

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
Analgesics				
<i>acetaminophen/caffeine/dihydrocodeine</i>	1			
<i>acetaminophen/codeine</i>	1			
ANAPROX	3			
AVINZA	2			
<i>butorphanol nasal</i>	1			
CELEBREX	2	X		
CYMBALTA	3		X	
DARVOCET A500	3			
DARVOCET-N	3			
DARVON	3			
DILAUDID tabs, 8 mg	3			
DILAUDID-HP 10 mg/mL	3			
DOLOPHINE	3			
DURAGESIC	3	X		
EC-NAPROSYN	3			
<i>etodolac</i>	1			
<i>fentanyl transdermal</i>	1	X		
FIORICET/CODEINE	3			
FIORINAL/CODEINE	3			
<i>hydrocodone/acetaminophen</i>	1			
<i>hydrocodone/ibuprofen</i>	1			
<i>hydromorphone inj, 10 mg/mL</i>	1			
<i>hydromorphone tabs</i>	1			
<i>ibuprofen</i>	1			
<i>ketoprofen</i>	1			
<i>ketorolac tabs</i>	1	X		
LEVO-DROMORAN	3			
<i>levorphanol</i>	1			
LORCET	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
LORTAB	3			
MAXIDONE	3			
<i>methadone conc, tabs</i>	1			
<i>morphine sulfate</i>	1			
<i>morphine sulfate ER</i>	1			
MOTRIN	3			
MS CONTIN	3			
NAPROSYN	3			
<i>naproxen</i>	1			
<i>naproxen DR</i>	1			
<i>naproxen sodium</i>	1			
NORCO	3			
OPANA inj	3			
ORAMORPH SR	3			
<i>oxycodone</i>	1			
<i>oxycodone ER</i>	1	X		
<i>oxycodone/acetaminophen</i>	1			
<i>oxycodone/aspirin</i>	1			
OXYCONTIN	2	X		
OXYIR	3			
PANLOR SS	3			
<i>pentazocine/acetaminophen</i>	1			
PERCOCET 5-325 mg, 7.5-325 mg, 7.5-500 mg, 10-325 mg, 10-650 mg	3			
PERCODAN	3			
<i>propoxyphene hcl</i>	1			
<i>propoxyphene hcl/acetaminophen</i>	1			
<i>propoxyphene napsylate/acetaminophen</i>	1			
ROXANOL	3			
ROXICODONE	3			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
SUBOXONE	3			
SUBUTEX	3			
TALACEN	3			
<i>tramadol</i>	1			
<i>tramadol/acetaminophen</i>	1			
TYLENOL/CODEINE	3			
TYLOX	3			
ULTRACET	3			
ULTRAM	3			
VICODIN	3			
VICOPROFEN	3			
Anesthetics				
EMLA crm	3			
<i>lidocaine local inj, 0.5%, 1%, 2%</i>	1			
<i>lidocaine viscous</i>	1			
<i>lidocaine/prilocaine crm</i>	1			
LIDODERM	3			
XYLOCAINE local inj, 0.5%, 1%, 2%	3			
XYLOCAINE VISCOUS	3			
Antibacterials				
ADOXA tabs	3			
<i>amikacin inj</i>	1			
AMIKIN inj	3			
<i>amoxicillin</i>	1			
<i>amoxicillin/potassium clavulanate</i>	1			
AMOXIL	3			
<i>ampicillin</i>	1			
<i>ampicillin sodium for inj</i>	1			
AMPICILLIN SODIUM for inj, 10 g	3			
<i>ampicillin/sulbactam for inj</i>	1			
AUGMENTIN chew, 200 mg, 400 mg; for susp, 200 mg/5 mL, 400 mg/5 mL, 600 mg/5 mL; tabs	3			
AVELOX inj	3			
AZACTAM for inj	2			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>azithromycin</i>	1			
AZITHROMYCIN powder pack	2			
<i>bacitracin for inj</i>	1			
BACITRACIN for inj	3			
BACTOCILL	3			
BACTRIM	3			
BIAXIN tabs	3			
BIAXIN XL	3			
BICILLIN C-R inj	3			
BICILLIN L-A inj	3			
<i>cefaclor caps</i>	1			
<i>cefaclor ER</i>	1			
<i>cefadroxil</i>	1			
<i>cefazolin for inj</i>	1			
CEFAZOLIN for inj	3			
<i>cefdinir</i>	1			
<i>cefepime for inj</i>	S			
<i>cefotaxime for inj</i>	1			
<i>cefoxitin for inj</i>	1			
<i>cefpodoxime</i>	1			
<i>cefprozil</i>	1			
<i>ceftazidime for inj</i>	1			
CEFTIN tabs	3			
<i>ceftriaxone for inj</i>	1			
CEFTRIAZONE inj	3			
<i>cefuroxime axetil</i>	1			
<i>cefuroxime sodium for inj</i>	1			
CEFUROXIME SODIUM for IV	3			
CEFZIL	3			
<i>cephalexin caps, susp</i>	1			
CHLORAMPHENICOL for inj	3			
CIPRO	3			
CIPRO XR	3			
<i>ciprofloxacin</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>ciprofloxacin/ciprofloxacin hcl ER</i>	1			
CLAFORAN for inj	3			
<i>clarithromycin tabs</i>	1			
CLEOCIN	3			
<i>clindamycin caps, vaginal crm</i>	1			
<i>clindamycin inj</i>	1			
<i>colistimethate sodium</i>	S			
COLY-MYCIN M	S			
CUBICIN	S			
DECLOMYCIN	3			
<i>demeclocycline</i>	1			
<i>dicloxacillin</i>	1			
<i>doxycycline hyclate</i>	1			
<i>doxycycline monohydrate</i>	1			
DURICEF	3			
DYNACIN	3			
ERYTHROCIN for inj	3			
<i>erythromycin ethylsuccinate</i>	1			
ERYTHROMYCIN LACTOBIONATE for inj	3			
<i>erythromycin stearate</i>	1			
<i>erythromycin/sulfisoxazole</i>	1			
FLAGYL caps, tabs	3			
FORTAZ	3			
<i>gentamicin inj</i>	1			
GENTAMICIN inj	3			
GEOCILLIN	2			
HIPREX	3			
INVANZ	S			
KANAMYCIN	3			
KEFLEX caps 250 mg, 500 mg; susp	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
LEVAQUIN	2			
LEVAQUIN I.V.	3			
MACROBID	3			
MACRODANTIN 50 mg, 100 mg	3			
MAXIPIME	S			
MEFOXIN	3			
MERREM	S			
<i>methenamine hippurate</i>	1			
METRO IV	3			
METROGEL VAGINAL	3			
<i>metronidazole caps, tabs, vaginal gel</i>	1			
<i>metronidazole inj</i>	1			
MINOCIN	3			
<i>minocycline</i>	1			
MONODOX 50 mg, 100 mg	3			
NAFCILLIN for inj	3			
NALLPEN	3			
<i>neomycin sulfate</i>	1			
<i>nitrofurantoin macrocrystalline</i>	1			
<i>nitrofurantoin monohydrate macrocrystalline</i>	1			
<i>ofloxacin</i>	1			
OMNICEF	3			
OXACILLIN SODIUM for inj	3			
PEDIAZOLE	3			
<i>penicillin g potassium for inj</i>	1			
PENICILLIN G POTASSIUM for inj	3			
PENICILLIN G PROCAINE inj	3			
PENICILLIN G SODIUM for inj	3			
<i>penicillin v potassium</i>	1			
PFIZERPEN-G	3			

