# PruittHealth Premier D-SNP (HMO D-SNP)

# 2027 Formulary

# (List of Covered Drugs or "Drug List")

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN**

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This formulary was updated on 10/01/2026. For more recent information or other questions, please contact PruittHealth Premier D-SNP (HMO D-SNP) Member Service at 1-855-855-0668 (TTY users should call 711), 8 a.m. to 8 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30, or visit PruittHealthPremier.com.

**Note to existing members**: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this Drug List (formulary) refers to “we,” “us”, or “our,” it means PruittHealth Premier D-SNP (HMO D-SNP). When it refers to “plan” or “our plan,” it means PruittHealth Premier D-SNP (HMO D-SNP).

This document includes Drug List (formulary) for our plan which is current as of 10/01/2026. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2027, and from time to time during the year.

**What is the PruittHealth Premier D-SNP (HMO D-SNP) formulary?**

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by PruittHealth Premier D-SNP (HMO D-SNP) in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. PruittHealth Premier D-SNP (HMO D-SNP) will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a PruittHealth Premier D-SNP (HMO D-SNP) network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

**Can the formulary change?**

Most changes in drug coverage happen on January 1, but PruittHealth Premier D-SNP (HMO D-SNP) may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: PruittHealthPremier.com.

**Changes that can affect you this year:** In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the PruittHealth Premier D-SNP (HMO D-SNP)’s formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change.

  If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the PruittHealth Premier D-SNP (HMO D-SNP)’s formulary?”

**Changes that will not affect you if you are currently taking the drug.** Generally, if you are taking a drug on our 2027 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2027 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members

taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 10/01/2026. To get updated information about the drugs covered by PruittHealth Premier D-SNP (HMO D-SNP) please contact us. Our contact information appears on the front and back cover pages. If non-maintenance changes are made to the formulary during the plan year, we will communicate these changes by mailing a Notice of Formulary Change and within the monthly explanation of benefits (EOB).

**How do I use the formulary?**

There are two ways to find your drug within the formulary:

**Medical Condition**

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Cardiovascular agents. If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

**Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 82. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

**What are generic drugs?**

PruittHealth Premier D-SNP (HMO D-SNP) covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

**What are original biological products and how are they related to biosimilars?**

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less.

There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, "The 'Drug List' tells which Part D drugs are covered."

**Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** PruittHealth Premier D-SNP (HMO D-SNP) requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from PruittHealth Premier D-SNP (HMO D-SNP) based on specific criteria before you fill your prescriptions. If you don't get approval, PruittHealth Premier D-SNP (HMO D-SNP) may not cover the drug.

- **Quantity Limits:** For certain drugs, PruittHealth Premier D-SNP (HMO D-SNP) limits the amount of the drug that PruittHealth Premier D-SNP (HMO D-SNP) will cover. For example, PruittHealth Premier D-SNP (HMO D-SNP) provides 30 tablets per prescription for JANUVIA. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, PruittHealth Premier D-SNP (HMO D-SNP) requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, PruittHealth Premier D-SNP (HMO D-SNP) may not cover Drug B unless you try Drug A first. If Drug A does not work for you, PruittHealth Premier D-SNP (HMO D-SNP) will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask PruittHealth Premier D-SNP (HMO D-SNP) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the PruittHealth Premier D-SNP (HMO D-SNP)'s formulary?" on page VI for information about how to request an exception.

**What if my drug is not on the formulary?**

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that PruittHealth Premier D-SNP (HMO D-SNP) does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by PruittHealth Premier D-SNP (HMO D-SNP). When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by PruittHealth Premier D-SNP (HMO D-SNP).

- You can ask PruittHealth Premier D-SNP (HMO D-SNP) to make an exception and cover your drug. See below for information about how to request an exception.

**How do I request an exception to the PruittHealth Premier D-SNP (HMO D-SNP)'s formulary?**

You can ask PruittHealth Premier D-SNP (HMO D-SNP) to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.

- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, PruittHealth Premier D-SNP (HMO D-SNP) limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

- You can ask us to cover a formulary drug at lower cost-sharing level unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, PruittHealth Premier D-SNP (HMO D-SNP) will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or formulary exception, including an exception to a coverage restriction. ***When you request an exception, your prescriber will need to explain the medical reasons why you need the exception*.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

**What can I do if my drug is not on the formulary or has a restriction?**

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30 day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

If you are a resident of a long-term care (LTC) facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

We will provide a one-time 30-day supply of medication in the retail setting and up to a 31-day supply of medication in the long-term care setting, which will cover a temporary supply if you have a change in your medications due to a level-of-care change. A level-of-care change may include:

- *Entering or leaving an LTC facility*
- *Being discharged from a hospital or home*
- *Ending a Medicare Part A skilled nursing facility stay*
- *Giving up Hospice status and reverting back to standard Medicare benefits*
- *Ending an LTC facility stay and returning home*
- *Being discharged from psychiatric hospital with a drug regimen that is highly individualized*

**For more information**

For more detailed information about your PruittHealth Premier D-SNP (HMO D-SNP) prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about PruittHealth Premier D-SNP (HMO D-SNP), please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or visit http://www.medicare.gov.

**PruittHealth Premier D-SNP (HMO D-SNP) formulary**

The formulary that begins on page 1 provides coverage information about the drugs covered by PruittHealth Premier D-SNP (HMO D-SNP). If you have trouble finding your drug in the list, turn to the Index that begins on page 82.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., TIVICAY) and generic drugs are listed in lower-case italics (e.g., *amlodipine*).

The information in the Requirements/Limits column tells you if PruittHealth Premier D-SNP (HMO D-SNP) has any special requirements for coverage of your drug.

