'S ORAL TABLET 8 MG IRON- 200 MCG-600 MCG	$0 (Tier 4)	[*]
century ultimate women's	$0 (Tier 4)	[*]
cerovite advanced formula	$0 (Tier 4)	[*]
cerovite jr oral tablet,chewable	$0 (Tier 4)	[*]
certa plus	$0 (Tier 4)	[*]
certavite senior-antioxidant	$0 (Tier 4)	[*]
certavite-antioxidant	$0 (Tier 4)	[*]
chelated zinc	$0 (Tier 4)	[*]
chewable-vite	$0 (Tier 4)	[*]
chewable-vite with iron	$0 (Tier 4)	[*]
child's chewable vitamins/iron oral tablet,chewable	$0 (Tier 4)	[*]
children's chewable vitamin	$0 (Tier 4)	[*]
children's chewables	$0 (Tier 4)	[*]
children's chewables extra c	$0 (Tier 4)	[*]
children's chewables with iron	$0 (Tier 4)	[*]
children's iron	$0 (Tier 4)	[*]
childs chew vite	$0 (Tier 4)	[*]
childs/iron	$0 (Tier 4)	[*]
cholecalciferol (vitamin d3) oral drops 400 unit/ml	$0 (Tier 4)	[*]
CITRACAL + D MAXIMUM	$0 (Tier 4)	[*]
citrus calcium oral tablet 315-250 mg-unit	$0 (Tier 4)	[*]
CLINIMIX 5%/D15W SULFITE FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX 5%/D25W SULFITE-FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX 4.25%-D20W SULF-FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX 4.25%-D25W SULF-FREE	$0.00-$8.50 (Tier 2)	B/D PAR

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
CLINIMIX 4.25%/D10W SULF FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX 5%-D20W(SULFITE-FREE)	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 4.25%/D10W SUL FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 4.25%/D25W SUL FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 4.25%/D5W SULF FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 5%/D15W SULFIT FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 5%/D20W SULFIT FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX E 5%/D25W SULFIT FREE	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX N14G30E 4.25%-D15W SF	$0.00-$8.50 (Tier 2)	B/D PAR
CLINIMIX N9G15E 2.75%-D7.5W SF	$0.00-$8.50 (Tier 2)	B/D PAR
complete 50+	$0 (Tier 4)	[*]
complete multi	$0 (Tier 4)	[*]
complete multi 50+	$0 (Tier 4)	[*]
complete multivitamin oral tablet	$0 (Tier 4)	[*]
complete multivitamin-mineral oral tablet	$0 (Tier 4)	[*]
complete oral tablet 18-500-300-250 mg-mcg-mcg-mcg	$0 (Tier 4)	[*]
complete senior oral tablet 0.4-300-250 mg-mcg-mcg	$0 (Tier 4)	[*]
complete women	$0 (Tier 4)	[*]
complex b-100 oral tablet extended release	$0 (Tier 4)	[*]
CORAL CALCIUM ORAL CAPSULE 185-50-100 MG-MG-UNIT	$0 (Tier 4)	[*]
cyanocobalamin (vitamin b-12) oral liquid	$0 (Tier 4)	[*]
cyanocobalamin (vitamin b-12) oral tablet 1,000 mcg, 100 mcg, 500 mcg	$0 (Tier 4)	[*]
cyanocobalamin (vitamin b-12) oral tablet extended release	$0 (Tier 4)	[*]
cyanocobalamin (vitamin b-12) sublingual tablet 2,500 mcg	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
d-vi-sol	$0 (Tier 4)	[*]