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PIPERACILLIN	3			
<i>polymyxin B for inj</i>	1			
PREVPAC	2			
PRIMAXIN	S			
ROCEPHIN for inj	3			
SEPTRA	3			
STREPTOMYCIN	3			
SULFADIAZINE	3			
<i>sulfamethoxazole/trimethoprim susp, tabs</i>	1			
SULFAMETHOXAZOLE/ TRIMETHOPRIM inj	3			
SYNERCID	S			
TAZICEF	3			
<i>tetracycline</i>	1			
TIMENTIN	S			
<i>tobramycin inj</i>	1			
TOBRAMYCIN inj	3			
<i>trimethoprim</i>	1			
TYGACIL	S			
UNASYN	3			
UREX	3			
VANCOCIN caps	2			
VANCOMYCIN for inj	3			
<i>vancomycin for inj 500 mg, 1 g, 5 g</i>	1			
VANTIN	3			
VIBRAMYCIN caps	3			
VIBRATAB	3			
ZINACEF for inj, 750 mg, 1.5 g	3			
ZITHROMAX	3			
ZITHROMAX powder pack	2			
ZOSYN	S			
ZYVOX inj	S			
ZYVOX susp, tabs	2			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
Anticonvulsants				
<i>carbamazepine</i>	1			
CARBATROL	3			
CELONTIN	3			
CEREBYX	3			
DEPACON	3			
DEPAKENE	3			
DEPAKOTE	2			
DEPAKOTE ER	2			
DILANTIN	3			
<i>ethosuximide</i>	1			
FELBATOL	3			
<i>fosphenytoin sodium</i>	1			
<i>gabapentin</i>	1			
GABITRIL	3			
KEPPRA	2			
LAMICTAL tabs	2			
LAMICTAL chew, 5 mg, 25 mg	3			
<i>lamotrigine chew, 5 mg, 25 mg</i>	1			
LYRICA	3			X
MYSOLINE	3			
NEURONTIN	3			
PEGANONE	3			
PHENYTEK	3			
<i>phenytoin sodium extended</i>	1			
<i>phenytoin susp</i>	1			
<i>primidone</i>	1			
TEGRETOL	3			
TEGRETOL XR	3			
TOPAMAX	3			X
TRILEPTAL	3			
<i>valproic acid</i>	1			
ZARONTIN	3			
ZONEGRAN	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>zonisamide</i>	1			
Antidementia Agents				
ARICEPT	2			
ARICEPT ODT	2			
<i>ergoloid mesylates tabs</i>	1			
EXELON	2			
NAMENDA	2			
RAZADYNE	3			
RAZADYNE ER	3			
Antidepressants				
<i>amitriptyline</i>	1			
AMOXAPINE	3			
ANAFRANIL	3			
<i>bupropion</i>	1			
<i>bupropion ER 12 hr</i>	1			
<i>bupropion ER 24 hr</i>	1			
CELEXA	3			X
<i>chlordiazepoxide/amitriptyline</i>	1			
<i>citalopram</i>	1			
<i>clomipramine</i>	1			
CYMBALTA	3			X
<i>desipramine</i>	1			
<i>doxepin</i>	1			
EFFEXOR	3			X
EFFEXOR XR	2			X
EMSAM	3			
<i>fluoxetine</i>	1			
<i>fluvoxamine</i>	1			
<i>imipramine hcl</i>	1			
IMIPRAMINE PAMOATE	3			
LIMBITROL	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
MAPROTILINE	3			
MARPLAN	3			
<i>mirtazapine</i>	1			
<i>mirtazapine orally disintegrating tabs</i>	1			
NARDIL	2			
<i>nefazodone</i>	1			
NORPRAMIN	3			
<i>nortriptyline</i>	1			
PAMELOR	3			
PARNATE	3			
<i>paroxetine</i>	1			
PAXIL	3			X
PAXIL CR	3			X
PROZAC	3			X
PROZAC WEEKLY	3			
RAPIFLUX	3			X
REMERON	3			
REMERON SOLTAB	3			
<i>sertraline</i>	1			
SURMONTIL	3			
TOFRANIL	3			
TOFRANIL-PM	3			
<i>tranylcypromine</i>	1			
<i>trazodone</i>	1			
<i>trimipramine</i>	1			
<i>venlafaxine</i>	1			X
VIVACTIL	3			
WELLBUTRIN	3			X
WELLBUTRIN SR	3			X
WELLBUTRIN XL 150 mg	2			

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WELLBUTRIN XL 300 mg	3			
ZOLOFT	3			X
Antidotes, Deterrents, and Toxicologic Agents				
ANTABUSE	3			
ANTIZOL	S			
<i>bupropion ER 12 hr (smoking deterrent)</i>	1			
CHANTIX	3			
CHEMET	3			
EXJADE	S			
KAYEXALATE	3			
<i>naltrexone</i>	1			
<i>nicotine transdermal</i>	1			
NICOTROL nasal spray	3			
REVIA	3			
<i>sodium polystyrene sulfonate</i>	1			
SYPRINE	3			
VIVITROL	S			
ZYBAN	3			
Antiemetics				
ANTIVERT 12.5 mg, 25 mg	3			
<i>chlorpromazine tabs</i>	1			
CHLORPROMAZINE inj	3			
EMEND	2			
<i>hydroxyzine hcl syrup, tabs</i>	1			
<i>hydroxyzine pamoate</i>	1			
<i>meclizine</i>	1			
<i>metoclopramide soln, tabs</i>	1			
<i>ondansetron soln; tabs, 4 mg, 8 mg</i>	1			
ONDANSETRON tabs, 24 mg	2			
<i>ondansetron orally disintegrating tabs</i>	1			
<i>prochlorperazine inj, supp, tabs</i>	1			
<i>promethazine supp, syrup, tabs</i>	1			
REGLAN tabs	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
TIGAN caps	3			
TRANSDERM-SCOP	3			
<i>trimethobenzamide caps</i>	1			
VISTARIL caps	3			
ZOFRAN soln, tabs	3			
ZOFRAN ODT	3			
Antifungals				
ANCOBON	3			
CANCIDAS	S			
<i>clotrimazole</i>	1			
DIFLUCAN	3			
<i>fluconazole tabs</i>	1			
<i>fluconazole IV</i>	1			
GRIFULVIN V susp	3			
GRIS-PEG	2			
<i>griseofulvin microsize susp</i>	1			
<i>itraconazole</i>	1			
<i>ketoconazole</i>	1			
LAMISIL	3			
MYCAMINE	S			
MYCELEX	3			
<i>nystatin</i>	1			
SPORANOX caps	3			
SPORANOX IV	S			
TERAZOL 3	3			
TERAZOL 7	3			
<i>terbinafine</i>	1			
<i>terconazole</i>	1			
VFEND IV	S			
Antigout Agents				
<i>allopurinol</i>	1			
ALOPRIM	3			
<i>colchicine</i>	1			
<i>probenecid</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>probenecid/colchicine</i>	1			
ZYLOPRIM	3			
Anti-inflammatory Agents				
ANAPROX	3			
ARTHROTEC	3			
CATAFLAM	3			
CELEBREX	2	X		
CLINORIL	3			
DAYPRO	3			
<i>diclofenac potassium</i>	1			
<i>diclofenac sodium DR</i>	1			
<i>diclofenac sodium ER</i>	1			
EC-NAPROSYN	3			
<i>etodolac</i>	1			
<i>etodolac ER</i>	1			
FELDENE	3			
<i>fenoprofen</i>	1			
<i>flurbiprofen</i>	1			
<i>ibuprofen</i>	1			
INDOCIN SR	3			
<i>indomethacin</i>	1			
<i>indomethacin ER</i>	1			
<i>ketoprofen</i>	1			
KETOPROFEN ER	1			
<i>magnesium salicylate</i>	1			
<i>meloxicam tabs</i>	1			
MOBIC tabs	3			
MOTRIN	3			
<i>nabumetone</i>	1			
NAPRELAN 500 mg	3			
NAPROSYN	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>naproxen</i>	1			
<i>naproxen DR</i>	1			
<i>naproxen sodium</i>	1			
<i>naproxen sodium ER</i>	1			
<i>oxaprozin</i>	1			
<i>piroxicam</i>	1			
<i>sulindac</i>	1			
<i>tolmetin sodium 400 mg</i>	1			
VOLTAREN	3			
VOLTAREN-XR	3			
Antimigraine Agents				
<i>butalbital/acetaminophen/caffeine/codeine</i>	1			
<i>butalbital/aspirin/caffeine/codeine</i>	1			
CAFERGOT	3			
DEPAKOTE ER	2			
<i>ergotamine/caffeine tabs</i>	1			
IMITREX	2	X		
MAXALT	2	X		
MAXALT-MLT	2	X		
MIGERGOT	3			
MIGRANAL	3			
ZOMIG	2	X		
ZOMIG ZMT	2	X		
Antimyasthenic Agents				
MESTINON	3			
<i>pyridostigmine tabs</i>	1			
Antimycobacterials				
CAPASTAT for inj	3			
DAPSONE	3			
<i>ethambutol</i>	1			