- **First Fill Limited to 1-month supply (FF):** You may be able to receive greater than a 1-month supply of most drugs on your Formulary. Drugs noted with "FF" are limited to a 1-month supply for Retail and Mail Order on your first fill only. After the first fill, an extended day supply will be available.
- **Non-Extended Day Supply (NDS):** You may be able to receive greater than a 1-month supply of most of the drugs on your Formulary via mail order at a reduced cost share. Drugs noted with "NDS" are limited to a 1-month supply for both Retail and Mail Order.
- **Prior Authorization (PA):** The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from The Plan before you fill your prescriptions. If you don't get approval, The Plan may not cover the drug.
- **Prior Authorization Restriction for Part B vs Part D Determination (PA_BvD):** This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from The Plan to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- **Prior Authorization Restriction for New Starts Only (PA_NSO):** If this drug is new to you, you (or your physician) are required to get prior authorization from The Plan before you fill your prescription for this drug. Without prior approval, The Plan may not cover this drug.
- **Step Therapy (ST):** In some cases, The Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, The Plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, The Plan will then cover Drug B.
- **Step Therapy for New Starts Only (ST_NSO):** If this drug is new to you, you are required to first try certain drugs to treat your medical condition before we will cover another drug for that condition.
- **Quantity Limits (QL):** For certain drugs, The Plan limits the amount of the drug that The Plan will cover. This could include a: per fill, daily, monthly, or yearly limitation.
- **Insulins (INS):** Insulin products at a maximum $35 per month.
- **Excluded Products (EX):** CMS excluded products that are chosen to be covered by the plan.
- **Vaccine (VAC):** Medicare Part D Vaccines covered at $0.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| **ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS** | | |
| **AMPHETAMINES** | | |
| *amphetamine/dextroamphetamine 10mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 10mg tab* | 1 | |
| *amphetamine/dextroamphetamine 12.5mg tab* | 1 | |
| *amphetamine/dextroamphetamine 15mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 15mg tab* | 1 | |
| *amphetamine/dextroamphetamine 20mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 20mg tab* | 1 | |
| *amphetamine/dextroamphetamine 25mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 30mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 30mg tab* | 1 | |
| *amphetamine/dextroamphetamine 5mg er cap* | 2 | |
| *amphetamine/dextroamphetamine 5mg tab* | 1 | |
| *amphetamine/dextroamphetamine 7.5mg tab* | 1 | |
| *dextroamphetamine sulfate 10mg tab* | 2 | |
| *dextroamphetamine sulfate 5mg tab* | 2 | |
| *lisdexamfetamine dimesylate 10mg cap* | 2 | |
| *lisdexamfetamine dimesylate 20mg cap* | 2 | |
| *lisdexamfetamine dimesylate 30mg cap* | 2 | |
| *lisdexamfetamine dimesylate 40mg cap* | 2 | |
| *lisdexamfetamine dimesylate 50mg cap* | 2 | |
| *lisdexamfetamine dimesylate 60mg cap* | 2 | |
| *lisdexamfetamine dimesylate 70mg cap* | 2 | |
| **ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS** | | |
| *atomoxetine 100mg cap* | 2 | QL=30 EA/30 Days |
| *atomoxetine 10mg cap* | 2 | QL=60 EA/30 Days |
| *atomoxetine 18mg cap* | 2 | QL=60 EA/30 Days |
| *atomoxetine 25mg cap* | 2 | QL=60 EA/30 Days |
| *atomoxetine 40mg cap* | 2 | QL=60 EA/30 Days |
| *atomoxetine 60mg cap* | 2 | QL=60 EA/30 Days |
| *atomoxetine 80mg cap* | 2 | QL=30 EA/30 Days |
| *clonidine 0.1mg er tab* | 2 | |
| *guanfacine 1mg er tab* | 1 | |
| *guanfacine 2mg er tab* | 1 | |
| *guanfacine 3mg er tab* | 1 | |
| *guanfacine 4mg er tab* | 1 | |
| **STIMULANTS - MISC.** | | |
| *armodafinil 150mg tab* | 2 | PA QL=30 EA/30 Days |
| *armodafinil 200mg tab* | 2 | PA QL=30 EA/30 Days |
| *armodafinil 250mg tab* | 2 | PA QL=30 EA/30 Days |
| *armodafinil 50mg tab* | 2 | PA QL=30 EA/30 Days |
| *dexmethylphenidate 10mg tab* | 1 | |
| *dexmethylphenidate 2.5mg tab* | 1 | |
| *dexmethylphenidate 5mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *methylphenidate 10mg er tab* | 2 | |
| *methylphenidate 10mg tab* | 1 | |
| *methylphenidate 18mg er osmotic tab* | 2 | |
| *methylphenidate 1mg/ml oral soln* | 2 | QL=1800 ML/30 Days |
| *methylphenidate 20mg er tab* | 2 | |
| *methylphenidate 20mg tab* | 1 | |
| *methylphenidate 27mg er osmotic tab* | 2 | |
| *methylphenidate 2mg/ml oral soln* | 2 | QL=900 ML/30 Days |
| *methylphenidate 36mg er osmotic tab* | 2 | |
| *methylphenidate 54mg er osmotic tab* | 2 | |
| *methylphenidate 5mg tab* | 1 | |
| *modafinil 100mg tab* | 2 | PA QL=60 EA/30 Days |
| *modafinil 200mg tab* | 2 | PA QL=60 EA/30 Days |
| **ANALGESICS - ANTI-INFLAMMATORY** | | |
| **ANTIRHEUMATIC - ENZYME INHIBITORS** | | |
| *leflunomide 10mg tab* | 2 | QL=30 EA/30 Days |
| *leflunomide 20mg tab* | 2 | QL=30 EA/30 Days |
| OLUMIANT 1MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| OLUMIANT 2MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| OLUMIANT 4MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| RINVOQ 15MG ER TAB | 5 | NDS PA QL=30 EA/30 Days |
| RINVOQ 1MG/ML ORAL SOLN | 5 | NDS PA QL=360 ML/30 Days |
| RINVOQ 30MG ER TAB | 5 | NDS PA QL=30 EA/30 Days |
| RINVOQ 45MG ER TAB | 5 | NDS PA QL=30 EA/30 Days |
| *tofacitinib 10mg tab* | 2 | PA QL=60 EA/30 Days |
| *tofacitinib 11mg er tab* | 5 | NDS PA QL=30 EA/30 Days |
| *tofacitinib 1mg/ml oral soln* | 5 | NDS PA QL=300 ML/30 Days |
| *tofacitinib 22mg er tab* | 5 | NDS PA QL=30 EA/30 Days |
| *tofacitinib 5mg tab* | 2 | PA QL=60 EA/30 Days |
| **NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)** | | |
| *celecoxib 100mg cap* | 1 | |
| *celecoxib 200mg cap* | 1 | |
| *celecoxib 400mg cap* | 1 | |
| *celecoxib 50mg cap* | 1 | |
| *diclofenac potassium 50mg tab* | 1 | |
| *diclofenac sodium 1.5% topical soln* | 2 | QL=300 ML/30 Days |
| *diclofenac sodium 100mg er tab* | 2 | QL=60 EA/30 Days |
| *diclofenac sodium 25mg dr tab* | 1 | QL=240 EA/30 Days |
| *diclofenac sodium 50mg dr tab* | 1 | QL=120 EA/30 Days |
| *diclofenac sodium 75mg dr tab* | 1 | QL=60 EA/30 Days |
| *diflunisal 500mg tab* | 2 | QL=90 EA/30 Days |
| *etodolac 200mg cap* | 2 | QL=150 EA/30 Days |
| *etodolac 300mg cap* | 2 | QL=90 EA/30 Days |
| *etodolac 400mg tab* | 2 | QL=60 EA/30 Days |
| *etodolac 500mg tab* | 2 | QL=60 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *ibu 600mg tab* | 1 | |
| *ibu 800mg tab* | 1 | |
| *ibuprofen 400mg tab* | 1 | |
| *ibuprofen 600mg tab* | 1 | |
| *ibuprofen 800mg tab* | 1 | |
| *indomethacin 25mg cap* | 1 | |
| *indomethacin 50mg cap* | 1 | |
| *indomethacin 75mg er cap* | 1 | |
| *ketorolac tromethamine 10mg tab* | 2 | QL=20 EA/5 Days |
| *meloxicam 15mg tab* | 1 | |
| *meloxicam 7.5mg tab* | 1 | |
| *nabumetone 500mg tab* | 1 | QL=120 EA/30 Days |
| *nabumetone 750mg tab* | 1 | QL=60 EA/30 Days |
| *naproxen 250mg tab* | 1 | |
| *naproxen 375mg dr tab* | 2 | QL=120 EA/30 Days |
| *naproxen 375mg tab* | 1 | |
| *naproxen 500mg tab* | 1 | |
| *piroxicam 10mg cap* | 1 | QL=60 EA/30 Days |
| *piroxicam 20mg cap* | 1 | QL=30 EA/30 Days |
| *sulindac 150mg tab* | 1 | QL=60 EA/30 Days |
| *sulindac 200mg tab* | 1 | QL=60 EA/30 Days |
| **ANALGESICS - OPIOID** | | |
| **OPIOID AGONISTS** | | |
| *buprenorphine 10mcg/hr weekly patch* | 2 | QL=4 EA/28 Days |
| *buprenorphine 15mcg/hr weekly patch* | 2 | QL=4 EA/28 Days |
| *buprenorphine 20mcg/hr weekly patch* | 2 | QL=4 EA/28 Days |
| *buprenorphine 5mcg/hr weekly patch* | 2 | QL=4 EA/28 Days |
| *buprenorphine 7.5mcg/hr weekly patch* | 2 | QL=4 EA/28 Days |
| *fentanyl 100mcg/hr patch* | 2 | QL=10 EA/30 Days |
| *fentanyl 12mcg/hr patch* | 2 | QL=10 EA/30 Days |
| *fentanyl 25mcg/hr patch* | 2 | QL=10 EA/30 Days |
| *fentanyl 50mcg/hr patch* | 2 | QL=10 EA/30 Days |
| *fentanyl 75mcg/hr patch* | 2 | QL=10 EA/30 Days |
| *hydromorphone 2mg tab* | 1 | QL=450 EA/30 Days |
| *hydromorphone 4mg tab* | 1 | QL=240 EA/30 Days |
| *hydromorphone 8mg tab* | 1 | QL=120 EA/30 Days |
| *methadone 10mg tab* | 1 | QL=360 EA/30 Days |
| METHADONE 1MG/ML ORAL SOLN | 1 | QL=3600 ML/30 Days |
| METHADONE 2MG/ML ORAL SOLN | 2 | QL=1800 ML/30 Days |
| *methadone 5mg tab* | 1 | QL=360 EA/30 Days |
| *morphine sulfate 100mg er tab* | 1 | QL=120 EA/30 Days |
| *morphine sulfate 15mg er tab* | 1 | QL=120 EA/30 Days |
| *morphine sulfate 15mg tab* | 1 | QL=180 EA/30 Days |
| *morphine sulfate 200mg er tab* | 2 | QL=120 EA/30 Days |
| MORPHINE SULFATE 20MG/5ML ORAL SOLN | 1 | QL=900 ML/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *morphine sulfate 20mg/ml oral soln* | 1 | QL=180 ML/30 Days |
| *morphine sulfate 2mg/ml oral soln* | 1 | QL=1800 ML/30 Days |
| *morphine sulfate 30mg er tab* | 1 | QL=120 EA/30 Days |
| *morphine sulfate 30mg tab* | 1 | QL=180 EA/30 Days |
| *morphine sulfate 60mg er tab* | 1 | QL=120 EA/30 Days |
| *oxycodone 10mg tab* | 1 | QL=180 EA/30 Days |
| *oxycodone 15mg tab* | 1 | QL=180 EA/30 Days |
| *oxycodone 1mg/ml oral soln* | 2 | QL=5400 ML/30 Days |
| *oxycodone 20mg tab* | 1 | QL=180 EA/30 Days |
| *oxycodone 30mg tab* | 1 | QL=180 EA/30 Days |
| *oxycodone 5mg tab* | 1 | QL=360 EA/30 Days |
| *tramadol 100mg er tab* | 2 | QL=30 EA/30 Days |
| *tramadol 200mg er tab* | 2 | QL=30 EA/30 Days |
| *tramadol 300mg er tab* | 2 | QL=30 EA/30 Days |
| *tramadol 50mg tab* | 1 | QL=240 EA/30 Days |
| **OPIOID COMBINATIONS** | | |
| ACETAMINOPHEN/CODEINE PHOSPHATE 120-12MG/5ML ORAL SOLN | 2 | QL=4980 ML/30 Days |
| *codeine phosphate/acetaminophen 15-300mg tab* | 1 | QL=390 EA/30 Days |
| *codeine phosphate/acetaminophen 30-300mg tab* | 1 | QL=390 EA/30 Days |
| *codeine phosphate/acetaminophen 60-300mg tab* | 1 | QL=390 EA/30 Days |
| *hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln* | 2 | QL=5400 ML/30 Days |
| *hydrocodone bitartrate/acetaminophen 10-325mg tab* | 1 | QL=360 EA/30 Days |
| *hydrocodone bitartrate/acetaminophen 5-325mg tab* | 1 | QL=360 EA/30 Days |
| *hydrocodone bitartrate/acetaminophen 7.5-325mg tab* | 1 | QL=360 EA/30 Days |
| *hydrocodone bitartrate/ibuprofen 7.5-200mg tab* | 2 | QL=480 EA/30 Days |