daily multi-vitamin	$0 (Tier 4)	[*]
daily multiple for men	$0 (Tier 4)	[*]
DAILY MULTIPLE FOR WOMEN	$0 (Tier 4)	[*]
daily multiple oral tablet , 18-400 mg-mcg	$0 (Tier 4)	[*]
DAILY MULTIPLE ORAL TABLET 400-120 MCG-MG	$0 (Tier 4)	[*]
daily multiple vitamins/iron	$0 (Tier 4)	[*]
daily multivitamin with iron	$0 (Tier 4)	[*]
daily multivitamin-minerals	$0 (Tier 4)	[*]
daily value	$0 (Tier 4)	[*]
daily vitamin formula	$0 (Tier 4)	[*]
daily vitamin formula-iron	$0 (Tier 4)	[*]
daily vitamin formula-minerals	$0 (Tier 4)	[*]
daily vitamin with iron	$0 (Tier 4)	[*]
daily vites/iron	$0 (Tier 4)	[*]
daily-vite	$0 (Tier 4)	[*]
DEKAS ESSENTIAL ORAL CAPSULE	$0 (Tier 4)	[*]
DEKAS PLUS (FOLIC ACID) ORAL CAPSULE	$0 (Tier 4)	[*]
DEKAS PLUS LIQUID	$0 (Tier 4)	[*]
dialyvite 800 oral tablet	$0 (Tier 4)	[*]
dino-life	$0 (Tier 4)	[*]
dino-life with extra c	$0 (Tier 4)	[*]
dino-life with iron-zinc	$0 (Tier 4)	[*]
duofer	$0 (Tier 4)	[*]
electrolytes-dextrose	$0 (Tier 4)	[*]
endur-c with rose hips	$0 (Tier 4)	[*]
ENFAMIL ENFALYTE	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ergocalciferol (vitamin d2) oral capsule	$0 (Tier 3)	[*]
ergocalciferol (vitamin d2) oral drops	$0 (Tier 4)	[*]
essentia	$0 (Tier 4)	[*]
ESSENTIAL BALANCE WITH LUTEIN	$0 (Tier 4)	[*]
essential daily	$0 (Tier 4)	[*]
ezfe 200	$0 (Tier 4)	[*]
fe c	$0 (Tier 4)	[*]
FEOSOL BIFERA	$0 (Tier 4)	[*]
feosol oral tablet 325 mg (65 mg iron)	$0 (Tier 4)	[*]
FER-IN-SOL	$0 (Tier 4)	[*]
ferate oral tablet 240 mg (27 mg iron)	$0 (Tier 4)	[*]
FERGON ORAL TABLET 240 MG (27 MG IRON)	$0 (Tier 4)	[*]
ferosul oral tablet	$0 (Tier 4)	[*]
ferretts	$0 (Tier 4)	[*]
FERRETTS IPS	$0 (Tier 4)	[*]
ferrex 150	$0 (Tier 4)	[*]
ferric x-150	$0 (Tier 4)	[*]
FERRIMIN 150	$0 (Tier 4)	[*]
ferro-time	$0 (Tier 4)	[*]
ferrous fumarate oral tablet 324 mg (106 mg iron)	$0 (Tier 4)	[*]
ferrous gluconate oral tablet 236 mg (27 mg iron), 240 mg (27 mg iron), 256 mg (28 mg iron), 324 mg (37.5 mg iron), 324 mg (38 mg iron)	$0 (Tier 4)	[*]
ferrous sulfate oral drops	$0 (Tier 4)	[*]
ferrous sulfate oral liquid	$0 (Tier 4)	[*]
ferrous sulfate oral solution	$0 (Tier 4)	[*]
ferrous sulfate oral tablet 325 mg (65 mg iron)	$0 (Tier 4)	[*]
FERROUS SULFATE ORAL TABLET EXTENDED RELEASE	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
ferrous sulfate oral tablet,delayed release (dr/ec)	$0 (Tier 4)	[*]
ferrousul	$0 (Tier 4)	[*]
FLINTSTONES COMPLETE (IRON) ORAL TABLET,CHEWABLE	$0 (Tier 4)	[*]
FLINTSTONES MULTIVITAMIN	$0 (Tier 4)	[*]
FLINTSTONES/EXTRA C ORAL TABLET, CHEWABLE	$0 (Tier 4)	[*]
fluoride (sodium) oral tablet	$0.00-$8.50 (Tier 2)	MO
fluoride (sodium) oral tablet,chewable 1 mg (2.2 mg sod. fluoride)	$0.00-$8.50 (Tier 2)	MO
folic acid injection	$0 (Tier 3)	[*]
folic acid oral tablet 1 mg	$0 (Tier 3)	[*]
FOLIC ACID-VIT B6-VIT B12 ORAL TABLET 0.5-5-0.2 MG	$0 (Tier 4)	[*]