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<i>isoniazid inj</i>	1			
<i>isoniazid tabs</i>	1			
<i>isoniazid/rifampin</i>	1			
MYAMBUTOL	3			
MYCOBUTIN	2			
NYDRAZID	3			
<i>pyrazinamide</i>	1			
RIFADIN	3			
RIFAMATE	3			
<i>rifampin caps</i>	1			
<i>rifampin for inj</i>	1			
Antineoplastics				
ABRAXANE	S			
ACTIMMUNE	S			
ADRIAMYCIN	3			
ALFERON N	S			
ALIMTA	S			
ALKERAN for inj	S			
ARRANON	S			
AVASTIN	S			
BEXXAR	S			
BICNU	3			
BLENOXANE	S			
<i>bleomycin</i>	S			
BUSULFEX	S			
CAMPATH	S			
CAMPTOSAR	S			
<i>carboplatin</i>	1			
CEENU	3			
CERUBIDINE	S			
<i>cisplatin</i>	1			
<i>cladribine</i>	S			
CLOLAR	S			
COSMEGEN	S			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>cyclophosphamide</i>	1			
<i>cytarabine inj</i>	1			
CYTARABINE for inj	3			
CYTOXAN	3			
<i>dacarbazine 200 mg</i>	1			
DACARBAZINE 100 mg	3			
DACOGEN	S			
DAUNORUBICIN	S			
<i>daunorubicin</i>	S			
DAUNOXOME	S			
<i>dexrazoxane</i>	S			
DOXIL	3			
<i>doxorubicin</i>	1			
DTIC-DOME	3			
ELITEK	S			
ELLECE	S			
ELOXATIN	S			
ELSPAR	S			
<i>epirubicin inj</i>	S			
EPIRUBICIN for inj	S			
ERBITUX	S			
ETHYOL	S			
ETOPOPHOS	3			
<i>etoposide inj</i>	1			
<i>floxuridine</i>	1			
FLUDARA	S			
<i>fludarabine for inj</i>	S			
FLUDARABINE inj	S			
<i>fluorouracil inj</i>	1			
FLUOROURACIL inj	3			
FUDR	3			
GEMZAR	S			
GLEEVEC	S			
HERCEPTIN	S			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
HEXALEN	S			
HYCAMTIN	S			
HYDREA	3			
<i>hydroxyurea</i>	1			
IDAMYCIN PFS	S			
<i>idarubicin</i>	S			
IFEX	S			
IFEX/MESNEX	S			
<i>ifosfamide</i>	S			
IFOSFAMIDE	S			
<i>ifosfamide/mesna</i>	S			
INTRON-A	S			
IRESSA	S			
KEPIVANCE	S			
LEUCOVORIN CALCIUM	3			
<i>leucovorin calcium</i>	1			
LEUKERAN	2			
LEUSTATIN	S			
MATULANE	S			
MEGACE	3			
<i>mercaptopurine</i>	1			
<i>mesna</i>	S			
MESNEX	S			
<i>methotrexate inj</i>	1			
<i>methotrexate tabs</i>	1			
<i>mitomycin</i>	1			
<i>mitoxantrone</i>	S			
MUSTARGEN	3			
MYLOTARG	S			
NAVELBINE	S			
NEXAVAR	S			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
NIPENT	S			
NOVANTRONE	S			
ONCASPAR	S			
ONTAK	S			
<i>paclitaxel</i>	S			
PARAPLATIN	3			
<i>pentostatin</i>	S			
PHOTOFRIN	S			
PLANTINOL AQ	3			
PROLEUKIN	S			
PURINETHOL	3			
REVLIMID	S			
RITUXAN	S			X
ROFERON-A 3 million units/0.5 mL	3			
ROFERON-A 6 million units/0.5 mL, 9 million units/0.5 mL	S			
SPRYCEL	S			
SUTENT	S			
TABLOID	3			
TARCEVA	S			
TARGRETIN	S			
TAXOL	S			
TAXOTERE	S			
THERACYS	3			
<i>thiotepa</i>	1			
TICE BCG	3			
TORISEL	S			
<i>tretinoin</i>	S			
TRISENOX	S			
UVADEX	3			
VECTIBIX	S			