| *oxycodone/acetaminophen 10-325mg tab* | 1 | QL=360 EA/30 Days |
| *oxycodone/acetaminophen 2.5-325mg tab* | 2 | QL=360 EA/30 Days |
| *oxycodone/acetaminophen 5-325mg tab* | 1 | QL=360 EA/30 Days |
| *oxycodone/acetaminophen 7.5-325mg tab* | 1 | QL=360 EA/30 Days |
| *tramadol/acetaminophen 37.5-325mg tab* | 1 | QL=360 EA/30 Days |
| **ANDROGENS-ANABOLIC** | | |
| **ANDROGENS** | | |
| *danazol 100mg cap* | 2 | |
| *danazol 200mg cap* | 2 | |
| *danazol 50mg cap* | 2 | |
| *testosterone 1% (12.5mg/act) topical gel pump* | 2 | PA QL=300 GM/30 Days |
| *testosterone 1% (25mg/2.5gm) topical gel packet* | 2 | PA QL=300 GM/30 Days |
| *testosterone 1% (50mg/5gm) topical gel packet* | 2 | PA QL=300 GM/30 Days |
| *testosterone 1.62% (20.25mg/act) topical gel pump* | 2 | PA QL=150 GM/30 Days |
| *testosterone 30mg/act topical soln* | 2 | PA QL=180 ML/30 Days |
| *testosterone cypionate 100mg/ml inj* | 2 | |
| *testosterone cypionate 200mg/ml (1ml) inj* | 2 | |
| *testosterone cypionate 200mg/ml inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| TESTOSTERONE ENANTHATE 200MG/ML INJ | 2 | QL=5 ML/28 Days |
| **ANORECTAL AND RELATED PRODUCTS** | | |
| **RECTAL PRODUCTS - MISC.** | | |
| *hydrocortisone 1.67mg/ml enema* | 2 | |
| *hydrocortisone 2.5% perianal cream* | 1 | QL=60 GM/30 Days |
| *nitroglycerin 0.4% rectal ointment* | 2 | QL=30 GM/30 Days |
| *procto-med hc 2.5% perianal cream* | 1 | QL=60 GM/30 Days |
| *proctosol 2.5% perianal cream* | 1 | QL=60 GM/30 Days |
| *proctozone hc 2.5% perianal cream* | 1 | QL=60 GM/30 Days |
| **ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS** | | |
| **ALCOHOL DETERRENTS/ANTI-CRAVING** | | |
| *acamprosate calcium 333mg dr tab* | 2 | |
| *disulfiram 250mg tab* | 2 | |
| *naltrexone 50mg tab* | 2 | |
| VIVITROL 380MG INJ | 5 | NDS |
| **OPIOID DEPENDENCE TREATMENTS** | | |
| *buprenorphine 2mg sl tab* | 1 | QL=120 EA/30 Days |
| *buprenorphine 8mg sl tab* | 1 | QL=120 EA/30 Days |
| *buprenorphine/naloxone 12-3mg sl film* | 1 | QL=90 EA/30 Days |
| *buprenorphine/naloxone 2-0.5mg sl film* | 1 | QL=120 EA/30 Days |
| *buprenorphine/naloxone 2-0.5mg sl tab* | 1 | QL=120 EA/30 Days |
| *buprenorphine/naloxone 4-1mg sl film* | 1 | QL=120 EA/30 Days |
| *buprenorphine/naloxone 8-2mg sl film* | 1 | QL=120 EA/30 Days |
| *buprenorphine/naloxone 8-2mg sl tab* | 1 | QL=120 EA/30 Days |
| **OPIOID REVERSAL AGENTS** | | |
| KLOXXADO 8MG/0.1ML NASAL SPRAY | 3 | |
| NALOXONE 0.4MG/ML CARTRIDGE | 2 | |
| *naloxone 0.4mg/ml inj* | 1 | |
| *naloxone 0.4mg/ml syringe* | 1 | |
| *naloxone 2mg/2ml syringe* | 1 | |
| OPVEE 2.7MG/0.1ML NASAL SPRAY | 3 | |
| ZURNAI 1.5MG/0.5ML AUTO-INJECTOR | 3 | |
| **SMOKING CESSATION AGENTS** | | |
| *bupropion (12hr) 150mg er tab* | 1 | |
| NICOTROL 10MG/ML NASAL INHALER | 3 | |
| *varenicline tab 0.5mg/1mg first month pack (53)* | 2 | QL=53 EA/28 Days |
| *varenicline tartrate 0.5mg tab* | 2 | QL=56 EA/28 Days |
| *varenicline tartrate 1mg tab* | 2 | QL=56 EA/28 Days |
| *varenicline tartrate 1mg tab pack (56)* | 2 | QL=56 EA/28 Days |
| **ANTIANXIETY AGENTS** | | |
| **ANTIANXIETY AGENTS - MISC.** | | |
| *buspirone 10mg tab* | 1 | |
| *buspirone 15mg tab* | 1 | |
| *buspirone 30mg tab* | 1 | |
| *buspirone 5mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *buspirone 7.5mg tab* | 1 | |
| *hydroxyzine 10mg tab* | 1 | |
| *hydroxyzine 25mg tab* | 1 | |
| *hydroxyzine 2mg/ml oral soln* | 2 | |
| *hydroxyzine 50mg tab* | 1 | |
| *hydroxyzine pamoate 25mg cap* | 1 | |
| *hydroxyzine pamoate 50mg cap* | 1 | |
| **BENZODIAZEPINES** | | |
| *alprazolam 0.25mg tab* | 1 | QL=120 EA/30 Days |
| *alprazolam 0.5mg tab* | 1 | QL=120 EA/30 Days |
| *alprazolam 1mg tab* | 1 | QL=120 EA/30 Days |
| *alprazolam 2mg tab* | 1 | QL=150 EA/30 Days |
| *chlordiazepoxide 10mg cap* | 1 | QL=120 EA/30 Days |
| *chlordiazepoxide 25mg cap* | 1 | QL=120 EA/30 Days |
| *chlordiazepoxide 5mg cap* | 1 | QL=120 EA/30 Days |
| *clorazepate dipotassium 15mg tab* | 2 | QL=180 EA/30 Days |
| *clorazepate dipotassium 3.75mg tab* | 2 | QL=90 EA/30 Days |
| *clorazepate dipotassium 7.5mg tab* | 2 | QL=180 EA/30 Days |
| *diazepam 10mg tab* | 1 | QL=120 EA/30 Days |
| *diazepam 1mg/ml oral soln* | 2 | QL=1200 ML/30 Days |
| *diazepam 2mg tab* | 1 | QL=120 EA/30 Days |
| *diazepam 5mg tab* | 1 | QL=120 EA/30 Days |
| *diazepam 5mg/ml oral soln* | 2 | QL=240 ML/30 Days |
| *lorazepam 0.5mg tab* | 1 | QL=150 EA/30 Days |
| *lorazepam 1mg tab* | 1 | QL=150 EA/30 Days |
| *lorazepam 2mg tab* | 1 | QL=150 EA/30 Days |
| *lorazepam 2mg/ml oral soln* | 1 | QL=150 ML/30 Days |
| **ANTIBACTERIALS** | | |
| **AMINOGLYCOSIDES** | | |
| *amikacin 250mg/ml inj* | 2 | |
| ARIKAYCE 590MG/8.4ML INH SUSP | 5 | NDS PA QL=235.20 ML/28 Days |
| GENTAMICIN 0.8MG/ML INJ | 2 | |
| GENTAMICIN 1.2MG/ML INJ | 2 | |
| GENTAMICIN 1.6MG/ML INJ | 2 | |
| GENTAMICIN 1MG/ML INJ | 2 | |
| *gentamicin 40mg/ml inj* | 2 | |
| *neomycin sulfate 500mg tab* | 1 | |
| STREPTOMYCIN 1GM INJ | 5 | NDS |
| TOBI PODHALER 28MG PACK (224) | 5 | NDS PA QL=224 EA/28 Days |
| TOBRAMYCIN 10MG/ML INJ | 2 | |
| *tobramycin 300mg/5ml neb soln* | 2 | PA QL=280 ML/28 Days |
| *tobramycin 80mg/2ml inj* | 2 | |
| **ANTIBACTERIALS, OTHER** | | |
| *aztreonam 1gm inj* | 2 | |
| *aztreonam 2gm inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| CAYSTON 75MG/ML NEB SOLN | 5 | PA QL=84 ML/56 Days |
| CILASTATIN/IMIPENEM 250-250MG INJ | 2 | |
| *cilastatin/imipenem 500-500mg inj* | 2 | |
| *ciprofloxacin 250mg tab* | 1 | |
| CIPROFLOXACIN 2MG/ML INJ | 2 | |
| *ciprofloxacin 500mg tab* | 1 | |
| *ciprofloxacin 750mg tab* | 1 | |
| *clindamycin 150mg cap* | 1 | |
| *clindamycin 2% vaginal cream* | 2 | |
| *clindamycin 300mg cap* | 1 | |
| *clindamycin 300mg/2ml inj* | 2 | |
| *clindamycin 300mg/50ml inj* | 2 | |
| *clindamycin 600mg/4ml inj* | 2 | |
| *clindamycin 600mg/50ml inj* | 2 | |
| *clindamycin 75mg cap* | 1 | |
| *clindamycin 75mg/5ml oral soln* | 2 | |
| *clindamycin 900mg/50ml inj* | 2 | |
| *clindamycin 900mg/6ml inj* | 2 | |
| *colistin 75mg/ml inj* | 2 | |
| *daptomycin 500mg inj* | 2 | |
| *doxy 100mg inj* | 2 | |
| *doxycycline hyclate 100mg cap* | 1 | |
| *doxycycline hyclate 100mg inj* | 2 | |
| *doxycycline hyclate 100mg tab* | 1 | |
| *doxycycline hyclate 20mg tab* | 1 | |
| *doxycycline hyclate 50mg cap* | 1 | |
| *doxycycline monohydrate 100mg cap* | 1 | |
| *doxycycline monohydrate 100mg tab* | 1 | |
| *doxycycline monohydrate 50mg cap* | 1 | |
| *doxycycline monohydrate 50mg tab* | 1 | |
| *doxycycline monohydrate 5mg/ml oral susp* | 2 | |
| *doxycycline monohydrate 75mg tab* | 1 | |
| *ertapenem 1gm inj* | 2 | |
| *fosfomycin 3gm powder for oral soln* | 2 | |
| *levofloxacin 250mg tab* | 1 | |
| *levofloxacin 25mg/ml oral soln* | 2 | |
| *levofloxacin 500mg tab* | 1 | |
| *levofloxacin 500mg/100ml inj* | 2 | |
| *levofloxacin 750mg tab* | 1 | |
| *levofloxacin 750mg/150ml inj* | 2 | |
| *linezolid 100mg/5ml oral susp* | 2 | QL=1800 ML/30 Days |
| *linezolid 600mg tab* | 2 | QL=60 EA/30 Days |
| *linezolid 600mg/300ml inj* | 2 | |
| *meropenem 1gm inj* | 2 | |
| *meropenem 500mg inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *methenamine hippurate 1gm tab* | 2 | |
| *metronidazole 0.75% vaginal gel* | 1 | |
| *metronidazole 250mg tab* | 1 | |
| *metronidazole 500mg tab* | 1 | |
| *metronidazole 5mg/ml inj* | 2 | |
| *minocycline 100mg cap* | 1 | |
| *minocycline 50mg cap* | 1 | |
| *minocycline 75mg cap* | 1 | |
| MOXIFLOXACIN 1.6MG/ML INJ | 2 | |
| *moxifloxacin 400mg tab* | 2 | |
| *nitrofurantoin macro/nitrofurantoin mono 100mg cap* | 1 | |
| *nitrofurantoin macrocrystals 100mg cap* | 1 | |
| *nitrofurantoin macrocrystals 50mg cap* | 1 | |
| *sulfadiazine 500mg tab* | 2 | |
| *sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp* | 2 | |
| *sulfamethoxazole/trimethoprim 400-80mg tab* | 1 | |
| *sulfamethoxazole/trimethoprim 800-160mg tab* | 1 | |
| *tetracycline 250mg cap* | 2 | |
| *tetracycline 500mg cap* | 2 | |
| *tigecycline 50mg inj* | 2 | |
| *tinidazole 250mg tab* | 2 | |
| *tinidazole 500mg tab* | 2 | |
| *trimethoprim 100mg tab* | 2 | |
| *vancomycin 100mg/ml inj* | 2 | |
| *vancomycin 125mg cap* | 2 | QL=120 EA/30 Days |
| *vancomycin 1gm inj* | 2 | |
| *vancomycin 250mg cap* | 2 | QL=120 EA/30 Days |
| *vancomycin 500mg inj* | 2 | |
| *vancomycin 750mg inj* | 2 | |
| XIFAXAN 200MG TAB | 3 | QL=9 EA/3 Days |
| XIFAXAN 550MG TAB | 3 | PA QL=60 EA/30 Days |
| **BETA-LACTAM, CEPHALOSPORINS** | | |
| CEFACLOR 250MG CAP | 2 | |
| CEFACLOR 500MG CAP | 2 | |
| *cefadroxil 100mg/ml oral susp* | 2 | |
| *cefadroxil 500mg cap* | 1 | |
| *cefadroxil 50mg/ml oral susp* | 2 | |
| *cefazolin 1gm inj* | 2 | |
| *cefazolin 200mg/ml inj* | 2 | |
| *cefazolin 500mg inj* | 2 | |
| *cefdinir 25mg/ml oral susp* | 2 | |
| *cefdinir 300mg cap* | 1 | |
| *cefdinir 50mg/ml oral susp* | 2 | |
| *cefepime 1gm inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *cefepime 2gm inj* | 2 | |
| *cefixime 400mg cap* | 2 | |
| *cefoxitin 1gm inj* | 2 | |
| *cefoxitin 200mg/ml inj* | 2 | |
| *cefoxitin 2gm inj* | 2 | |
| *cefpodoxime 100mg tab* | 2 | |
| CEFPODOXIME 10MG/ML ORAL SUSP | 2 | |
| *cefpodoxime 200mg tab* | 2 | |
| CEFPODOXIME 20MG/ML ORAL SUSP | 2 | |
| *cefprozil 250mg tab* | 1 | |
| *cefprozil 25mg/ml oral susp* | 2 | |
| *cefprozil 500mg tab* | 1 | |
| *cefprozil 50mg/ml oral susp* | 2 | |
| *ceftaroline fosamil 400mg inj* | 5 | NDS |
| *ceftaroline fosamil 600mg inj* | 5 | NDS |
| *ceftazidime 1gm inj* | 2 | |
| CEFTAZIDIME 200MG/ML INJ | 2 | |
| *ceftazidime 2gm inj* | 2 | |
| *ceftriaxone 10gm inj* | 2 | |
| *ceftriaxone 1gm inj* | 2 | |
| *ceftriaxone 250mg inj* | 2 | |
| *ceftriaxone 2gm inj* | 2 | |
| *ceftriaxone 500mg inj* | 2 | |
| *cefuroxime 1500mg inj* | 2 | |
| *cefuroxime 250mg tab* | 1 | |
| *cefuroxime 500mg tab* | 1 | |
| *cefuroxime 750mg inj* | 2 | |
| *cephalexin 250mg cap* | 1 | |
| *cephalexin 25mg/ml oral susp* | 1 | |
| *cephalexin 500mg cap* | 1 | |
| *cephalexin 50mg/ml oral susp* | 1 | |
| *tazicef 1gm inj* | 2 | |
| *tazicef 2gm inj* | 2 | |
| TAZICEF 6GM INJ | 2 | |
| **BETA-LACTAM, PENICILLINS** | | |
| AMOXICILLIN 125MG CHEW TAB | 1 | |
| *amoxicillin 250mg cap* | 1 | |
| AMOXICILLIN 250MG CHEW TAB | 1 | |
| *amoxicillin 25mg/ml oral susp* | 1 | |
| *amoxicillin 40mg/ml oral susp* | 1 | |
| *amoxicillin 500mg cap* | 1 | |
| *amoxicillin 500mg tab* | 1 | |
| *amoxicillin 50mg/ml oral susp* | 1 | |