folitab	$0 (Tier 4)	[*]
foltabs 800	$0 (Tier 4)	[*]
fosfree	$0 (Tier 4)	[*]
freamine iii 10 %	$0.00-$8.50 (Tier 2)	B/D PAR
fruit c-500	$0 (Tier 4)	[*]
full spectrum b-vitamin c	$0 (Tier 4)	[*]
FUSION	$0 (Tier 4)	[*]
gummi bear multivitamin	$0 (Tier 4)	[*]
gummy dinos oral tablet,chewable 200 mcg	$0 (Tier 4)	[*]
hair vitamins	$0 (Tier 4)	[*]
hair,skin and nails oral tablet	$0 (Tier 4)	[*]
halls defense	$0 (Tier 4)	[*]
HARD NAIL	$0 (Tier 4)	[*]
HEMOCYTE	$0 (Tier 4)	[*]
HEPATAMINE 8%	$0.00-$8.50 (Tier 2)	B/D PAR

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
hi-cal plus vit d	$0 (Tier 4)	[*]
high potency iron oral tablet 134 mg (27 mg iron)	$0 (Tier 4)	[*]
HIGH POTENCY IRON ORAL TABLET 27 MG IRON	$0 (Tier 4)	[*]
honey bears	$0 (Tier 4)	[*]
honey bears with iron-zinc	$0 (Tier 4)	[*]
I.L.X. B-12	$0 (Tier 4)	[*]
ICAPS	$0 (Tier 4)	[*]
ICAPS AREDS ORAL TABLET,DELAYED RELEASE (DR/EC)	$0 (Tier 4)	[*]
ICAPS MV	$0 (Tier 4)	[*]
ICAR ORAL SUSPENSION	$0 (Tier 4)	[*]
ICAR-C	$0 (Tier 4)	[*]
iferex 150	$0 (Tier 4)	[*]
infed	$0 (Tier 3)	[*]
INTEGRA	$0 (Tier 4)	[*]
intralipid intravenous emulsion 20 %	$0.00-$8.50 (Tier 2)	B/D PAR
INTRALIPID INTRAVENOUS EMULSION 30 %	$0.00-$8.50 (Tier 2)	B/D PAR
iron (ferrous sulfate)	$0 (Tier 4)	[*]
iron oral tablet 325 mg (65 mg iron)	$0 (Tier 4)	[*]
iron oral tablet extended release 159 mg (45 mg iron)	$0 (Tier 4)	[*]
iron,carbonyl-vitamin c	$0 (Tier 4)	[*]
JUST D	$0 (Tier 4)	[*]
KIDS MULTIVITAMIN-MINERALS	$0 (Tier 4)	[*]
klor-con 10	$0.00-$8.50 (Tier 2)	MO
klor-con 8	$0.00-$8.50 (Tier 2)	MO
klor-con m10	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
klor-con m15	$0.00-$8.50 (Tier 2)	MO
klor-con m20	$0.00-$8.50 (Tier 2)	MO
kobee	$0 (Tier 4)	[*]
lactated ringers intravenous	$0.00-$8.50 (Tier 2)	MO
laxative dietary supplement	$0 (Tier 4)	[*]
LIFE-PACK MEN'S	$0 (Tier 4)	[*]
LIFE-PACK WOMEN'S	$0 (Tier 4)	[*]
LIQUID B-12	$0 (Tier 4)	[*]
little animals	$0 (Tier 4)	[*]
little animals-iron oral tablet,chewable	$0 (Tier 4)	[*]
lysiplex plus oral liquid	$0 (Tier 4)	[*]
MAGNESIUM (OXIDE/AA CHELATE)	$0 (Tier 4)	[*]
MAGNESIUM AMINO ACID CHELATE ORAL TABLET 27 MG	$0 (Tier 4)	[*]
MAGNESIUM GLUCONATE ORAL TABLET 30 MG (550 MG)	$0 (Tier 4)	[*]
MAGNESIUM ORAL TABLET 30 MG	$0 (Tier 4)	[*]
magnesium oxide oral capsule 500 mg	$0 (Tier 4)	[*]
magnesium oxide oral tablet 400 mg (241.3 mg magnesium), 420 mg, 500 mg	$0 (Tier 4)	[*]
magnesium sulfate in water intravenous parenteral solution	$0.00-$8.50 (Tier 2)	
magnesium sulfate in water intravenous piggyback 2 gram/50 ml (4 %), 4 gram/50 ml (8 %)	$0.00-$8.50 (Tier 2)	
magnesium sulfate in water intravenous piggyback 4 gram/100 ml (4 %)	$0.00-$8.50 (Tier 2)	MO
magnesium sulfate injection solution	$0.00-$8.50 (Tier 2)	MO