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VELCADE	S			
VESANOID	S			
VIDAZA	S			
VINBLASTINE	3			
<i>vincristine</i>	1			
<i>vinorelbine inj 10 mg/mL</i>	S			
VINORELBINE inj 50 mg/mL	S			
VUMON	S			
ZANOSAR	S			
ZINECARD	S			
ZOLINZA	S			
Antiparasitics				
ALBENZA	3			
ARALEN	3			
BILTRICIDE	3			
<i>chloroquine phosphate</i>	1			
DARAPRIM	3			
ELIMITE	3			
HUMATIN	3			
<i>hydroxychloroquine</i>	1			
LARIAM	3			
<i>lindane</i>	1			
MALARONE	3			
<i>mebendazole</i>	1			
<i>mefloquine</i>	1			
MEPRON	2			
<i>paromomycin</i>	1			
PENTAM 300	3			
<i>pentamidine for inj</i>	1			
<i>permethrin</i>	1			
PLAQUENIL	3			
PRIMAQUINE	3			
STROMEKTOL	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
Antiparkinson Agents				
<i>amantadine caps, syrup</i>	1			
AMANTADINE tabs	1			
APOKYN	S			
<i>benztropine</i>	1			
<i>bromocriptine</i>	1			
<i>carbidopa/levodopa</i>	1			
<i>carbidopa/levodopa ER</i>	1			
COMTAN	3			
<i>diphenhydramine caps, elixir, inj</i>	1			
ELDEPRYL	3			
MIRAPEX	2			
PARLODEL	3			
REQUIP	2			
<i>selegiline</i>	1			
SINEMET	3			
SINEMET CR	3			
STALEVO	3			
TASMAR	2			
<i>trihexyphenidyl</i>	1			
Antipsychotics				
ABILIFY soln, tabs	3			
ABILIFY DISCMELT	3			
<i>chlorpromazine tabs</i>	1			
CHLORPROMAZINE inj	3			
<i>clozapine 25 mg, 50 mg, 100 mg</i>	1			
CLOZAPINE 200 mg	3			
CLOZARIL	3			
FAZACLO	3			
<i>fluphenazine tabs</i>	1			
<i>fluphenazine decanoate</i>	1			
FLUPHENAZINE conc, elixir, inj	3			
GEODON	2			
HALDOL	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
HALDOL DECANOATE	3			
<i>haloperidol conc, inj, tabs</i>	1			
HALOPERIDOL 20 mg	3			
<i>haloperidol decanoate</i>	1			
INVEGA	3			
<i>loxapine</i>	1			
LOXITANE	3			
MOBAN	3			
NAVANE	3			
ORAP	3			
<i>perphenazine tabs</i>	1			
RISPERDAL	2			
RISPERDAL CONSTA	2			
RISPERDAL M-TAB	2			
SEROQUEL	2			
<i>thioridazine</i>	1			
<i>thiothixene</i>	1			
<i>trifluoperazine</i>	1			
ZYPREXA	3			
ZYPREXA ZYDIS	3			
Antispasticity Agents				
<i>baclofen</i>	1			
DANTRIUM caps	3			
<i>dantrolene</i>	1			
<i>tizanidine</i>	1			
ZANAFLEX tabs	3			
Antivirals				
<i>acyclovir caps, susp, tabs</i>	1			
<i>acyclovir for inj</i>	1			
ACYCLOVIR inj	3			
AGENERASE	2			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>amantadine caps, syrup</i>	1			
AMANTADINE tabs	1			
APTIVUS	3			
ATRIPLA	3			
BARACLUDE	2			
COMBIVIR	2			
COPEGUS	S			
CRIXIVAN	2			
CYTOVENE for inj	S			
<i>didanosine DR</i>	1			
EMTRIVA	3			
EPIVIR	2			
EPIVIR HBV	2			
EPZICOM	2			
FLUMADINE	3			
<i>foscarnet</i>	S			
FOSCAVIR	S			
FUZEON	S			
GANCICLOVIR	2			
HEPSERA	3			
INVIRASE	3			
KALETRA	3			
LEXIVA	2			
NORVIR	3			
PREZISTA	3			
REBETOL	S			
RESCRIPTOR	3			
RETROVIR	3			
REYATAZ	2			
<i>ribavirin</i>	S			
<i>rimantadine</i>	1			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
SELZENTRY	3			
SUSTIVA	2			
TAMIFLU	3			
TRIZIVIR	2			
TRUVADA	3			
TYZEKA	3			
VALCYTE	2			
VALTREX	2			
VIDEX EC 125 mg	2			
VIDEX EC 200 mg, 250 mg, 400 mg	3			
VIDEX soln	2			
VIRACEPT	3			
VIRAMUNE	3			
VIREAD	3			
VISTIDE	S			
ZERIT	2			
ZIAGEN	2			
<i>zidovudine</i>	1			
ZOVIRAX caps, susp, tabs	3			
Anxiolytics				
BUSPAR	3			
<i>buspirone</i>	1			
<i>doxepin</i>	1			
<i>hydroxyzine hcl syrup, tabs</i>	1			
<i>hydroxyzine pamoate</i>	1			
MEPROBAMATE	3			
<i>paroxetine</i>	1			
PAXIL	3			X
PAXIL CR	3			X
<i>sertraline</i>	1			
VANSPAR	3			
VISTARIL caps	3			
ZOLOFT	3			X