| *amoxicillin 80mg/ml oral susp* | 1 | |
| *amoxicillin 875mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *amoxicillin/clavulanate 250-125mg tab* | 1 | |
| *amoxicillin/clavulanate 500-125mg tab* | 1 | |
| *amoxicillin/clavulanate 875-125mg tab* | 1 | |
| *amoxicillin/k clavulanate 200-28.5mg/5ml oral susp* | 1 | |
| *amoxicillin/k clavulanate 250-62.5mg/5ml oral susp* | 1 | |
| *amoxicillin/k clavulanate 400-57mg/5ml oral susp* | 1 | |
| *amoxicillin/k clavulanate 600-42.9mg/5ml oral susp* | 1 | |
| *ampicillin 100mg/ml inj* | 2 | |
| *ampicillin 1gm inj* | 2 | |
| *ampicillin 2gm inj* | 2 | |
| *ampicillin 500mg cap* | 1 | |
| *ampicillin/sulbactam 100-50mg/ml inj* | 2 | |
| *ampicillin/sulbactam 1000-500mg inj* | 2 | |
| *ampicillin/sulbactam 2000-1000mg inj* | 2 | |
| BICILLIN L-A 1200000UNIT/2ML SYRINGE | 4 | |
| BICILLIN L-A 2400000UNIT/4ML SYRINGE | 4 | |
| BICILLIN L-A 600000UNIT/ML SYRINGE | 4 | |
| *dicloxacillin 250mg cap* | 2 | |
| *dicloxacillin 500mg cap* | 2 | |
| *nafcillin 100mg/ml inj* | 2 | |
| *nafcillin 1gm inj* | 2 | |
| *nafcillin 2gm inj* | 2 | |
| *oxacillin 100mg/ml inj* | 2 | |
| *oxacillin 1gm inj* | 2 | |
| *oxacillin 2gm inj* | 2 | |
| *penicillin g potassium 1000000unit/ml inj* | 2 | |
| PENICILLIN G SODIUM 100000UNIT/ML INJ | 2 | |
| *penicillin v potassium 250mg tab* | 1 | |
| PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN | 1 | |
| *penicillin v potassium 500mg tab* | 1 | |
| PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN | 1 | |
| *piperacillin/tazobactam 2000-250mg inj* | 2 | |
| *piperacillin/tazobactam 3000-375mg inj* | 2 | |
| *piperacillin/tazobactam 36-4.5gm inj* | 2 | |
| *piperacillin/tazobactam 4000-500mg inj* | 2 | |
| **MACROLIDES** | | |
| *azithromycin 20mg/ml oral susp* | 2 | |
| *azithromycin 250mg tab* | 1 | |
| *azithromycin 250mg tab pack (6)* | 1 | |
| *azithromycin 40mg/ml oral susp* | 2 | |
| *azithromycin 500mg inj* | 2 | |
| *azithromycin 500mg tab* | 1 | |
| *azithromycin 500mg tab pack (3)* | 1 | |
| *azithromycin 600mg tab* | 1 | |
| *clarithromycin 250mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| CLARITHROMYCIN 25MG/ML ORAL SUSP | 2 | |
| *clarithromycin 500mg tab* | 1 | |
| CLARITHROMYCIN 50MG/ML ORAL SUSP | 2 | |
| *erythromycin 250mg dr tab* | 2 | |
| *erythromycin 250mg tab* | 2 | |
| *erythromycin 333mg dr tab* | 2 | |
| *erythromycin 500mg dr tab* | 2 | |
| *erythromycin 500mg tab* | 2 | |
| *fidaxomicin 200mg tab* | 2 | PA QL=20 EA/10 Days |
| **ANTICOAGULANTS** | | |
| **ANTICOAGULANTS - MISC.** | | |
| *anagrelide 0.5mg cap* | 2 | |
| *anagrelide 1mg cap* | 2 | |
| *aspirin/dipyridamole 25-200mg er cap* | 2 | QL=60 EA/30 Days |
| *cilostazol 100mg tab* | 1 | |
| *cilostazol 50mg tab* | 1 | |
| *clopidogrel 75mg tab* | 1 | |
| *dabigatran etexilate mesylate 110mg cap* | 2 | QL=60 EA/30 Days |
| *dabigatran etexilate mesylate 150mg cap* | 2 | QL=60 EA/30 Days |
| *dabigatran etexilate mesylate 75mg cap* | 2 | QL=60 EA/30 Days |
| *dipyridamole 25mg tab* | 2 | |
| *dipyridamole 50mg tab* | 2 | |
| *dipyridamole 75mg tab* | 2 | |
| ELIQUIS 0.15MG SPRINKLE CAP | 3 | QL=70 EA/28 Days |
| ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (112) | 3 | QL=560 EA/28 Days |
| ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (28) | 3 | QL=140 EA/28 Days |
| ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (84) | 3 | QL=420 EA/28 Days |
| ELIQUIS 2.5MG TAB | 3 | QL=60 EA/30 Days |
| ELIQUIS 5MG TAB | 3 | QL=74 EA/30 Days |
| ELIQUIS 5MG TAB 30-DAY STARTER PACK (74) | 3 | QL=74 EA/30 Days |
| *enoxaparin sodium 100mg/1ml syringe* | 2 | |
| *enoxaparin sodium 120mg/0.8ml syringe* | 2 | |
| *enoxaparin sodium 150mg/1ml syringe* | 2 | |
| *enoxaparin sodium 30mg/0.3ml syringe* | 2 | |
| *enoxaparin sodium 40mg/0.4ml syringe* | 2 | |
| *enoxaparin sodium 60mg/0.6ml syringe* | 2 | |
| *enoxaparin sodium 80mg/0.8ml syringe* | 2 | |
| *fondaparinux sodium 10mg/0.8ml syringe* | 2 | |
| *fondaparinux sodium 2.5mg/0.5ml syringe* | 2 | |
| *fondaparinux sodium 5mg/0.4ml syringe* | 2 | |
| *fondaparinux sodium 7.5mg/0.6ml syringe* | 2 | |
| *heparin sodium porcine 10000unit/ml inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *heparin sodium porcine 1000unit/ml inj* | 2 | |
| *heparin sodium porcine 20000unit/ml inj* | 2 | |
| *heparin sodium porcine 5000unit/ml inj* | 2 | |
| *jantoven 10mg tab* | 1 | |
| *jantoven 1mg tab* | 1 | |
| *jantoven 2.5mg tab* | 1 | |
| *jantoven 2mg tab* | 1 | |
| *jantoven 3mg tab* | 1 | |
| *jantoven 4mg tab* | 1 | |
| *jantoven 5mg tab* | 1 | |
| *jantoven 6mg tab* | 1 | |
| *jantoven 7.5mg tab* | 1 | |
| *prasugrel 10mg tab* | 2 | QL=30 EA/30 Days |
| *prasugrel 5mg tab* | 2 | QL=30 EA/30 Days |
| *rivaroxaban 2.5mg tab* | 2 | QL=60 EA/30 Days |
| *ticagrelor 60mg tab* | 2 | QL=60 EA/30 Days |
| *ticagrelor 90mg tab* | 2 | QL=60 EA/30 Days |
| *warfarin sodium 10mg tab* | 1 | |
| *warfarin sodium 1mg tab* | 1 | |
| *warfarin sodium 2.5mg tab* | 1 | |
| *warfarin sodium 2mg tab* | 1 | |
| *warfarin sodium 3mg tab* | 1 | |
| *warfarin sodium 4mg tab* | 1 | |
| *warfarin sodium 5mg tab* | 1 | |
| *warfarin sodium 6mg tab* | 1 | |
| *warfarin sodium 7.5mg tab* | 1 | |
| XARELTO 10MG TAB | 4 | QL=30 EA/30 Days |
| XARELTO 15MG TAB | 4 | QL=60 EA/30 Days |
| XARELTO 20MG TAB | 4 | QL=30 EA/30 Days |
| **ANTICONVULSANTS** | | |
| **ANTICONVULSANTS - BENZODIAZEPINES** | | |
| *clobazam 10mg tab* | 2 | QL=60 EA/30 Days |
| *clobazam 2.5mg/ml oral susp* | 2 | QL=480 ML/30 Days |
| *clobazam 20mg tab* | 2 | QL=60 EA/30 Days |
| *clonazepam 0.125mg odt* | 2 | QL=90 EA/30 Days |
| *clonazepam 0.25mg odt* | 2 | QL=90 EA/30 Days |
| *clonazepam 0.5mg odt* | 2 | QL=90 EA/30 Days |
| *clonazepam 0.5mg tab* | 1 | QL=90 EA/30 Days |
| *clonazepam 1mg odt* | 2 | QL=90 EA/30 Days |
| *clonazepam 1mg tab* | 1 | QL=90 EA/30 Days |
| *clonazepam 2mg odt* | 2 | QL=300 EA/30 Days |
| *clonazepam 2mg tab* | 1 | QL=300 EA/30 Days |
| *diazepam 10mg/2ml rectal gel* | 2 | QL=10 EA/30 Days |
| *diazepam 2.5mg/0.5ml rectal gel* | 3 | QL=10 EA/30 Days |
| *diazepam 20mg/4ml rectal gel* | 2 | QL=10 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| NAYZILAM 5MG/0.1ML NASAL SPRAY | 4 | QL=10 EA/30 Days |
| SYMPAZAN 10MG ORAL FILM | 4 | PA_NSO QL=60 EA/30 Days |
| SYMPAZAN 20MG ORAL FILM | 4 | PA_NSO QL=60 EA/30 Days |
| SYMPAZAN 5MG ORAL FILM | 4 | PA_NSO QL=60 EA/30 Days |
| VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK | 4 | QL=10 EA/30 Days |
| VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK | 4 | QL=10 EA/30 Days |
| VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK | 4 | QL=10 EA/30 Days |
| VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK | 4 | QL=10 EA/30 Days |
| **ANTICONVULSANTS - MISC.** | | |
| *brivaracetam 100mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *brivaracetam 10mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *brivaracetam 10mg/ml oral soln* | 2 | PA_NSO QL=600 ML/30 Days |
| *brivaracetam 25mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *brivaracetam 50mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *brivaracetam 75mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *carbamazepine 100mg chew tab* | 2 | |
| *carbamazepine 100mg er cap* | 2 | |
| *carbamazepine 100mg er tab* | 2 | |
| *carbamazepine 200mg er cap* | 2 | |
| *carbamazepine 200mg er tab* | 2 | |
| *carbamazepine 200mg tab* | 1 | |
| *carbamazepine 20mg/ml oral susp* | 2 | |
| *carbamazepine 300mg er cap* | 2 | |
| *carbamazepine 400mg er tab* | 2 | |
| DIACOMIT 250MG CAP | 5 | NDS PA_NSO QL=360 EA/30 Days |
| DIACOMIT 250MG POWDER FOR ORAL SUSP | 5 | NDS PA_NSO QL=360 EA/30 Days |
| DIACOMIT 500MG CAP | 5 | NDS PA_NSO QL=180 EA/30 Days |
| DIACOMIT 500MG POWDER FOR ORAL SUSP | 5 | NDS PA_NSO QL=180 EA/30 Days |
| DILANTIN 30MG ER CAP | 2 | |
| EPIDIOLEX 100MG/ML ORAL SOLN | 5 | NDS PA_NSO QL=600 ML/30 Days |
| *eslicarbazepine acetate 200mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *eslicarbazepine acetate 400mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *eslicarbazepine acetate 600mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| *eslicarbazepine acetate 800mg tab* | 2 | PA_NSO QL=60 EA/30 Days |
| FINTEPLA 2.2MG/ML ORAL SOLN | 5 | NDS PA_NSO QL=360 ML/30 Days |
| *gabapentin 100mg cap* | 1 | QL=360 EA/30 Days |
| *gabapentin 300mg cap* | 1 | QL=360 EA/30 Days |
| *gabapentin 400mg cap* | 1 | QL=270 EA/30 Days |
| *gabapentin 50mg/ml oral soln* | 2 | QL=2160 ML/30 Days |
| *gabapentin 600mg tab (neurontin equiv)* | 1 | QL=180 EA/30 Days |
| *gabapentin 800mg tab* | 1 | QL=135 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *lacosamide 100mg tab* | 2 | QL=60 EA/30 Days |
| *lacosamide 10mg/ml oral soln* | 2 | QL=1200 ML/30 Days |
| *lacosamide 150mg tab* | 2 | QL=60 EA/30 Days |
| *lacosamide 200mg tab* | 2 | QL=60 EA/30 Days |
| *lacosamide 50mg tab* | 2 | QL=120 EA/30 Days |
| *lamotrigine 100mg tab* | 1 | |
| *lamotrigine 150mg tab* | 1 | |
| *lamotrigine 200mg tab* | 1 | |
| *lamotrigine 25mg chew tab* | 2 | |
| *lamotrigine 25mg tab* | 1 | |
| *lamotrigine 5mg chew tab* | 2 | |
| *levetiracetam 1000mg tab* | 1 | |
| *levetiracetam 100mg/ml oral soln* | 2 | |
| *levetiracetam 250mg tab* | 1 | |
| *levetiracetam 500mg er tab* | 2 | QL=180 EA/30 Days |
| *levetiracetam 500mg tab* | 1 | |
| *levetiracetam 750mg er tab* | 2 | QL=120 EA/30 Days |
| *levetiracetam 750mg tab* | 1 | |
| *oxcarbazepine 150mg tab* | 1 | |
| *oxcarbazepine 300mg tab* | 1 | |
| *oxcarbazepine 600mg tab* | 1 | |
| *oxcarbazepine 60mg/ml oral susp* | 2 | |
| *perampanel 0.5mg/ml oral susp* | 2 | PA_NSO QL=720 ML/30 Days |
| *perampanel 10mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *perampanel 12mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *perampanel 2mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *perampanel 4mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *perampanel 6mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *perampanel 8mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| PHENOBARBITAL 100MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 15MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 16.2MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 30MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 32.4MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 4MG/ML ORAL SOLN | 2 | QL=1500 ML/30 Days |