magnesium sulfate injection syringe	$0.00-$8.50 (Tier 2)	
MEDTYCHOLL-B COMPLEX-LIVER	$0 (Tier 4)	[*]
mega multi for women	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
mega multiple/chelated mineral	$0 (Tier 4)	[*]
mega multivitamin for men	$0 (Tier 4)	[*]
mega multivitamin with mineral oral tablet 13.5-200-250 mg-mcg-mcg	$0 (Tier 4)	[*]
men's one daily oral tablet	$0 (Tier 4)	[*]
MERIBIN	$0 (Tier 4)	[*]
MONOCAL	$0 (Tier 4)	[*]
MTX SUPPORT	$0 (Tier 4)	[*]
multi complete with iron	$0 (Tier 4)	[*]
multi-day with iron	$0 (Tier 4)	[*]
multi-delyn with iron	$0 (Tier 4)	[*]
multi-vitamin hp/minerals	$0 (Tier 4)	[*]
multi-vitamins with iron	$0 (Tier 4)	[*]
multilex	$0 (Tier 4)	[*]
multilex-t and m	$0 (Tier 4)	[*]
multiple vitamin-minerals	$0 (Tier 4)	[*]
multiple vitamins	$0 (Tier 4)	[*]
multivitamin oral tablet	$0 (Tier 4)	[*]
multivitamin with iron	$0 (Tier 4)	[*]
multivitamin with minerals	$0 (Tier 4)	[*]
my-vitalife	$0 (Tier 4)	[*]
myferon 150	$0 (Tier 4)	[*]
NEPHRO-VITE	$0 (Tier 4)	[*]
nephronex	$0 (Tier 4)	[*]
NORMOSOL-M IN 5 % DEXTROSE	$0.00-$8.50 (Tier 2)	
NORMOSOL-R	$0.00-$8.50 (Tier 2)	MO
NORMOSOL-R PH 7.4	$0.00-$8.50 (Tier 2)	
NU-IRON	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
NU-MAG	$0 (Tier 4)	[*]
ocutabs	$0 (Tier 4)	[*]
omnicap	$0 (Tier 4)	[*]
once daily	$0 (Tier 4)	[*]
ONCOVITE	$0 (Tier 4)	[*]
one daily calcium/iron	$0 (Tier 4)	[*]
one daily complete	$0 (Tier 4)	[*]
one daily energy oral tablet	$0 (Tier 4)	[*]
one daily essential oral tablet , 0.4 mg	$0 (Tier 4)	[*]
one daily for men 50+ advanced	$0 (Tier 4)	[*]
one daily for women	$0 (Tier 4)	[*]
one daily maximum	$0 (Tier 4)	[*]
one daily men's 50 plus memory	$0 (Tier 4)	[*]
one daily multi-vit w-mineral oral tablet	$0 (Tier 4)	[*]
one daily multivit-iron(folic)	$0 (Tier 4)	[*]
one daily multivitamin oral tablet	$0 (Tier 4)	[*]
one daily oral tablet	$0 (Tier 4)	[*]
one daily plus iron oral tablet 18-400 mg-mcg	$0 (Tier 4)	[*]
one daily plus minerals	$0 (Tier 4)	[*]
one daily with iron	$0 (Tier 4)	[*]
ONE DAILY WOMEN 50 PLUS	$0 (Tier 4)	[*]
one daily women's oral tablet 27-0.4 mg	$0 (Tier 4)	[*]
one daily womens 50 plus	$0 (Tier 4)	[*]
one-a-day essential	$0 (Tier 4)	[*]
ONE-A-DAY MEN 50 PLUS (GINKGO)	$0 (Tier 4)	[*]
one-a-day teen advantage	$0 (Tier 4)	[*]
ONE-A-DAY WOMENS FORMULA ORAL TABLET 18 MG IRON-400 MCG-500 MG CA	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
one-tablet-daily	$0 (Tier 4)	[*]
oralyte	$0 (Tier 4)	[*]
ORAZINC	$0 (Tier 4)	[*]
OS-CAL 500 + D3	$0 (Tier 4)	[*]
oysco 500/d oral tablet	$0 (Tier 4)	[*]
oysco-500	$0 (Tier 4)	[*]
oyst-cal-500	$0 (Tier 4)	[*]
oyster shell + d3	$0 (Tier 4)	[*]
oyster shell calcium	$0 (Tier 4)	[*]
oyster shell calcium 500	$0 (Tier 4)	[*]
oyster shell calcium and mag	$0 (Tier 4)	[*]
oyster shell calcium-vit d2 oral tablet 250 (625)-125 mg-unit	$0 (Tier 4)	[*]