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
Bipolar Agents				
ABILIFY soln, tabs	3			
ABILIFY DISCMELT	3			
DEPAKOTE tabs	2			
EQUETRO	3			
GEODON	2			
LAMICTAL tabs	2			
LAMICTAL chew, 5 mg, 25 mg	3			
<i>lamotrigine chew, 5 mg, 25 mg</i>	1			
<i>lithium carbonate caps, 150 mg, 300 mg</i>	1			
LITHIUM CARBONATE caps, 150 mg, 600 mg; tabs, 300 mg	3			
<i>lithium carbonate ER</i>	1			
<i>lithium citrate syrup</i>	1			
LITHOBID	3			
RISPERDAL	2			
RISPERDAL M-TAB	2			
SEROQUEL	2			
ZYPREXA	3			
ZYPREXA ZYDIS	3			
Blood Glucose Regulators				
ACTOPLUS MET	2			
ACTOS	2			
ALCOHOL SWABS	2			
AMARYL	3			
AVANDAMET	2			
AVANDARYL	2			
AVANDIA	2			
BYETTA	2			X
<i>chlorpropamide</i>	1			
DIABETA	3			
DIABINESE	3			
DUETACT	2			
<i>glimepiride</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>glipizide</i>	1			
<i>glipizide ER</i>	1			
<i>glipizide/metformin</i>	1			
GLUCAGEN KIT	2			
GLUCAGON HYPOKIT	2			
GLUCOPHAGE	3			
GLUCOPHAGE XR	3			
GLUCOTROL	3			
GLUCOTROL XL	3			
GLUCOVANCE	3			
<i>glyburide</i>	1			
<i>glyburide micronized</i>	1			
<i>glyburide/metformin</i>	1			
GLYNASE	3			
GLYSET	2			
HUMALOG	2			
HUMALOG MIX 50/50	2			
HUMALOG MIX 75/25	2			
HUMULIN 50/50	2			
HUMULIN 70/30	2			
HUMULIN N	2			
HUMULIN R	2			
INSULIN INJECTION DEVICE/ NOVOLIN	2			
INSULIN INJECTION DEVICE	2			
INSULIN SYRINGE/NEEDLE	2			
JANUMET	2	X		
JANUVIA	2	X		
LANTUS	2			
LEVEMIR	2			
METAGLIP	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>metformin</i>	1			
<i>metformin ER</i>	1			
MICRONASE	3			
NOVOLIN 70/30	2			
NOVOLIN N	2			
NOVOLIN R	2			
NOVOLOG	2			
NOVOLOG MIX 70/30	2			
PRANDIN	2			
PRECOSE	3			
PROGLYCEM	3			
STARLIX	2			
SYMLIN	2			
<i>tolazamide 250 mg, 500 mg</i>	1			
Blood Products/Modifiers/Volume Expanders				
AGGRENOX	3			
AGRYLIN	3			
<i>anagrelide</i>	1			
ARANESP	S	X		
ARIXTRA	2			
<i>cilostazol</i>	1			
COUMADIN	3			
CYKLOKAPRON	2			
<i>dipyridamole</i>	1			
EPOGEN 2000, 3000, 4000 units/mL	3	X		
EPOGEN 10,000, 20,000, 40,000 units/mL	S	X		
<i>heparin sodium inj</i>	1			
LEUKINE	S			
LOVENOX	3		X	
NEULASTA	S			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
NEUMEGA	S			
NEUPOGEN	S			
<i>pentoxifylline ER</i>	1			
PERSANTINE	3			
PLAVIX	2			
PLETAL	3			
PROCRIT 2000, 3000, 4000 units/mL	3	X		
PROCRIT 10,000, 20,000, 40,000 units/mL	S	X		
TRENTAL	3			
<i>warfarin sodium</i>	1			
Cardiovascular Agents				
<i>acebutolol</i>	1			
<i>acetazolamide</i>	1			
ACCUPRIL	3			X
ACCURETIC	3			X
ADALAT CC	3			
ADVICOR	3	X		
ALDACTAZIDE 25-25 mg	3			
ALDACTONE	3			
ALTACE	2			X
AMILORIDE	3			
<i>amiloride/hydrochlorothiazide</i>	1			
<i>amiodarone 200 mg, 400 mg</i>	1			
<i>amlodipine</i>	1			
<i>amlodipine/benazepril</i>	1			
<i>atenolol</i>	1			
<i>atenolol/chlorthalidone</i>	1			
<i>benazepril</i>	1			
<i>benazepril/hydrochlorothiazide</i>	1			
BENICAR	3			X
BENICAR HCT	3			X
BETAPACE	3			
BETAPACE AF	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>betaxolol</i>	1			
<i>bisoprolol</i>	1			
<i>bisoprolol/hydrochlorothiazide</i>	1			
<i>bumetanide</i>	1			
BUMEX	3			
CALAN	3			
CALAN SR	3			
CAPOTEN	3			X
CAPOZIDE	3			X
<i>captopril</i>	1			
<i>captopril/hydrochlorothiazide</i>	1			
CARDENE	3			
CARDIZEM tabs	3			
CARDIZEM CD 120 mg, 180 mg, 240 mg, 300 mg	3			
CARDIZEM LA	3			
<i>carvedilol</i>	1			
CATAPRES tabs	3			
CATAPRES-TTS	3			
<i>chlorothiazide</i>	1			
<i>chlorthalidone 25 mg, 50 mg</i>	1			
<i>cholestyramine</i>	1			
<i>cholestyramine light</i>	1			
<i>clonidine</i>	1			
COLESTID	3			
<i>colestipol</i>	1			
CORDARONE 200 mg	3			
COREG	3			
CORGARD	3			
COZAAR	2			X
CRESTOR	2	X		
DEMADEX	3			
DIBENZYLINE	2			
<i>digoxin tabs</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
DIGOXIN soln	3			
DILACOR XR	3			
<i>diltiazem tabs</i>	1			
<i>diltiazem ER</i>	1			
DIOVAN	2			X
DIOVAN HCT	2			X
<i>disopyramide</i>	1			
<i>disopyramide ER</i>	1			
DYAZIDE	3			
DYNACIRC CR	3			
<i>enalapril</i>	1			
<i>enalapril/hydrochlorothiazide</i>	1			
<i>felodipine ER</i>	1			
<i>fenofibrate</i>	1			
<i>flecainide</i>	1			
<i>fosinopril</i>	1			
<i>fosinopril/hydrochlorothiazide</i>	1			
<i>furosemide soln 10 mg/mL, tabs</i>	1			
<i>gemfibrozil</i>	1			
<i>guanfacine</i>	1			
GUANIDINE	3			
<i>hydralazine tabs</i>	1			
<i>hydrochlorothiazide</i>	1			
HYZAAR	2			X
IMDUR	3			
<i>indapamide</i>	1			
INDERAL LA	3			
INDERIDE 40-25 mg	3			
ISMO	3			
ISOPTIN SR	3			
ISORDIL 5 mg	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>isosorbide dinitrate</i>	1			
<i>isosorbide dinitrate ER</i>	1			
<i>isosorbide mononitrate</i>	1			
<i>isosorbide mononitrate ER</i>	1			
<i>isradipine</i>	1			
KERLONE	3			
<i>labetalol tabs</i>	1			
LANOXIN	3			
LASIX	3			
LIPITOR	2		X	
<i>lisinopril</i>	1			
<i>lisinopril/hydrochlorothiazide</i>	1			
LOFIBRA	3			
LOPID	3			
LOPRESSOR	3			
LOPRESSOR HCT	3			
LOTENSIN	3			X
LOTENSIN HCT	3			X
LOTREL 5-40 mg, 10-40 mg	2			
LOTREL	3			
<i>lovastatin</i>	1		X	
LOVAZA	2			
MAVIK	3			X
MAXZIDE	3			
MAXZIDE-25	3			
<i>methazolamide</i>	1			
<i>methyl dopa</i>	1			
<i>methyl dopa/hydrochlorothiazide 250-25 mg</i>	1			
<i>metolazone</i>	1			
<i>metoprolol succinate ER</i>	1			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>metoprolol tartrate</i>	1			
<i>metoprolol/hydrochlorothiazide</i>	1			
MEVACOR	3	X		
MEXILETINE	3			
MICROZIDE	3			
<i>midodrine</i>	1			
<i>minoxidil</i>	1			
<i>moexipril</i>	1			
<i>moexipril/hydrochlorothiazide</i>	1			
MONOKET	3			
MONOPRIL	3		X	
MONOPRIL HCT	3		X	
<i>nadolol</i>	1			
NIASPAN	2			