| PHENOBARBITAL 60MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 64.8MG TAB | 1 | QL=120 EA/30 Days |
| PHENOBARBITAL 97.2MG TAB | 1 | QL=120 EA/30 Days |
| *phenytek 200mg er cap* | 2 | |
| *phenytek 300mg er cap* | 2 | |
| *phenytoin 25mg/ml oral susp* | 1 | |
| *phenytoin 50mg chew tab* | 2 | |
| *phenytoin sodium 100mg er cap* | 2 | |
| *pregabalin 100mg cap* | 1 | QL=120 EA/30 Days |
| *pregabalin 150mg cap* | 1 | QL=90 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *pregabalin 200mg cap* | 1 | QL=90 EA/30 Days |
| *pregabalin 20mg/ml oral soln* | 2 | QL=900 ML/30 Days |
| *pregabalin 225mg cap* | 1 | QL=60 EA/30 Days |
| *pregabalin 25mg cap* | 1 | QL=120 EA/30 Days |
| *pregabalin 300mg cap* | 1 | QL=60 EA/30 Days |
| *pregabalin 50mg cap* | 1 | QL=120 EA/30 Days |
| *pregabalin 75mg cap* | 1 | QL=120 EA/30 Days |
| *primidone 250mg tab* | 1 | |
| *primidone 50mg tab* | 1 | |
| *roweepra 500mg tab* | 1 | |
| *rufinamide 200mg tab* | 2 | PA_NSO QL=480 EA/30 Days |
| *rufinamide 400mg tab* | 2 | PA_NSO QL=240 EA/30 Days |
| *rufinamide 40mg/ml oral susp* | 2 | PA_NSO QL=2760 ML/30 Days |
| SPRITAM 250MG TAB FOR ORAL SUSP | 4 | PA_NSO QL=360 EA/30 Days |
| SPRITAM 500MG TAB FOR ORAL SUSP | 4 | PA_NSO QL=180 EA/30 Days |
| SUBVENITE 10MG/ML ORAL SUSP | 4 | PA_NSO QL=2160 ML/30 Days |
| *topiramate 100mg tab* | 1 | |
| *topiramate 15mg cap* | 2 | |
| *topiramate 200mg tab* | 1 | |
| *topiramate 25mg cap* | 2 | |
| *topiramate 25mg tab* | 1 | |
| *topiramate 25mg/ml oral soln* | 2 | PA_NSO QL=480 ML/30 Days |
| *topiramate 50mg tab* | 1 | |
| ZONISADE 100MG/5ML ORAL SUSP | 4 | PA_NSO QL=900 ML/30 Days |
| *zonisamide 100mg cap* | 1 | |
| *zonisamide 25mg cap* | 1 | |
| *zonisamide 50mg cap* | 1 | |
| ZTALMY 50MG/ML ORAL SUSP | 5 | NDS PA_NSO QL=1100 ML/30 Days |
| **CARBAMATES** | | |
| *felbamate 120mg/ml oral susp* | 2 | |
| *felbamate 400mg tab* | 2 | |
| *felbamate 600mg tab* | 2 | |
| XCOPRI 100MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| XCOPRI 150MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| XCOPRI 200MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| XCOPRI 25MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| XCOPRI 50MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| XCOPRI TAB 100/150MG MAINTENANCE PACK (56) | 4 | PA_NSO QL=56 EA/28 Days |
| XCOPRI TAB 12.5/25MG TITRATION PACK (28) | 4 | PA_NSO QL=28 EA/28 Days |
| XCOPRI TAB 150/200MG PACK (56) | 4 | PA_NSO QL=56 EA/28 Days |
| XCOPRI TAB 150/200MG TITRATION PACK (28) | 4 | PA_NSO QL=28 EA/28 Days |
| XCOPRI TAB 50/100MG TITRATION PACK (28) | 4 | PA_NSO QL=28 EA/28 Days |
| **GABA MODULATORS** | | |
| TIAGABINE 12MG TAB | 2 | |
| TIAGABINE 16MG TAB | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *tiagabine 2mg tab* | 2 | |
| *tiagabine 4mg tab* | 2 | |
| *vigabatrin 500mg powder for oral soln* | 5 | NDS PA_NSO QL=180 EA/30 Days |
| *vigabatrin 500mg tab* | 5 | NDS PA_NSO QL=180 EA/30 Days |
| **SUCCINIMIDES** | | |
| *ethosuximide 250mg cap* | 2 | |
| *ethosuximide 50mg/ml oral soln* | 2 | |
| *methsuximide 300mg cap* | 2 | |
| **VALPROIC ACID** | | |
| *divalproex sodium 125mg dr cap* | 2 | |
| *divalproex sodium 125mg dr tab* | 1 | |
| *divalproex sodium 250mg dr tab* | 1 | |
| *divalproex sodium 500mg dr tab* | 1 | |
| *valproic acid 250mg cap* | 2 | |
| *valproic acid 50mg/ml oral soln* | 2 | |
| **ANTIDEPRESSANTS** | | |
| **ANTIDEPRESSANTS - MISC.** | | |
| AUVELITY 105-45MG ER TAB | 4 | PA_NSO QL=60 EA/30 Days |
| *bupropion 100mg tab* | 1 | |
| *bupropion 75mg tab* | 1 | |
| *bupropion sr (12hr) 100mg tab* | 1 | |
| *bupropion sr (12hr) 150mg tab* | 1 | |
| *bupropion sr (12hr) 200mg tab* | 1 | |
| *bupropion xl (24hr) 150mg tab* | 1 | |
| *bupropion xl (24hr) 300mg tab* | 1 | |
| *mirtazapine 15mg odt* | 2 | |
| *mirtazapine 15mg tab* | 1 | |
| *mirtazapine 30mg odt* | 2 | |
| *mirtazapine 30mg tab* | 1 | |
| *mirtazapine 45mg odt* | 2 | |
| *mirtazapine 45mg tab* | 1 | |
| *mirtazapine 7.5mg tab* | 1 | |
| ZURZUVAE 20MG CAP | 5 | NDS PA_NSO QL=28 EA/14 Days |
| ZURZUVAE 25MG CAP | 5 | NDS PA_NSO QL=28 EA/14 Days |
| ZURZUVAE 30MG CAP | 5 | NDS PA_NSO QL=14 EA/14 Days |
| **MONOAMINE OXIDASE INHIBITORS (MAOIS)** | | |
| EMSAM 12MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| EMSAM 6MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| EMSAM 9MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| MARPLAN 10MG TAB | 3 | QL=180 EA/30 Days |
| PHENELZINE 15MG TAB | 3 | |
| *tranylcypromine 10mg tab* | 2 | |
| **SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)** | | |
| *citalopram 10mg tab* | 1 | |
| *citalopram 20mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *citalopram 2mg/ml oral soln* | 2 | QL=600 ML/30 Days |
| *citalopram 40mg tab* | 1 | |
| *escitalopram 10mg tab* | 1 | |
| *escitalopram 1mg/ml oral soln* | 2 | QL=600 ML/30 Days |
| *escitalopram 20mg tab* | 1 | |
| *escitalopram 5mg tab* | 1 | |
| *fluoxetine 10mg cap* | 1 | |
| *fluoxetine 20mg cap* | 1 | |
| *fluoxetine 40mg cap* | 1 | |
| *fluoxetine 4mg/ml oral soln* | 2 | QL=600 ML/30 Days |
| *fluoxetine 60mg tab* | 1 | |
| *fluvoxamine maleate 100mg tab* | 1 | |
| *fluvoxamine maleate 25mg tab* | 1 | |
| *fluvoxamine maleate 50mg tab* | 1 | |
| *paroxetine 10mg tab* | 1 | |
| PAROXETINE 10MG/5ML ORAL SUSP | 2 | QL=900 ML/30 Days |
| *paroxetine 12.5mg er tab* | 2 | QL=30 EA/30 Days |
| *paroxetine 20mg tab* | 1 | |
| *paroxetine 25mg er tab* | 2 | QL=60 EA/30 Days |
| *paroxetine 30mg tab* | 1 | |
| *paroxetine 37.5mg er tab* | 2 | QL=60 EA/30 Days |
| *paroxetine 40mg tab* | 1 | |
| *sertraline 100mg tab* | 1 | |
| *sertraline 20mg/ml oral soln* | 2 | QL=300 ML/30 Days |
| *sertraline 25mg tab* | 1 | |
| *sertraline 50mg tab* | 1 | |
| **SEROTONIN MODULATORS** | | |
| EXXUA 18.2MG ER TAB | 4 | PA_NSO QL=30 EA/30 Days |
| EXXUA 18.2MG TAB TITRATION PACK (32) | 4 | PA_NSO QL=32 EA/180 Days |
| EXXUA 36.3MG ER TAB | 4 | PA_NSO QL=30 EA/30 Days |
| EXXUA 54.5MG ER TAB | 4 | PA_NSO QL=30 EA/30 Days |
| EXXUA 72.6MG ER TAB | 4 | PA_NSO QL=30 EA/30 Days |
| NEFAZODONE 100MG TAB | 2 | |
| NEFAZODONE 150MG TAB | 2 | |
| NEFAZODONE 200MG TAB | 2 | |
| NEFAZODONE 250MG TAB | 2 | |
| NEFAZODONE 50MG TAB | 2 | |
| RALDESY 10MG/ML ORAL SOLN | 4 | PA_NSO QL=1200 ML/30 Days |
| *trazodone 100mg tab* | 1 | |
| *trazodone 150mg tab* | 1 | |
| *trazodone 50mg tab* | 1 | |
| TRINTELLIX 10MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| TRINTELLIX 20MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| TRINTELLIX 5MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| *vilazodone 10mg tab* | 2 | QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *vilazodone 20mg tab* | 2 | QL=30 EA/30 Days |
| *vilazodone 40mg tab* | 2 | QL=30 EA/30 Days |
| **SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)** | | |
| *desvenlafaxine succinate 100mg er tab* | 2 | QL=30 EA/30 Days |
| *desvenlafaxine succinate 25mg er tab* | 2 | QL=30 EA/30 Days |
| *desvenlafaxine succinate 50mg er tab* | 2 | QL=30 EA/30 Days |
| DRIZALMA 20MG DR SPRINKLE CAP | 4 | PA_NSO QL=60 EA/30 Days |
| DRIZALMA 30MG DR SPRINKLE CAP | 4 | PA_NSO QL=60 EA/30 Days |
| DRIZALMA 40MG DR SPRINKLE CAP | 4 | PA_NSO QL=60 EA/30 Days |
| DRIZALMA 60MG DR SPRINKLE CAP | 4 | PA_NSO QL=60 EA/30 Days |
| *duloxetine 20mg dr cap* | 1 | QL=60 EA/30 Days |
| *duloxetine 30mg dr cap* | 1 | QL=60 EA/30 Days |
| *duloxetine 60mg dr cap* | 1 | QL=60 EA/30 Days |
| FETZIMA 120MG ER CAP | 4 | PA_NSO QL=30 EA/30 Days |
| FETZIMA 20MG ER CAP | 4 | PA_NSO QL=30 EA/30 Days |
| FETZIMA 40MG ER CAP | 4 | PA_NSO QL=30 EA/30 Days |
| FETZIMA 80MG ER CAP | 4 | PA_NSO QL=30 EA/30 Days |
| FETZIMA ER CAP TITRATION PACK (28) | 4 | PA_NSO QL=30 EA/30 Days |
| *venlafaxine 100mg tab* | 1 | |
| *venlafaxine 150mg er cap* | 1 | |
| *venlafaxine 25mg tab* | 1 | |
| *venlafaxine 37.5mg er cap* | 1 | |
| *venlafaxine 37.5mg tab* | 1 | |
| *venlafaxine 50mg tab* | 1 | |
| *venlafaxine 75mg er cap* | 1 | |
| *venlafaxine 75mg tab* | 1 | |
| **TRICYCLIC AGENTS** | | |
| *amitriptyline 100mg tab* | 1 | |
| *amitriptyline 10mg tab* | 1 | |
| *amitriptyline 150mg tab* | 1 | |
| *amitriptyline 25mg tab* | 1 | |
| *amitriptyline 50mg tab* | 1 | |
| *amitriptyline 75mg tab* | 1 | |
| *amoxapine 100mg tab* | 2 | |
| *amoxapine 150mg tab* | 2 | |
| *amoxapine 25mg tab* | 2 | |
| *amoxapine 50mg tab* | 2 | |
| *clomipramine 25mg cap* | 2 | |
| *clomipramine 50mg cap* | 2 | |
| *clomipramine 75mg cap* | 2 | |
| *desipramine 100mg tab* | 2 | |
| *desipramine 10mg tab* | 2 | |
| *desipramine 150mg tab* | 2 | |
| *desipramine 25mg tab* | 2 | |
| *desipramine 50mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *desipramine 75mg tab* | 2 | |
| *doxepin 100mg cap* | 2 | |
| *doxepin 10mg cap* | 2 | |
| DOXEPIN 10MG/ML ORAL SOLN | 2 | |
| DOXEPIN 150MG CAP | 2 | |
| *doxepin 25mg cap* | 2 | |
| *doxepin 50mg cap* | 2 | |
| *doxepin 75mg cap* | 2 | |
| *imipramine 10mg tab* | 1 | |
| *imipramine 25mg tab* | 1 | |
| *imipramine 50mg tab* | 1 | |
| *nortriptyline 10mg cap* | 1 | |
| *nortriptyline 25mg cap* | 1 | |
| *nortriptyline 2mg/ml oral soln* | 2 | |
| *nortriptyline 50mg cap* | 1 | |
| *nortriptyline 75mg cap* | 1 | |
| *protriptyline 10mg tab* | 2 | |
| *protriptyline 5mg tab* | 2 | |
| *trimipramine 100mg cap* | 2 | QL=60 EA/30 Days |
| *trimipramine 25mg cap* | 2 | QL=120 EA/30 Days |
| *trimipramine 50mg cap* | 2 | QL=120 EA/30 Days |
| **ANTIDIABETICS** | | |
| **ANTIDIABETIC COMBINATIONS** | | |
| *dapagliflozin/metformin 10-1000mg er tab* | 2 | QL=30 EA/30 Days |
| *dapagliflozin/metformin 10-500mg er tab* | 2 | QL=30 EA/30 Days |
| *dapagliflozin/metformin 5-1000mg er tab* | 2 | QL=60 EA/30 Days |
| *dapagliflozin/metformin 5-500mg er tab* | 2 | QL=30 EA/30 Days |
| *glipizide/metformin 2.5-250mg tab* | 1 | QL=240 EA/30 Days |
| *glipizide/metformin 2.5-500mg tab* | 1 | QL=120 EA/30 Days |
| *glipizide/metformin 5-500mg tab* | 1 | QL=120 EA/30 Days |
| *glyburide/metformin 1.25-250mg tab* | 1 | |
| *glyburide/metformin 2.5-500mg tab* | 1 | |
| *glyburide/metformin 5-500mg tab* | 1 | |
| *metformin/pioglitazone 150-15mg tab* | 2 | QL=90 EA/30 Days |
| *metformin/pioglitazone 850-15mg tab* | 2 | QL=90 EA/30 Days |
| *metformin/sitagliptin phosphate 1000-100mg er tab* | 2 | QL=30 EA/30 Days |
| *metformin/sitagliptin phosphate 1000-50mg er tab* | 2 | QL=60 EA/30 Days |