oyster shell calcium-vit d3	$0 (Tier 4)	[*]
oystercal-d	$0 (Tier 4)	[*]
pantothenic acid (vit b5)	$0 (Tier 4)	[*]
PEDIALYTE ADVANCED CARE	$0 (Tier 4)	[*]
pedialyte freezer pops	$0 (Tier 4)	[*]
pedialyte oral solution	$0 (Tier 4)	[*]
pedialyte singles	$0 (Tier 4)	[*]
pediatric electrolyte oral solution	$0 (Tier 4)	[*]
pediatric freezer pops	$0 (Tier 4)	[*]
PERIDIN-C	$0 (Tier 4)	[*]
PHILLIPS	$0 (Tier 4)	[*]
PHOSLYRA	$0.00-$8.50 (Tier 2)	MO
PLASMA-LYTE 148	$0.00-$8.50 (Tier 2)	
poly-iron	$0 (Tier 4)	[*]
poly-vitamins	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
polyvitamin with iron	$0 (Tier 4)	[*]
potassium chlorid-d5-0.45%nacl intravenous parenteral solution 10 meq/l, 30 meq/l, 40 meq/l	$0.00-$8.50 (Tier 2)	
potassium chlorid-d5-0.45%nacl intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	MO
potassium chloride in 0.9%nacl intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	
potassium chloride in 5 % dex intravenous parenteral solution 20 meq/l, 30 meq/l, 40 meq/l	$0.00-$8.50 (Tier 2)	
potassium chloride in lr-d5 intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	MO
potassium chloride in lr-d5 intravenous parenteral solution 40 meq/l	$0.00-$8.50 (Tier 2)	
potassium chloride in water intravenous piggyback 10 meq/100 ml, 10 meq/50 ml	$0.00-$8.50 (Tier 2)	MO
potassium chloride in water intravenous piggyback 20 meq/100 ml, 20 meq/50 ml, 30 meq/100 ml, 40 meq/100 ml	$0.00-$8.50 (Tier 2)	
potassium chloride intravenous solution	$0.00-$8.50 (Tier 2)	MO
potassium chloride oral capsule, extended release	$0 (Tier 1)	MO
potassium chloride oral liquid	$0 (Tier 1)	MO
potassium chloride oral tablet extended release	$0 (Tier 1)	MO
potassium chloride oral tablet,er particles/crystals	$0 (Tier 1)	MO
potassium chloride-0.45 % nacl	$0.00-$8.50 (Tier 2)	
potassium chloride-d5-0.2%nacl intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	MO
potassium chloride-d5-0.2%nacl intravenous parenteral solution 30 meq/l, 40 meq/l	$0.00-$8.50 (Tier 2)	
potassium chloride-d5-0.3%nacl intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	
potassium chloride-d5-0.9%nacl intravenous parenteral solution 20 meq/l	$0.00-$8.50 (Tier 2)	MO

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
potassium chloride-d5-0.9%nacl intravenous parenteral solution 40 meq/l	$0.00-$8.50 (Tier 2)	
prenatal vitamin plus low iron	$0.00-$8.50 (Tier 2)	MO
PREVENT	$0 (Tier 4)	[*]
PRO FE	$0 (Tier 4)	[*]
PROFERRIN ES	$0 (Tier 4)	[*]
pyridoxine (vitamin b6) oral tablet 100 mg, 25 mg, 50 mg	$0 (Tier 4)	[*]
quintabs-m iron free	$0 (Tier 4)	[*]
RABANO YODADO	$0 (Tier 4)	[*]
rena-vite	$0 (Tier 4)	[*]
RENAL VITAMIN	$0 (Tier 4)	[*]
RENAL-VITE	$0 (Tier 4)	[*]
riboflavin (vitamin b2) oral tablet 100 mg	$0 (Tier 4)	[*]
ringer's intravenous	$0.00-$8.50 (Tier 2)	