<i>nicardipine</i>	1			
<i>nifedipine ER</i>	1			
NITRO-DUR 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	3			
<i>nitroglycerin transdermal</i>	1			
NITROLINGUAL PUMPSPRAY	3			
NITROSTAT	2			
NORPACE	3			
NORPACE CR	3			
NORVASC	3			
PACERONE 400 mg	3			
PLENDIL	3			
PRAVACHOL	3	X		
<i>pravastatin</i>	1	X		
PRINIVIL	3		X	
PRINZIDE	3		X	
PROAMATINE	3			
PROCARDIA XL	3			
<i>propafenone</i>	1			
<i>propranolol tabs</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>propranolol ER</i>	1			
<i>propranolol/hydrochlorothiazide</i>	1			
QUESTRAN	3			
QUESTRAN LIGHT	3			
<i>quinapril</i>	1			
<i>quinapril/hydrochlorothiazide</i>	1			
<i>quinidine gluconate ER</i>	1			
<i>quinidine sulfate</i>	1			
RANEXA	3			
REMODULIN	S			
REVATIO	S	X		
RYTHMOL	3			
RYHTMOL SR	3			
SECTRAL	3			
<i>simvastatin</i>	1		X	
<i>sotalol</i>	1			
<i>sotalol AF</i>	1			
<i>spironolactone</i>	1			
<i>spironolactone/hydrochlorothiazide</i>	1			
SULAR	3			
TAMBOCOR	3			
TARKA	3			
TENEX	3			
TENORETIC	3			
TENORMIN	3			
TIAZAC	3			
TIKOSYN	3			
TOPROL XL 25 mg	3			
TOPROL XL 50 mg, 100 mg, 200 mg	2			
<i>torseamide</i>	1			
TRACLEER	S			
TRANDATE	3			
<i>trandolapril</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>triamterene/hydrochlorothiazide caps 37.5-25 mg</i>	1			
<i>triamterene/hydrochlorothiazide caps 50-25 mg</i>	1			
<i>triamterene/hydrochlorothiazide tabs 37.5-25 mg</i>	1			
<i>triamterene/hydrochlorothiazide tabs 75-50 mg</i>	1			
TRICOR	2			
TRIGLIDE	3			
UNIRETIC	3			X
UNIVASC	3			X
VASERETIC 10-25 mg	3			X
VASOTEC	3			X
<i>verapamil tabs</i>	1			
<i>verapamil ER</i>	1			
VERELAN	3			
VERELAN PM	3			
ZAROXOLYN	3			
ZEBETA	3			
ZESTORETIC	3			X
ZESTRIL	3			X
ZETIA	2			X
ZIAC	3			
ZOCOR	3		X	
Central Nervous System Agents				
ADDERALL	3			
<i>amphetamine/dextroamphetamine</i>	1			
DEXEDRINE Spansule	3			
<i>dexmethylphenidate</i>	1			
<i>dextroamphetamine</i>	1			
<i>dextroamphetamine ER</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
DEXTROSTAT 10 mg	3			
FOCALIN	3			
METADATE ER 10 mg	3			
<i>methylphenidate</i>	1			
<i>methylphenidate ER</i>	1			
PROVIGIL	3	X		
RILUTEK	2			
RITALIN	3			
RITALIN SR	3			
XYREM	3			
Dental and Oral Agents				
<i>chlorhexidine gluconate</i>	1			
<i>doxycycline hyclate 20 mg</i>	1			
PERIDEX	3			
PERIOSTAT	3			
pilocarpine tabs	1			
SALAGEN	3			
<i>triamcinolone acetonide paste</i>	1			
Dermatological Agents				
AC CUTANE	3			
ACLOVATE	3			
<i>alclometasone</i>	1			
<i>amcinonide</i>	1			
<i>ammonium lactate</i>	1			
ANUSOL-HC crm	3			
AZELEX	3			
BACTROBAN oint	3			
BENZAMYCIN	3			
<i>betamethasone dipropionate</i>	1			
<i>betamethasone dipropionate, augmented</i>	1			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>betamethasone valerate</i>	1			
CARMOL-HC	3			
<i>ciclopirox</i>	1			
CLEOCIN-T	3			
<i>clindamycin</i>	1			
<i>clobetasol</i>	1			
<i>clotrimazole</i>	1			
<i>clotrimazole/betamethasone</i>	1			
CONDYLOX soln	3			
CORTIFOAM	3			
CUTIVATE crm, oint	3			
DENAVIR	3			
DERMATOP	3			
<i>desonide</i>	1			
DESOWEN	3			
<i>desoximetasone</i>	1			
<i>diflorasone</i>	1			
DIPROLENE	3			
DIPROLENE AF	3			
DOVONEX	2			
<i>econazole</i>	1			
EFUDEX	3			
ELIMITE	3			
ELOCON	3			
ERYGEL	3			
<i>erythromycin</i>	1			
<i>erythromycin/benzoyl peroxide</i>	1			
FINACEA	3			
<i>fluocinolone</i>	1			
<i>fluocinonide</i>	1			
<i>fluorouracil</i>	1			
<i>fluticasone</i>	1			
<i>gentamicin</i>	1			
<i>halobetasol</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>hydrocortisone</i>	1			
<i>hydrocortisone butyrate</i>	1			
<i>hydrocortisone valerate</i>	1			
HYTONE crm	3			
<i>isotretinoin</i>	1			
KENALOG crm	3			
<i>ketoconazole</i>	1			
KLARON	3			
LAC-HYDRIN	3			
LAMISIL	2			
LEVULAN	3			
<i>lidocaine</i>	1			
LOPROX crm, susp	3			
LOTRISONE	3			
METROCREAM	3			
METROGEL 1%	3			
METROLOTION	3			
<i>metronidazole</i>	1			
<i>mometasone</i>	1			
<i>mupirocin</i>	1			
MYCOSTATIN	3			
NIZORAL	3			
<i>nystatin</i>	1			
<i>nystatin/triamcinolone</i>	1			
OXSORALEN ULTRA	2			
PANRETIN	2			
<i>podofilox</i>	1			
<i>prednicarbate</i>	1			
PROCTOCORT crm	3			
PSORCON E	3			
REGANEX	2	X		
RETIN-A	3			
<i>selenium sulfide</i>	1			
SELSUN SHAMPOO	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
SILVADENE	3			
<i>silver sulfadiazine</i>	1			
<i>sodium chloride irrigation</i>	1			
SOLARAZE	2			
<i>sulfacetamide sodium</i>	1			
TARGRETIN	S			
TAZORAC	3			
TEMOVATE	3			
TEMOVATE E	3			
TOPICORT	3			
TOPICORT LP	3			
<i>tretinoin</i>	1			
<i>triamcinolone acetonide</i>	1			
ULTRAVATE	3			
<i>water for irrigation</i>	1			
WESTCORT	3			
XYLOCAINE JELLY	3			
ZONALON	3			
Enzyme Replacements/Modifiers				
ADAGEN	S			
ALDURAZYME	S			
BUPHENYL	S			
CEREDASE	S			
CEREZYME	S			
CYSTADANE	3			
CYSTAGON	3			
ELAPRASE	S			
FABRAZYME	S			
MYOZYME	S			
NAGLAZYME	S			
ORFADIN	S			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
SUCRAID	S			
ULTRASE	2			
VIOKASE	2			
ZAVESCA	S			
Gastrointestinal Agents				
ACTIGALL	3			
AMITIZA	3			
ANTIVERT 12.5 mg, 25 mg	3			
AXID	3			
BENTYL caps, syrup, tabs	3			
CARAFATE	3			
<i>cimetidine soln, tabs</i>	1			
<i>cimetidine inj</i>	1			
COLYTE	3			
CYTOTEC	3			
<i>dicyclomine caps, syrup, tabs</i>	1			
<i>diphenoxylate/atropine</i>	1			
<i>famotidine</i>	1			
GASTROCROM	3			
<i>glycopyrrolate tabs</i>	1			
GOLYTELY	2			
HALFLYTELY	2			
<i>lactulose</i>	1			
LOMOTIL	3			
<i>loperamide</i>	1			
LOTRONEX	2			
<i>methscopolamine</i>	1			
<i>misoprostol</i>	1			
NEXIUM	2	X		
NEXIUM IV	3	X		
<i>nizatidine</i>	1			