| *metformin/sitagliptin phosphate 1000-50mg tab* | 2 | QL=60 EA/30 Days |
| *metformin/sitagliptin phosphate 500-50mg er tab* | 2 | QL=60 EA/30 Days |
| *metformin/sitagliptin phosphate 500-50mg tab* | 2 | QL=60 EA/30 Days |
| **DIABETIC OTHER** | | |
| *acarbose 100mg tab* | 2 | QL=90 EA/30 Days |
| *acarbose 25mg tab* | 2 | QL=90 EA/30 Days |
| *acarbose 50mg tab* | 2 | QL=90 EA/30 Days |
| BAQSIMI 3MG/DOSE NASAL POWDER | 3 | QL=2 EA/7 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *diazoxide 50mg/ml oral susp* | 2 | |
| GVOKE 1MG/0.2ML INJ | 3 | QL=.40 ML/7 Days |
| GVOKE 1MG/0.2ML SYRINGE | 3 | QL=.40 ML/7 Days |
| GVOKE HYPOPEN 0.5MG/0.1ML AUTO-INJECTOR | 3 | QL=.20 ML/7 Days |
| GVOKE HYPOPEN 1MG/0.2ML AUTO-INJECTOR | 3 | QL=.40 ML/7 Days |
| *metformin 1000mg tab* | 1 | |
| *metformin 500mg er tab* | 1 | |
| *metformin 500mg tab* | 1 | |
| *metformin 750mg er tab* | 1 | |
| *metformin 850mg tab* | 1 | |
| *mifepristone 300mg tab* | 5 | NDS PA QL=120 EA/30 Days |
| *nateglinide 120mg tab* | 2 | QL=90 EA/30 Days |
| *nateglinide 60mg tab* | 2 | QL=90 EA/30 Days |
| *pioglitazone 15mg tab* | 1 | |
| *pioglitazone 30mg tab* | 1 | |
| *pioglitazone 45mg tab* | 1 | |
| *repaglinide 0.5mg tab* | 1 | QL=120 EA/30 Days |
| *repaglinide 1mg tab* | 1 | QL=120 EA/30 Days |
| *repaglinide 2mg tab* | 1 | QL=240 EA/30 Days |
| **DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS** | | |
| *sitagliptin phosphate 100mg tab* | 2 | QL=30 EA/30 Days |
| *sitagliptin phosphate 25mg tab* | 2 | QL=30 EA/30 Days |
| *sitagliptin phosphate 50mg tab* | 2 | QL=30 EA/30 Days |
| TRADJENTA 5MG TAB | 3 | QL=30 EA/30 Days |
| **INCRETIN MIMETIC AGENTS** | | |
| MOUNJARO 10MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| MOUNJARO 15MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| MOUNJARO 5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| OZEMPIC 1.5MG TAB | 3 | PA QL=30 EA/30 Days |
| OZEMPIC 2MG/3ML PEN INJ | 3 | PA QL=3 ML/28 Days |
| OZEMPIC 4MG TAB | 3 | PA QL=30 EA/30 Days |
| OZEMPIC 4MG/3ML PEN INJ | 3 | PA QL=3 ML/28 Days |
| OZEMPIC 8MG/3ML PEN INJ | 3 | PA QL=3 ML/28 Days |
| OZEMPIC 9MG TAB | 3 | PA QL=30 EA/30 Days |
| TRULICITY 0.75MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| TRULICITY 1.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| TRULICITY 3MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| TRULICITY 4.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| **INSULIN** | | |
| FIASP 100UNIT/ML INJ | 3 | INS PA_BvD |
| FIASP 100UNIT/ML PEN CARTRIDGE | 3 | INS |
| FIASP FLEXTOUCH 100UNIT/ML PEN INJ (3ML) | 3 | INS |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| HUMALOG 100UNIT/ML CARTRIDGE | 3 | INS |
| HUMALOG JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMALOG KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMALOG KWIKPEN 200UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMALOG MIX (50/50) KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMALOG MIX (75/25) 100UNIT/ML INJ | 3 | INS |
| HUMALOG MIX (75/25) KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMULIN (70/30) 100UNIT/ML INJ | 3 | INS |
| HUMULIN (70/30) KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMULIN N 100UNIT/ML INJ | 3 | INS |
| HUMULIN N KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| HUMULIN R 100UNIT/ML INJ | 3 | INS |
| HUMULIN R U-500 KWIKPEN 500UNIT/ML PEN INJ (3ML) | 3 | INS |
| INSULIN GLARGINE MAX SOLOSTAR 300UNIT/ML PEN INJ (3ML) | 3 | INS |
| INSULIN GLARGINE SOLOSTAR 300UNIT/ML PEN INJ (1.5ML) | 3 | INS |
| INSULIN LISPRO 100UNIT/ML INJ | 3 | INS PA_BvD |
| INSULIN LISPRO JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| INSULIN LISPRO KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| INSULIN LISPRO PROTAMINE HUMAN (75/25) 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| LANTUS 100UNIT/ML INJ | 3 | INS |
| LANTUS SOLOSTAR 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| LYUMJEV 100UNIT/ML INJ | 3 | INS PA_BvD |
| LYUMJEV KWIKPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| LYUMJEV KWIKPEN 200UNIT/ML PEN INJ (3ML) | 3 | INS |
| NOVOLIN MIX (70/30) 100UNIT/ML INJ | 3 | INS |
| NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| NOVOLIN N 100UNIT/ML INJ | 3 | INS |
| NOVOLIN N FLEXPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| NOVOLIN R 100UNIT/ML INJ | 3 | INS |
| NOVOLIN R FLEXPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| NOVOLOG 100UNIT/ML CARTRIDGE | 3 | INS |
| NOVOLOG 100UNIT/ML INJ | 3 | INS PA_BvD |
| NOVOLOG FLEXPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| NOVOLOG MIX (70/30) 100UNIT/ML INJ | 3 | INS |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| NOVOLOG MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| TRESIBA 100UNIT/ML INJ | 3 | INS |
| TRESIBA FLEXTOUCH 100UNIT/ML PEN INJ (3ML) | 3 | INS |
| TRESIBA FLEXTOUCH 200UNIT/ML PEN INJ (3ML) | 3 | INS |
| **SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS** | | |
| *dapagliflozin 10mg tab* | 1 | QL=30 EA/30 Days |
| *dapagliflozin 5mg tab* | 1 | QL=30 EA/30 Days |
| FARXIGA 10MG TAB | 3 | QL=30 EA/30 Days |
| FARXIGA 5MG TAB | 3 | QL=30 EA/30 Days |
| JARDIANCE 10MG TAB | 3 | ST QL=30 EA/30 Days |
| JARDIANCE 25MG TAB | 3 | ST QL=30 EA/30 Days |
| **SULFONYLUREAS** | | |
| *glimepiride 1mg tab* | 1 | |
| *glimepiride 2mg tab* | 1 | |
| *glimepiride 4mg tab* | 1 | |
| *glipizide 10mg er tab* | 1 | |
| *glipizide 10mg tab* | 1 | |
| *glipizide 2.5mg er tab* | 1 | |
| *glipizide 5mg er tab* | 1 | |
| *glipizide 5mg tab* | 1 | |
| *glyburide 1.25mg tab* | 1 | |
| *glyburide 2.5mg tab* | 1 | |
| *glyburide 5mg tab* | 1 | |
| **ANTIDOTES AND SPECIFIC ANTAGONISTS** | | |
| **ANTIDOTES - CHELATING AGENTS** | | |
| *deferasirox 180mg tab* | 2 | PA |
| *deferasirox 360mg tab* | 2 | PA |
| *deferasirox 90mg tab* | 2 | PA |
| *penicillamine 250mg tab* | 5 | NDS |
| *trientine 250mg cap* | 5 | NDS PA QL=240 EA/30 Days |
| **ANTIEMETICS** | | |
| **ANTIEMETICS - MISCELLANEOUS** | | |
| *aprepitant 125mg cap* | 2 | PA_BvD QL=3 EA/2 Days |
| *aprepitant 125mg/80mg cap therapy pack (3)* | 2 | PA_BvD QL=6 EA/4 Days |
| *aprepitant 40mg cap* | 2 | PA_BvD QL=3 EA/2 Days |
| *aprepitant 80mg cap* | 2 | PA_BvD QL=6 EA/4 Days |
| *dronabinol 10mg cap* | 2 | PA QL=60 EA/30 Days |
| *dronabinol 2.5mg cap* | 2 | PA QL=60 EA/30 Days |
| *dronabinol 5mg cap* | 2 | PA QL=60 EA/30 Days |
| *granisetron 1mg tab* | 2 | PA_BvD QL=60 EA/30 Days |
| *meclizine 12.5mg tab* | 1 | |
| *meclizine 25mg tab* | 1 | |
| *ondansetron 0.8mg/ml oral soln* | 2 | PA_BvD QL=900 ML/30 Days |
| *ondansetron 4mg odt* | 2 | PA_BvD |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *ondansetron 4mg tab* | 1 | PA_BvD |
| *ondansetron 8mg odt* | 2 | PA_BvD |
| *ondansetron 8mg tab* | 1 | PA_BvD |
| *scopolamine 1mg/72hr patch* | 2 | QL=10 EA/30 Days |
| **ANTIFUNGALS** | | |
| **ANTIFUNGALS** | | |
| AMPHOTERICIN B 50MG INJ | 2 | PA_BvD |
| *amphotericin b liposomal 50mg inj* | 2 | PA_BvD |
| *caspofungin acetate 50mg inj* | 2 | |
| *caspofungin acetate 70mg inj* | 2 | |
| CRESEMBA 186MG CAP | 5 | NDS PA |
| CRESEMBA 74.5MG CAP | 5 | NDS PA |
| *fluconazole 100mg tab* | 1 | |
| *fluconazole 10mg/ml oral susp* | 2 | |
| *fluconazole 150mg tab* | 1 | |
| *fluconazole 200mg tab* | 1 | |
| *fluconazole 200mg/100ml inj* | 2 | |
| *fluconazole 400mg/200ml inj* | 2 | |
| *fluconazole 40mg/ml oral susp* | 2 | |
| *fluconazole 50mg tab* | 1 | |
| *flucytosine 250mg cap* | 5 | NDS |
| *flucytosine 500mg cap* | 5 | NDS |
| *griseofulvin 125mg tab* | 2 | |
| *griseofulvin 250mg tab* | 2 | |
| *griseofulvin 25mg/ml oral susp* | 2 | |
| *griseofulvin 500mg tab* | 2 | |
| *itraconazole 100mg cap* | 2 | QL=120 EA/30 Days |
| *ketoconazole 200mg tab* | 2 | |
| *micafungin sodium 100mg inj* | 2 | |
| *micafungin sodium 50mg inj* | 2 | |
| *nystatin 500000unit tab* | 2 | |
| *posaconazole 100mg dr tab* | 2 | PA QL=96 EA/30 Days |
| *posaconazole 40mg/ml oral susp* | 5 | NDS PA QL=630 ML/30 Days |
| *terbinafine 250mg tab* | 1 | QL=30 EA/30 Days |
| *terconazole 0.4% vaginal cream* | 1 | |
| *terconazole 0.8% vaginal cream* | 1 | |
| *terconazole 80mg vaginal insert* | 2 | |
| *voriconazole 200mg inj* | 2 | PA |
| *voriconazole 200mg tab* | 2 | PA QL=120 EA/30 Days |
| *voriconazole 40mg/ml oral susp* | 5 | NDS PA QL=400 ML/30 Days |
| *voriconazole 50mg tab* | 2 | PA QL=480 EA/30 Days |
| **ANTIHYPERLIPIDEMICS** | | |
| **ANTIHYPERLIPIDEMICS - MISC.** | | |
| *ezetimibe 10mg tab* | 1 | QL=30 EA/30 Days |
| *ezetimibe/simvastatin 10-10mg tab* | 2 | QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *ezetimibe/simvastatin 10-20mg tab* | 2 | QL=30 EA/30 Days |
| *ezetimibe/simvastatin 10-40mg tab* | 2 | QL=30 EA/30 Days |
| *ezetimibe/simvastatin 10-80mg tab* | 2 | QL=30 EA/30 Days |
| *icosapent ethyl 0.5gm cap* | 2 | QL=120 EA/30 Days |
| *icosapent ethyl 1gm cap* | 2 | QL=120 EA/30 Days |
| NEXLETOL 180MG TAB | 3 | PA QL=30 EA/30 Days |
| NEXLIZET 180-10MG TAB | 3 | PA QL=30 EA/30 Days |
| *niacin 1000mg er tab* | 2 | QL=60 EA/30 Days |
| *niacin 500mg er tab* | 2 | QL=60 EA/30 Days |
| *niacin 750mg er tab* | 2 | QL=60 EA/30 Days |
| *omega-3 acid ethyl esters (usp) 1gm cap* | 2 | QL=120 EA/30 Days |
| REPATHA 140MG/ML SYRINGE | 3 | PA QL=2 ML/28 Days |
| REPATHA SURECLICK 140MG/ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| **BILE ACID SEQUESTRANTS** | | |
| *cholestyramine 4gm powder for oral susp* | 2 | |
| *cholestyramine light 4gm powder for oral susp* | 2 | |
| *colesevelam 625mg tab* | 2 | |
| *colestipol 1gm tab* | 2 | |
| *colestipol 5000mg granules for oral susp* | 2 | |
| **FIBRIC ACID DERIVATIVES** | | |
| *fenofibrate 134mg cap* | 1 | |
| *fenofibrate 145mg tab* | 1 | |
| *fenofibrate 160mg tab* | 1 | |
| *fenofibrate 200mg cap* | 1 | |
| *fenofibrate 43mg cap* | 1 | |
| *fenofibrate 48mg tab* | 1 | |
| *fenofibrate 54mg tab* | 1 | |
| *fenofibrate 67mg cap* | 1 | |
| *fenofibric acid 135mg dr cap* | 1 | |
| *fenofibric acid 45mg dr cap* | 1 | |
| *gemfibrozil 600mg tab* | 1 | |
| **HMG COA REDUCTASE INHIBITORS** | | |
| *atorvastatin 10mg tab* | 1 | |
| *atorvastatin 20mg tab* | 1 | |
| *atorvastatin 40mg tab* | 1 | |
| *atorvastatin 80mg tab* | 1 | |
| *lovastatin 10mg tab* | 1 | |
| *lovastatin 20mg tab* | 1 | |
| *lovastatin 40mg tab* | 1 | |
| *pravastatin sodium 10mg tab* | 1 | |
| *pravastatin sodium 20mg tab* | 1 | |
| *pravastatin sodium 40mg tab* | 1 | |