risacal-d	$0 (Tier 4)	[*]
SCOOBY-DOO ONE A DAY	$0 (Tier 4)	[*]
selenium oral tablet	$0 (Tier 4)	[*]
selenium oral tablet,delayed release (dr/ec)	$0 (Tier 4)	[*]
senior tabs	$0 (Tier 4)	[*]
sentry	$0 (Tier 4)	[*]
sentry (with lutein)	$0 (Tier 4)	[*]
sentry senior	$0 (Tier 4)	[*]
SLOW FE	$0 (Tier 4)	[*]
SLOW RELEASE IRON ORAL TABLET EXTENDED RELEASE 142 MG (45 MG IRON), 159 MG (45 MG IRON)	$0 (Tier 4)	[*]
slow release iron oral tablet extended release 143 mg (45 mg iron)	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
SLOW-MAG	$0 (Tier 4)	[*]
sodium chloride 0.45 % intravenous parenteral solution	$0.00-$8.50 (Tier 2)	MO
sodium chloride 0.45 % intravenous piggyback	$0.00-$8.50 (Tier 2)	
sodium chloride 3% intravenous injection solution	$0.00-$8.50 (Tier 2)	MO
sodium chloride 5% intravenous injection solution	$0.00-$8.50 (Tier 2)	
sodium chloride intravenous	$0.00-$8.50 (Tier 2)	MO
soothing pureway-c	$0 (Tier 4)	[*]
spectravite advanced formula oral tablet 18-400 mg-mcg	$0 (Tier 4)	[*]
spectravite men's	$0 (Tier 4)	[*]
spectravite senior oral tablet 500-300-250 mcg	$0 (Tier 4)	[*]
spectravite ultra women	$0 (Tier 4)	[*]
spectravite ultra women's sr	$0 (Tier 4)	[*]
strawberry c	$0 (Tier 4)	[*]
stress b with zinc	$0 (Tier 4)	[*]
stress formula	$0 (Tier 4)	[*]
stress formula 600 c	$0 (Tier 4)	[*]
stress formula with iron	$0 (Tier 4)	[*]
stress formula with iron(sulf)	$0 (Tier 4)	[*]
stress formula with zinc	$0 (Tier 4)	[*]
super b complex-vitamin c	$0 (Tier 4)	[*]
super b maxi complex	$0 (Tier 4)	[*]
super b-50 complex	$0 (Tier 4)	[*]
super b/c	$0 (Tier 4)	[*]
super calcium	$0 (Tier 4)	[*]
super multiple oral tablet	$0 (Tier 4)	[*]
super multivitamin	$0 (Tier 4)	[*]
super quints	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
super thera vite m	$0 (Tier 4)	[*]
superplex-t	$0 (Tier 4)	[*]
tab-a-vite	$0 (Tier 4)	[*]
tab-a-vite/iron	$0 (Tier 4)	[*]
TANDEM DUAL ACTION	$0 (Tier 4)	[*]
thera m plus (ferrous fumarat)	$0 (Tier 4)	[*]
thera oral tablet	$0 (Tier 4)	[*]
thera-m	$0 (Tier 4)	[*]
thera-tabs	$0 (Tier 4)	[*]
theralogix companion	$0 (Tier 4)	[*]
therapeutic liquid	$0 (Tier 4)	[*]
therapeutic-m oral tablet 9 mg iron-400 mcg	$0 (Tier 4)	[*]
therapeutic-m vitamin/minerals	$0 (Tier 4)	[*]
theratrum complete 50 plus-lyc	$0 (Tier 4)	[*]
theratrum complete with lutein	$0 (Tier 4)	[*]
therems	$0 (Tier 4)	[*]
THEREMS-H	$0 (Tier 4)	[*]
therems-m	$0 (Tier 4)	[*]
thiamine hcl (vitamin b1) oral tablet 100 mg, 250 mg	$0 (Tier 4)	[*]
total b/c	$0 (Tier 4)	[*]
totalday multiple	$0 (Tier 4)	[*]
travasol 10 %	$0.00-$8.50 (Tier 2)	B/D PAR; MO
TRI-VI-SOL	$0 (Tier 4)	[*]
TROPHAMINE 10 %	$0.00-$8.50 (Tier 2)	B/D PAR; MO
TROPHAMINE 6%	$0.00-$8.50 (Tier 2)	B/D PAR
ultimate women's complete 50+	$0 (Tier 4)	[*]