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NULYTELY	2			
<i>octreotide</i>	1			
<i>omeprazole DR</i>	1	X		
PAMINE	3			
<i>paregoric</i>	1			
<i>peg 3350/kcl/sod bicarb/nacl for soln 420 g</i>	1			
<i>peg 3350/kcl/sod bicarb/nacl/sod sulf for soln 240 g</i>	1			
PEPCID tabs	3			
<i>polyethylene glycol 3350 oral powder</i>	1			
PRILOSEC	3	X		
PROTONIX	2	X		
PROTONIX IV	3	X		
PYLERA	2			
<i>ranitidine caps, syrup, tabs</i>	1			
REMICADE	S			X
RENAGEL	2			
ROBINUL	3			
SANDOSTATIN	3			
SANDOSTATIN LAR DEPOT	3			
<i>sucalfate tabs</i>	1			
<i>ursodiol</i>	1			
ZANTAC	3			
Genitourinary Agents				
AVODART	2			
<i>bethanechol</i>	1			
CARDURA	3			
DETROL	2	X		
DETROL LA	2	X		
DITROPAN	3	X		
DITROPAN XL	3	X		
<i>doxazosin</i>	1			
ENABLEX	2	X		

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>finasteride</i>	1			
<i>flavoxate</i>	1			
FLOMAX	2			
HYTRIN	3			
MINIPRESS	3			
<i>neomycin/polymyxin B GU</i>	1			
NEOSPORIN GU	3			
<i>oxybutynin</i>	1	X		
<i>oxybutynin ER</i>	1	X		
<i>phenazopyridine</i>	1			
<i>potassium citrate ER</i>	1			
<i>prazosin</i>	1			
PROSCAR	3			
PYRIDIUM	3			
<i>terazosin</i>	1			
THIOLA	3			
URECHOLINE	3			
URISPAS	3			
UROCIT-K	3			
UROXATRAL	3			
VESICARE	2	X		
Hormonal Agents, Stimulant/Replacement/Modifying				
ANADROL-50	3			
ANDRODERM	2			
ANDROGEL	2			
ANDROXY	3			
AYGESTIN	3			
CALCIJEX	3			
<i>calcitriol caps, inj 1 mcg/mL, soln</i>	1			
<i>chorionic gonadotropin</i>	1			
CLIMARA	3			
COMBIPATCH	2			
CORTEF	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>cortisone acetate</i>	1			
CYTOMEL	2			
<i>danazol</i>	1			
DDAVP tabs	3			
DELATESTRYL	3			
DEPO-PROVERA	3			
DEPO-TESTOSTERONE	3			
<i>desmopressin nasal, tabs</i>	1			
<i>dexamethasone</i>	1			
DEXAMETHASONE elixir	3			
ESTRACE crm	3			
ESTRACE tabs	3			
ESTRADERM	2			
<i>estradiol tabs</i>	1			
<i>estradiol transdermal</i>	1			
<i>estropipate</i>	1			
EVISTA	2			
<i>fludrocortisone</i>	1			
<i>hydrocortisone</i>	1			
INCRELEX	S			
<i>levothyroxine (Levoxyl)</i>	1			
Levoxyl	1			
<i>liothyronine sodium inj</i>	1			
MEDROL 4 mg, 8 mg, 16 mg, 32 mg	3			
<i>medroxyprogesterone</i>	1			
<i>megestrol susp</i>	1			
<i>megestrol tabs</i>	1			
<i>methylprednisolone</i>	1			
<i>norethindrone acetate</i>	1			
NUTROPIN	S	X		
NUTROPIN AQ	S	X		

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
OGEN	3			
<i>oral contraceptives</i>	1			
ORAL CONTRACEPTIVES-multi-source brands	3			
ORAPRED	3			
OXANDRIN	3			
<i>oxandrolone</i>	1			
PEDIAPRED	3			
<i>prednisolone</i>	1			
<i>prednisolone sodium phosphate</i>	1			
<i>prednisone</i>	1			
PRELONE	3			
PREMARIN tabs	2			
PREMARIN VAGINAL	2			
PREMPHASE	2			
PREMPRO	2			
PROVERA	3			
ROCALTROL	3			
STERAPRED	3			
SYNTHROID	3			
<i>testosterone cypionate</i>	1			
<i>testosterone enanthate</i>	1			
VAGIFEM	2			
VIVELLE	2			
VIVELLE-DOT	2			
Hormonal Agents, Suppressant				
ARIMIDEX	2			
AROMASIN	2			
<i>cabergoline</i>	1			
CASODEX	2			
DOSTINEX	3			

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
ELIGARD	3			
EMCYT	S			
FARESTON	3			
FASLODEX	S			
FEMARA	2			
<i>flutamide</i>	1			
<i>leuprolide acetate</i>	1			
LUPRON	3			
LUPRON DEPOT 3.75 mg, 11.25 mg	3			
LUPRON DEPOT 7.5 mg, 22.5 mg, 30 mg	S			
LUPRON DEPOT-PED	S			
LYSODREN	S			
<i>methimazole</i>	1			
NILANDRON	3			
PLENAXIS	S			
<i>propylthiouracil</i>	1			
SENSIPAR	2			
SOLTAMOX	3			
SOMAVERT	S			
SYNAREL	S			
<i>tamoxifen citrate</i>	1			
TAPAZOLE	3			
TESLAC	S			
TRELSTAR	3			
Immunological Agents				
ACTHIB	3			
ADACEL	3			
ALDARA	3			
AMEVIVE	S			X
ARAVA	3			
ATGAM	S			
ATTENUVAX	3			
AVONEX	S			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
AZASAN	3			
<i>azathioprine tabs 50 mg</i>	1			
AZATHIOPRINE for inj	3			
BETASERON	S			
BOOSTRIX	3			
CELLCEPT	S			
COMVAX	3			
COPAXONE	S			
CUPRIMINE	2			
<i>cyclosporine</i>	1			
<i>cyclosporine modified caps 25 mg, 100 mg; soln</i>	1			
CYCLOSPORINE MODIFIED caps 50 mg	3			
DAPTACEL	3			
DECAVAC	2			
DEPEN	2			
DIPHThERIA/TETANUS ADSORBED pediatric	3			
ENBREL	S			X
ENGERIX-B	3			
GAMMAGARD	S	X		
GARDASIL	3			
HAVRIX	3			
HIBTITER	3			
IMOVAX RABIES	3			
IMURAN	3			
INFANRIX	3			
INFERGEN	S			
IPOL	3			
JE-VAX	3			
<i>leflunomide</i>	1			
MENACTRA	3			
MENOMUNE	3			
MERUVAX II	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
M-M-R II	3			
M-R-VAX II	3			
MUMPSVAX	3			
MYFORTIC	S			
NEORAL	3			
ORENCIA	S			X
ORTHOCLONE OKT3	S			
PEDIARIX	3			
PEDVAX HIB	3			
PEGASYS	S	X		
PEG-INTRON	S	X		
PROGRAF caps	S			
PROGRAF inj	3			
PROQUAD	3			
PROTOPIC	2			X
RABAVERT	3			
RAPAMUNE	2			
RAPTIVA	S			X
ROTATEQ	3			
SANDIMMUNE	3			
SIMULECT	S			
SYNAGIS	S			
TETANUS TOXOID	3			
TETANUS TOXOID ADSORBED	3			
TETANUS/DIPHThERIA ADSORBED adult	2			
THALOMID	S			
THYMOGLOBULIN	S			
TRIHIBIT	3			
TRIPEDIA	3			
TWINRIX	3			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
TYPHIM VI	3			
TYSABRI	S			
VAQTA	3			
VARIVAX	3			
VIVOTIF BERNA	3			
XOLAIR	S	X		
YF-VAX	3			
ZENAPAX	S			
ZOSTAVAX	3		X	
Inflammatory Bowel Disease Agents				
ASACOL	2			
AZULFIDINE	3			
AZULFIDINE EN-TABS	3			
CANASA 1000 mg	2			
DIPENTUM	3			
ENTOCORT EC	2			
<i>hydrocortisone enema</i>	1			
LIALDA	2			
<i>mesalamine enema</i>	1			
PENTASA	2			
ROWASA	3			
<i>sulfasalazine</i>	1			
<i>sulfasalazine DR</i>	1			
Metabolic Bone Disease Agents				
ACTONEL	2		X	
AREDIA	3			
BONIVA tabs	2		X	
<i>calcitonin spray</i>	1			
DIDRONEL	3			
<i>etidronate disodium</i>	1			
FORTEO	S	X		