| *pravastatin sodium 80mg tab* | 1 | |
| *rosuvastatin calcium 10mg tab* | 1 | |
| *rosuvastatin calcium 20mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *rosuvastatin calcium 40mg tab* | 1 | |
| *rosuvastatin calcium 5mg tab* | 1 | |
| *simvastatin 10mg tab* | 1 | |
| *simvastatin 20mg tab* | 1 | |
| *simvastatin 40mg tab* | 1 | |
| *simvastatin 5mg tab* | 1 | |
| *simvastatin 80mg tab* | 1 | |
| **ANTIHYPERTENSIVES** | | |
| **ACE INHIBITORS** | | |
| *benazepril 10mg tab* | 1 | |
| *benazepril 20mg tab* | 1 | |
| *benazepril 40mg tab* | 1 | |
| *benazepril 5mg tab* | 1 | |
| *captopril 100mg tab* | 2 | QL=120 EA/30 Days |
| *captopril 12.5mg tab* | 2 | QL=90 EA/30 Days |
| *captopril 25mg tab* | 2 | QL=90 EA/30 Days |
| *captopril 50mg tab* | 2 | QL=90 EA/30 Days |
| *enalapril maleate 10mg tab* | 1 | |
| *enalapril maleate 2.5mg tab* | 1 | |
| *enalapril maleate 20mg tab* | 1 | |
| *enalapril maleate 5mg tab* | 1 | |
| *fosinopril sodium 10mg tab* | 1 | |
| *fosinopril sodium 20mg tab* | 1 | |
| *fosinopril sodium 40mg tab* | 1 | |
| *lisinopril 10mg tab* | 1 | |
| *lisinopril 2.5mg tab* | 1 | |
| *lisinopril 20mg tab* | 1 | |
| *lisinopril 30mg tab* | 1 | |
| *lisinopril 40mg tab* | 1 | |
| *lisinopril 5mg tab* | 1 | |
| *moexipril 15mg tab* | 1 | |
| *moexipril 7.5mg tab* | 1 | |
| PERINDOPRIL ERBUMINE 2MG TAB | 2 | |
| *perindopril erbumine 4mg tab* | 2 | |
| PERINDOPRIL ERBUMINE 8MG TAB | 2 | |
| *quinapril 10mg tab* | 1 | |
| *quinapril 20mg tab* | 1 | |
| *quinapril 40mg tab* | 1 | |
| *quinapril 5mg tab* | 1 | |
| *ramipril 1.25mg cap* | 1 | |
| *ramipril 10mg cap* | 1 | |
| *ramipril 2.5mg cap* | 1 | |
| *ramipril 5mg cap* | 1 | |
| *trandolapril 1mg tab* | 1 | |
| *trandolapril 2mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *trandolapril 4mg tab* | 1 | |
| **ANGIOTENSIN II RECEPTOR ANTAGONISTS** | | |
| *candesartan cilexetil 16mg tab* | 2 | QL=60 EA/30 Days |
| *candesartan cilexetil 32mg tab* | 2 | QL=30 EA/30 Days |
| *candesartan cilexetil 4mg tab* | 2 | QL=60 EA/30 Days |
| *candesartan cilexetil 8mg tab* | 2 | QL=60 EA/30 Days |
| *irbesartan 150mg tab* | 1 | |
| *irbesartan 300mg tab* | 1 | |
| *irbesartan 75mg tab* | 1 | |
| *losartan potassium 100mg tab* | 1 | |
| *losartan potassium 25mg tab* | 1 | |
| *losartan potassium 50mg tab* | 1 | |
| *olmesartan medoxomil 20mg tab* | 1 | |
| *olmesartan medoxomil 40mg tab* | 1 | |
| *olmesartan medoxomil 5mg tab* | 1 | |
| *telmisartan 20mg tab* | 1 | QL=30 EA/30 Days |
| *telmisartan 40mg tab* | 1 | QL=30 EA/30 Days |
| *telmisartan 80mg tab* | 1 | QL=30 EA/30 Days |
| *valsartan 160mg tab* | 1 | |
| *valsartan 320mg tab* | 1 | |
| *valsartan 40mg tab* | 1 | |
| *valsartan 80mg tab* | 1 | |
| **ANTIADRENERGIC ANTIHYPERTENSIVES** | | |
| *clonidine 0.1mg tab* | 1 | |
| *clonidine 0.1mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *clonidine 0.2mg tab* | 1 | |
| *clonidine 0.2mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *clonidine 0.3mg tab* | 1 | |
| *clonidine 0.3mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *doxazosin 1mg tab* | 1 | |
| *doxazosin 2mg tab* | 1 | |
| *doxazosin 4mg tab* | 1 | |
| *doxazosin 8mg tab* | 1 | |
| *guanfacine 1mg tab* | 2 | |
| *guanfacine 2mg tab* | 2 | |
| *prazosin 1mg cap* | 1 | |
| *prazosin 2mg cap* | 1 | |
| *prazosin 5mg cap* | 1 | |
| *terazosin 10mg cap* | 1 | |
| *terazosin 1mg cap* | 1 | |
| *terazosin 2mg cap* | 1 | |
| *terazosin 5mg cap* | 1 | |
| **ANTIHYPERTENSIVE COMBINATIONS** | | |
| *amlodipine/benazepril 10-20mg cap* | 1 | |
| *amlodipine/benazepril 10-40mg cap* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *amlodipine/benazepril 2.5-10mg cap* | 1 | |
| *amlodipine/benazepril 5-10mg cap* | 1 | |
| *amlodipine/benazepril 5-20mg cap* | 1 | |
| *amlodipine/benazepril 5-40mg cap* | 1 | |
| *amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab* | 2 | QL=30 EA/30 Days |
| *amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab* | 2 | QL=30 EA/30 Days |
| *amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab* | 2 | QL=30 EA/30 Days |
| *amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab* | 2 | QL=30 EA/30 Days |
| *amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab* | 2 | QL=30 EA/30 Days |
| *amlodipine/olmesartan medoxomil 10-20mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/olmesartan medoxomil 10-40mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/olmesartan medoxomil 5-20mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/olmesartan medoxomil 5-40mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/valsartan 10-160mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/valsartan 10-320mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/valsartan 5-160mg tab* | 1 | QL=30 EA/30 Days |
| *amlodipine/valsartan 5-320mg tab* | 1 | QL=30 EA/30 Days |
| *atenolol/chlorthalidone 100-25mg tab* | 1 | |
| *atenolol/chlorthalidone 50-25mg tab* | 1 | |
| *benazepril/hydrochlorothiazide 10-12.5mg tab* | 1 | QL=30 EA/30 Days |
| *benazepril/hydrochlorothiazide 20-12.5mg tab* | 1 | QL=30 EA/30 Days |
| *benazepril/hydrochlorothiazide 20-25mg tab* | 1 | QL=30 EA/30 Days |
| *benazepril/hydrochlorothiazide 5-6.25mg tab* | 1 | QL=30 EA/30 Days |
| *bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab* | 2 | |
| *bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab* | 2 | |
| *bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab* | 2 | |
| *candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab* | 2 | QL=30 EA/30 Days |
| *candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab* | 2 | QL=30 EA/30 Days |
| *candesartan cilexetil/hydrochlorothiazide 32-25mg tab* | 2 | QL=30 EA/30 Days |
| *enalapril maleate/hydrochlorothiazide 10-25mg tab* | 1 | QL=60 EA/30 Days |
| *enalapril maleate/hydrochlorothiazide 5-12.5mg tab* | 1 | QL=120 EA/30 Days |
| *fosinopril sodium/hydrochlorothiazide 10-12.5mg tab* | 2 | |
| *fosinopril sodium/hydrochlorothiazide 20-12.5mg tab* | 2 | |
| *hydrochlorothiazide/irbesartan 12.5-150mg tab* | 1 | QL=60 EA/30 Days |
| *hydrochlorothiazide/irbesartan 12.5-300mg tab* | 1 | QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *hydrochlorothiazide/lisinopril 12.5-10mg tab* | 1 | |
| *hydrochlorothiazide/lisinopril 12.5-20mg tab* | 1 | |
| *hydrochlorothiazide/lisinopril 25-20mg tab* | 1 | |
| *hydrochlorothiazide/losartan potassium 12.5-100mg tab* | 1 | |
| *hydrochlorothiazide/losartan potassium 12.5-50mg tab* | 1 | |
| *hydrochlorothiazide/losartan potassium 25-100mg tab* | 1 | |
| *hydrochlorothiazide/metoprolol tartrate 25-100mg tab* | 2 | |
| *hydrochlorothiazide/metoprolol tartrate 25-50mg tab* | 2 | |
| *hydrochlorothiazide/metoprolol tartrate 50-100mg tab* | 2 | |
| *hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/olmesartan medoxomil 25-40mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/telmisartan 12.5-40mg tab* | 2 | QL=30 EA/30 Days |
| *hydrochlorothiazide/telmisartan 12.5-80mg tab* | 2 | QL=60 EA/30 Days |
| *hydrochlorothiazide/telmisartan 25-80mg tab* | 2 | QL=30 EA/30 Days |
| *hydrochlorothiazide/valsartan 12.5-160mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/valsartan 12.5-320mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/valsartan 12.5-80mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/valsartan 25-160mg tab* | 1 | QL=30 EA/30 Days |
| *hydrochlorothiazide/valsartan 25-320mg tab* | 1 | QL=30 EA/30 Days |
| **ANTIHYPERTENSIVES - MISC.** | | |
| *aliskiren 150mg tab* | 2 | QL=30 EA/30 Days |
| *aliskiren 300mg tab* | 2 | QL=30 EA/30 Days |
| *eplerenone 25mg tab* | 2 | |
| *eplerenone 50mg tab* | 2 | |
| *metyrosine 250mg cap* | 5 | NDS PA |
| **ANTIMYCOBACTERIAL AGENTS** | | |
| **ANTIMYCOBACTERIAL AGENTS** | | |
| *dapsone 100mg tab* | 2 | |
| *dapsone 25mg tab* | 2 | |
| *ethambutol 100mg tab* | 2 | |
| *ethambutol 400mg tab* | 2 | |
| *isoniazid 100mg tab* | 1 | |
| *isoniazid 10mg/ml oral soln* | 2 | |
| *isoniazid 300mg tab* | 1 | |
| PRETOMANID 200MG TAB | 4 | QL=30 EA/30 Days |
| *pyrazinamide 500mg tab* | 2 | |
| *rifabutin 150mg cap* | 2 | |
| *rifampin 150mg cap* | 2 | |
| *rifampin 300mg cap* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *rifampin 600mg inj* | 2 | |
| *rifapentine 150mg tab* | 2 | |
| SIRTURO 100MG TAB | 5 | NDS PA |
| SIRTURO 20MG TAB | 5 | NDS PA |
| **ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES** | | |
| **ALKYLATING AGENTS** | | |
| *cyclophosphamide 25mg cap* | 2 | PA_BvD |
| *cyclophosphamide 50mg cap* | 2 | PA_BvD |
| CYCLOPHOSPHAMIDE 50MG TAB | 3 | PA_BvD |
| LEUKERAN 2MG TAB | 5 | NDS PA_NSO |
| *lomustine 100mg cap* | 2 | |
| *lomustine 10mg cap* | 2 | |
| *lomustine 40mg cap* | 2 | |
| **ANTIMETABOLITES** | | |
| *mercaptopurine 2000mg/100ml oral susp* | 2 | PA_NSO QL=300 ML/30 Days |
| *mercaptopurine 50mg tab* | 2 | |
| *methotrexate 2.5mg tab* | 1 | |
| METHOTREXATE 25MG/ML INJ | 1 | |
| *methotrexate 50mg/2ml inj* | 1 | |
| ONUREG 200MG TAB | 5 | NDS PA_NSO QL=14 EA/28 Days |
| ONUREG 300MG TAB | 5 | NDS PA_NSO QL=14 EA/28 Days |
| TABLOID 40MG TAB | 5 | NDS |
| XATMEP 2.5MG/ML ORAL SOLN | 4 | PA_BvD |
| **ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS** | | |
| FRUZAQLA 1MG CAP | 5 | NDS PA_NSO QL=84 EA/28 Days |
| FRUZAQLA 5MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| INLYTA 1MG TAB | 5 | NDS PA_NSO QL=180 EA/30 Days |
| INLYTA 5MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| LENVIMA 10MG DAILY DOSE PACK (30) | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LENVIMA 12MG DAILY DOSE PACK (90) | 5 | NDS PA_NSO QL=90 EA/30 Days |
| LENVIMA 14MG DAILY DOSE PACK (60) | 5 | NDS PA_NSO QL=60 EA/30 Days |
| LENVIMA 18MG DAILY DOSE PACK (90) | 5 | NDS PA_NSO QL=90 EA/30 Days |
| LENVIMA 20MG DAILY DOSE PACK (60) | 5 | NDS PA_NSO QL=60 EA/30 Days |
| LENVIMA 24MG DAILY DOSE PACK (90) | 5 | NDS PA_NSO QL=90 EA/30 Days |
| LENVIMA 4MG DAILY DOSE PACK (30) | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LENVIMA 8MG DAILY DOSE PACK (60) | 5 | NDS PA_NSO QL=60 EA/30 Days |
| **ANTINEOPLASTIC - EGFR INHIBITORS** | | |
| *erlotinib 100mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *erlotinib 150mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *erlotinib 25mg tab* | 2 | PA_NSO QL=90 EA/30 Days |
| *gefitinib 250mg tab* | 5 | NDS PA_NSO QL=60 EA/30 Days |