ultra b-100 complex oral tablet	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
unicomplex-m	$0 (Tier 4)	[*]
VITA-BEE WITH C	$0 (Tier 4)	[*]
vitalee	$0 (Tier 4)	[*]
vitalets oral tablet,chewable	$0 (Tier 4)	[*]
vitamin a oral capsule 10,000 unit, 8,000 unit	$0 (Tier 4)	[*]
vitamin b complex	$0 (Tier 4)	[*]
vitamin b complex-folic acid oral tablet	$0 (Tier 4)	[*]
vitamin b-1	$0 (Tier 4)	[*]
vitamin b-12 oral tablet	$0 (Tier 4)	[*]
vitamin b-12 oral tablet extended release 1,000 mcg, 2,000 mcg	$0 (Tier 4)	[*]
vitamin b-12 sublingual tablet 2,500 mcg	$0 (Tier 4)	[*]
vitamin b-2	$0 (Tier 4)	[*]
vitamin b-6 oral tablet 100 mg, 25 mg, 50 mg	$0 (Tier 4)	[*]
vitamin c drops	$0 (Tier 4)	[*]
vitamin c oral capsule, extended release	$0 (Tier 4)	[*]
vitamin c oral powder	$0 (Tier 4)	[*]
VITAMIN C ORAL POWDER EFFERVESCENT IN PACKET	$0 (Tier 4)	[*]
vitamin c oral tablet 1,000 mg, 250 mg, 500 mg	$0 (Tier 4)	[*]
vitamin c oral tablet extended release	$0 (Tier 4)	[*]
vitamin c oral tablet,chewable 250 mg, 500 mg	$0 (Tier 4)	[*]
vitamin c with rose hips oral tablet	$0 (Tier 4)	[*]
vitamin c with rose hips oral tablet extended release	$0 (Tier 4)	[*]
vitamin d2	$0 (Tier 3)	[*]
vitamin e (dl, acetate) oral capsule 100 unit, 400 unit	$0 (Tier 4)	[*]
vitamin e acetate	$0 (Tier 4)	[*]
vitamin e mixed oral capsule	$0 (Tier 4)	[*]

Nombre del medicamento	Lo que el medicamento le costará (Nivel)	Acciones necesarias, restricciones o límites de uso
vitamin e oral capsule	$0 (Tier 4)	[*]
VITAMIN E ORAL DROPS 100 UNIT/0.25 ML	$0 (Tier 4)	[*]
vitamin e oral drops 50 unit/ml	$0 (Tier 4)	[*]
vitamins a and d	$0 (Tier 4)	[*]
vitamins and minerals	$0 (Tier 4)	[*]
vitamins b complex oral capsule	$0 (Tier 4)	[*]
vitamins b complex oral tablet	$0 (Tier 4)	[*]
VITAMINS B COMPLEX ORAL TABLET 500 MG-400 MCG- 18 MG IRON	$0 (Tier 4)	[*]
vitamins for hair oral tablet	$0 (Tier 4)	[*]
vitatrum	$0 (Tier 4)	[*]
VITRUM SENIOR ORAL TABLET 500-300-250 MCG	$0 (Tier 4)	[*]
wee care	$0 (Tier 4)	[*]
WOMEN'S DAILY FORMULA ORAL TABLET 18 MG IRON-400 MCG-500 MG CA	$0 (Tier 4)	[*]
women's daily formula oral tablet 27-0.4 mg	$0 (Tier 4)	[*]
WOMEN'S ONE DAILY	$0 (Tier 4)	[*]
yelets	$0 (Tier 4)	[*]
zinc	$0 (Tier 4)	[*]
ZINC (WITH A AND C) LOZENGES	$0 (Tier 4)	[*]
ZINC GLUCONATE ORAL LOZENGE	$0 (Tier 4)	[*]
zinc gluconate oral tablet	$0 (Tier 4)	[*]
zinc sulfate oral	$0 (Tier 4)	[*]
ZINC-15	$0 (Tier 4)	[*]
zinc-220	$0 (Tier 4)	[*]
zoo chews	$0 (Tier 4)	[*]
zoo friends original	$0 (Tier 4)	[*]

Índice de medicamentos

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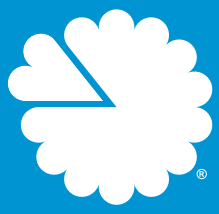
ZYTIGA ORAL TABLET 500 MG 38



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H8786_19_36642_T_003_SP CMS Approved 09/13/2018
Ident. del formulario: TX_MMP_19259_v7_1902_1 Versión: v7
Emitido 1/23/2019