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
FOSAMAX	2		X	
FOSAMAX PLUS D	3		X	
HECTOROL caps	2			
MIACALCIN spray	3			
<i>pamidronate disodium</i>	1			
PAMIDRONATE DISODIUM 6 mg/mL	3			
ZEMPLAR caps	3			
Ophthalmic Agents				
ACULAR	2			
ACULAR LS	2			
ACULAR PF	3			
ALBALON	3			
ALPHAGAN P	3			
ALREX	3			
<i>atropine sulfate soln, 1%</i>	1			
AZOPT	3			
<i>bacitracin</i>	1			
<i>bacitracin/polymyxin B</i>	1			
BETAGAN	3			
BETAXOLOL 0.5%	3			
BETOPTIC S	3			
BLEPH-10	3			
<i>brimonidine 0.2%</i>	1			
<i>carteolol</i>	1			
CILOXAN	3			
<i>ciprofloxacin</i>	1			
CORTISPORIN	3			
COSOPT	2			
CROLOM	3			
<i>cromolyn sodium</i>	1			
<i>dexamethasone sodium phosphate</i>	1			
<i>dipivefrin</i>	1			
ECONOPRED PLUS	3			
<i>erythromycin</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>fluorometholone</i>	1			
<i>flurbiprofen</i>	1			
FML LIQUIFILM	3			
<i>gentamicin</i>	1			
ISTALOL	3			
LACRISERT	3			
<i>levobunolol</i>	1			
LOTEMAX	3			
LUMIGAN	3		X	
MAXITROL	3			
<i>metipranolol</i>	1			
MYDRIACYL	3			
<i>naphazoline</i>	1			
NATACYN	3			
<i>neomycin/polymyxin B/bacitracin</i>	1			
<i>neomycin/polymyxin B/bacitracin/ hydrocortisone</i>	1			
<i>neomycin/polymyxin B/ dexamethasone</i>	1			
<i>neomycin/polymyxin B/gramicidin</i>	1			
<i>neomycin/polymyxin B/ hydrocortisone</i>	1			
NEOSPORIN	3			
OCUFEN	3			
OCUFLOX	3			
<i>ofloxacin</i>	1			
OPTIPRANOLOL	3			
PATANOL	3			
<i>polymyxin B/trimethoprim</i>	1			
POLYTRIM	3			
PRED FORTE	3			
<i>prednisolone acetate</i>	1			
<i>prednisolone sodium phosphate</i>	1			
PROPINE	3			
RESTASIS	2			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>sulfacetamide sodium soln</i>	1			
<i>sulfacetamide sodium/ prednisolone</i>	1			
<i>timolol maleate soln</i>	1			
<i>timolol maleate gel forming soln</i>	1			
TIMOPTIC	3			
TIMOPTIC-XE	3			
TOBRADEX	2			
<i>tobramycin</i>	1			
TOBREX	3			
TRAVATAN	2	X		
<i>trifluridine</i>	1			
<i>tropicamide</i>	1			
TRUSOPT	2			
VIGAMOX	2			
VIROPTIC	3			
XALATAN	2	X		
XIBROM	3			
ZYLET	3			
Otic Agents				
<i>acetic acid</i>	1			
<i>acetic acid/aluminum acetate</i>	1			
CIPRODEX	3			
CORTISPORIN	3			
DERMOTIC	2			
FLOXIN OTIC	2			
<i>hydrocortisone/acetic acid</i>	1			
<i>neomycin/polymyxin B/ hydrocortisone</i>	1			
PEDIOTIC	3			
Respiratory Tract Agents				
ACCOLATE	2			X

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
ADVAIR DISKUS	2		X	
ADVAIR HFA	2		X	
<i>albuterol inhaler</i>	1		X	
<i>albuterol sulfate ER</i>	1			
<i>albuterol sulfate syrup, tabs</i>	1			
ALLEGRA tabs	3			
ALLEGRA-D	3			
<i>aminophylline tabs</i>	1			
ASMANEX TWISTHALER	2		X	
ASTELIN	3		X	
ATROVENT nasal	3		X	
ATROVENT HFA	3		X	
CARBINOXAMINE MALEATE	3			
<i>clemastine fumarate</i>	1			
COMBIVENT INHALER	2		X	
<i>cyproheptadine</i>	1			
<i>diphenhydramine caps, elixir, inj</i>	1			
EPIPEN	2			
EPIPEN-JR	2			
<i>fexofenadine</i>	1			
FLONASE	3		X	
FLOVENT HFA	2		X	
<i>flunisolide nasal</i>	1		X	
<i>fluticasone nasal</i>	1		X	
FORADIL AEROLIZER	2		X	
<i>hydroxyzine hcl syrup, tabs</i>	1			
<i>hydroxyzine pamoate</i>	1			
INTAL INHALER	2		X	
<i>ipratropium nasal</i>	1		X	
<i>metaproterenol syrup</i>	1			
NASACORT AQ	3		X	

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Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
NASONEX	2		X	
PALGIC	3			
PROAIR HFA	2		X	
PROLASTIN	S			
<i>promethazine supp, syrup, tabs</i>	1			
<i>promethazine/phenylephrine syrup</i>	1			
PROVENTIL inhaler	3		X	
PULMICORT FLEXHALER	3		X	
PULMOZYME	S			
QVAR INHALER	2		X	
RHINOCORT AQUA	3		X	
SEREVENT DISKUS	2		X	
SINGULAIR	3			X
SPIRIVA HANDIHALER	2		X	
SYMBICORT INHALER	2		X	
<i>terbutaline tabs</i>	1			
THEOCAP 200 mg	3			
<i>theophylline ER caps</i>	1			
<i>theophylline ER tabs</i>	1			
TILADE	2		X	
TYZINE	2			
TYZINE PEDIATRIC	2			
UNIPHYL	3			
VOSPIRE ER	3			
XOPENEX HFA	2		X	
ZYFLO	2			X
Sedatives/ Hypnotics				
AMBIEN	3			X
LUNESTA	3			X
<i>zolpidem</i>	1			
Skeletal Muscle Relaxants				
<i>carisoprodol</i>	1			
<i>carisoprodol/aspirin</i>	1			
<i>carisoprodol/aspirin/codeine</i>	1			

Drug Name	Drug Tier	Prior Authorization	Quantity Limit	Step Therapy
<i>chlorzoxazone</i>	1			
<i>cyclobenzaprine</i>	1			
FLEXERIL	3			
<i>methocarbamol</i>	1			
<i>orphenadrine citrate ER</i>	1			
<i>orphenadrine/aspirin/caffeine</i>	1			
PARAFON FORTE	3			
ROBAXIN	3			
SKELAXIN	3			
SOMA	3			
SOMA COMPOUND	3			
SOMA COMPOUND/CODEINE	3			
Therapeutic Nutrients/Minerals/Electrolytes				
<i>amino acid IV</i>	1			
CARNITOR	3			
<i>fat emulsion IV</i>	1			
<i>iv fluids</i>	1			
K-TABS	3			
<i>levocarnitine oral soln, tabs</i>	1			
MICRO-K 10 mEq	3			
PHOSLO	2			
<i>potassium chloride ER</i>	1			
<i>potassium chloride powder for soln</i>	1			
<i>prenatal vitamins/minerals/ folic acid</i>	1			
PRENATAL VITAMINS/MINERALS/ FOLIC ACID-multi-source brands	3			
<i>sodium fluoride tabs, 2.2 mg</i>	1			

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