| GILOTRIF 20MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| GILOTRIF 30MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| GILOTRIF 40MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LAZCLUZE 240MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| LAZCLUZE 80MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| TAGRISSO 40MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TAGRISSO 80MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| **ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS** | | |
| DAURISMO 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| DAURISMO 25MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| ERIVEDGE 150MG CAP | 5 | NDS PA_NSO QL=28 EA/28 Days |
| ODOMZO 200MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| **ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS** | | |
| *abiraterone acetate 250mg tab* | 1 | QL=120 EA/30 Days |
| *abirtega 250mg tab* | 1 | QL=120 EA/30 Days |
| AKEEGA 500-100MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| AKEEGA 500-50MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| *anastrozole 1mg tab* | 1 | QL=30 EA/30 Days |
| *bicalutamide 50mg tab* | 2 | QL=30 EA/30 Days |
| ELIGARD 22.5MG SYRINGE | 4 | QL=1 EA/84 Days |
| ELIGARD 30MG SYRINGE | 4 | QL=1 EA/112 Days |
| ELIGARD 45MG SYRINGE | 4 | QL=1 EA/168 Days |
| ELIGARD 7.5MG SYRINGE | 4 | QL=1 EA/28 Days |
| ERLEADA 240MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ERLEADA 60MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| EULEXIN 125MG CAP | 5 | NDS QL=180 EA/30 Days |
| *exemestane 25mg tab* | 2 | QL=60 EA/30 Days |
| FIRMAGON 120MG INJ | 3 | PA_NSO QL=4 EA/365 Days |
| FIRMAGON 80MG INJ | 3 | PA_NSO QL=1 EA/28 Days |
| INLURIYO 200MG TAB | 5 | NDS PA_NSO QL=84 EA/28 Days |
| *letrozole 2.5mg tab* | 2 | QL=30 EA/30 Days |
| LIFYORLI CAP 125MG 1-DOSE SUPPLY PACK (2) | 5 | NDS PA_NSO QL=18 EA/28 Days |
| LIFYORLI CAP 125MG 3-DOSE SUPPLY PACK (6) | 5 | NDS PA_NSO QL=18 EA/28 Days |
| LIFYORLI CAP 125MG 9-DOSE SUPPLY PACK (18) | 5 | NDS PA_NSO QL=18 EA/28 Days |
| LIFYORLI CAP 150MG 1-DOSE SUPPLY PACK (3) | 5 | NDS PA_NSO QL=27 EA/28 Days |
| LIFYORLI CAP 150MG 3-DOSE SUPPLY PACK (9) | 5 | NDS PA_NSO QL=27 EA/28 Days |
| LIFYORLI CAP 150MG 9-DOSE SUPPLY PACK (27) | 5 | NDS PA_NSO QL=27 EA/28 Days |
| LUPRON 11.25MG SYRINGE (3 MONTH) | 5 | QL=1 EA/84 Days |
| LUPRON 3.75MG SYRINGE (1 MONTH) | 5 | NDS QL=1 EA/28 Days |
| LYSODREN 500MG TAB | 5 | NDS |
| *megestrol acetate 20mg tab* | 1 | PA_NSO |
| *megestrol acetate 40mg tab* | 1 | PA_NSO |
| *megestrol acetate 40mg/ml oral susp* | 2 | PA |
| NILUTAMIDE 150MG TAB | 5 | NDS QL=60 EA/30 Days |
| NUBEQA 300MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| ORGOVYX 120MG TAB | 5 | NDS PA_NSO QL=30 EA/28 Days |
| ORSERDU 345MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ORSERDU 86MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| SOLTAMOX 10MG/5ML ORAL SOLN | 4 | PA_NSO QL=600 ML/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *tamoxifen 10mg tab* | 1 | |
| *tamoxifen 20mg tab* | 1 | |
| *toremifene 60mg tab* | 2 | QL=30 EA/30 Days |
| TRELSTAR MIXJECT 11.25MG INJ | 4 | QL=1 EA/84 Days |
| TRELSTAR MIXJECT 22.5MG INJ | 4 | QL=1 EA/168 Days |
| TRELSTAR MIXJECT 3.75MG INJ | 4 | QL=1 EA/28 Days |
| XTANDI 40MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| XTANDI 40MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| XTANDI 80MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| **ANTINEOPLASTIC - IMMUNOMODULATORS** | | |
| *lenalidomide 10mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *lenalidomide 15mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *lenalidomide 2.5mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *lenalidomide 20mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *lenalidomide 25mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *lenalidomide 5mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *pomalidomide 1mg cap* | 5 | NDS PA_NSO QL=21 EA/28 Days |
| *pomalidomide 2mg cap* | 5 | NDS PA_NSO QL=21 EA/28 Days |
| *pomalidomide 3mg cap* | 5 | NDS PA_NSO QL=21 EA/28 Days |
| *pomalidomide 4mg cap* | 5 | NDS PA_NSO QL=21 EA/28 Days |
| POMALYST 1MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| POMALYST 2MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| POMALYST 3MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| POMALYST 4MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| THALOMID 100MG CAP | 5 | NDS QL=120 EA/30 Days |
| THALOMID 50MG CAP | 5 | NDS QL=240 EA/30 Days |
| ZENBEXUS 0.75MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| ZENBEXUS 1MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| **ANTINEOPLASTIC COMBINATIONS** | | |
| AVMAPKI/FAKZYNJA CO-PACK (66) | 5 | NDS PA_NSO QL=66 EA/28 Days |
| INQOVI 35-100MG TAB PACK (5) | 5 | NDS PA_NSO QL=5 EA/28 Days |
| LONSURF 6.14-15MG TAB | 5 | NDS PA_NSO QL=100 EA/28 Days |
| LONSURF 8.19-20MG TAB | 5 | NDS PA_NSO QL=80 EA/28 Days |
| **ANTINEOPLASTIC ENZYME INHIBITORS** | | |
| ALECENSA 150MG CAP | 5 | NDS PA_NSO QL=240 EA/30 Days |
| ALUNBRIG 180MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ALUNBRIG 30MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| ALUNBRIG 90MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ALUNBRIG TAB INITIATION PACK (30) | 5 | NDS PA_NSO QL=30 EA/30 Days |
| AUGTYRO 160MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| AUGTYRO 40MG CAP | 5 | NDS PA_NSO QL=240 EA/30 Days |
| BALVERSA 3MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| BALVERSA 4MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| BALVERSA 5MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| BOSULIF 100MG CAP | 5 | NDS PA_NSO QL=180 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| BOSULIF 50MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *bosutinib 100mg tab* | 5 | NDS PA_NSO QL=90 EA/30 Days |
| *bosutinib 400mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *bosutinib 500mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| BRAFTOVI 75MG CAP | 5 | NDS PA_NSO QL=180 EA/30 Days |
| BRUKINSA 160MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| CABOMETYX 20MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| CABOMETYX 40MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| CABOMETYX 60MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| CALQUENCE 100MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| CAPRELSA 100MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| CAPRELSA 300MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| COMETRIQ CAP 100MG DAILY DOSE PACK (56) | 5 | NDS PA_NSO QL=56 EA/28 Days |
| COMETRIQ CAP 140MG DAILY DOSE PACK (112) | 5 | NDS PA_NSO QL=112 EA/28 Days |
| COMETRIQ CAP 60MG DAILY DOSE PACK (84) | 5 | NDS PA_NSO QL=84 EA/28 Days |
| COPIKTRA 15MG CAP | 5 | NDS PA_NSO QL=56 EA/28 Days |
| COPIKTRA 25MG CAP | 5 | NDS PA_NSO QL=56 EA/28 Days |
| COTELLIC 20MG TAB | 5 | NDS PA_NSO QL=63 EA/28 Days |
| *dasatinib 100mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *dasatinib 140mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *dasatinib 20mg tab* | 5 | NDS PA_NSO QL=90 EA/30 Days |
| *dasatinib 50mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *dasatinib 70mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *dasatinib 80mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ENSACOVE 100MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| ENSACOVE 25MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| *everolimus 10mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *everolimus 2.5mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *everolimus 2mg tab for oral susp* | 5 | NDS PA_NSO QL=150 EA/30 Days |
| *everolimus 3mg tab for oral susp* | 5 | NDS PA_NSO QL=90 EA/30 Days |
| *everolimus 5mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *everolimus 5mg tab for oral susp* | 5 | NDS PA_NSO QL=60 EA/30 Days |
| *everolimus 7.5mg tab* | 5 | NDS PA_NSO QL=30 EA/30 Days |
| FOTIVDA 0.89MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| FOTIVDA 1.34MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| GAVRETO 100MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| GOMEKLI 1MG CAP | 5 | NDS PA_NSO QL=42 EA/28 Days |
| GOMEKLI 1MG TAB FOR ORAL SUSP | 5 | NDS PA_NSO QL=168 EA/28 Days |
| GOMEKLI 2MG CAP | 5 | NDS PA_NSO QL=84 EA/28 Days |
| HYRNUO 10MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| IBRANCE 100MG TAB | 5 | NDS PA_NSO QL=21 EA/28 Days |
| IBRANCE 125MG CAP | 5 | NDS PA_NSO QL=21 EA/28 Days |
| IBRANCE 125MG TAB | 5 | NDS PA_NSO QL=21 EA/28 Days |
| IBRANCE 75MG TAB | 5 | NDS PA_NSO QL=21 EA/28 Days |
| IBTROZI 200MG CAP | 5 | NDS PA_NSO QL=90 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| ICLUSIG 10MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ICLUSIG 15MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ICLUSIG 30MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ICLUSIG 45MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| IDHIFA 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| IDHIFA 50MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *imatinib 100mg tab* | 2 | QL=90 EA/30 Days |
| *imatinib 400mg tab* | 2 | QL=60 EA/30 Days |
| IMBRUVICA 140MG CAP | 5 | NDS PA_NSO QL=90 EA/30 Days |
| IMBRUVICA 140MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| IMBRUVICA 280MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| IMBRUVICA 420MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| IMBRUVICA 70MG CAP | 5 | NDS PA_NSO QL=28 EA/28 Days |
| IMBRUVICA 70MG/ML ORAL SUSP | 5 | NDS PA_NSO QL=216 ML/27 Days |
| IMKELDI 80MG/ML ORAL SOLN | 5 | NDS PA_NSO QL=280 ML/28 Days |
| INREBIC 100MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| ITOVEBI 3MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| ITOVEBI 9MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| JAKAFI 10MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAKAFI 15MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAKAFI 20MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAKAFI 25MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAKAFI 5MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAYPIRCA 100MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| JAYPIRCA 50MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| JIDEYTRO 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| JIDEYTRO 25MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| KISQALI TAB 200MG DAILY DOSE PACK (21) | 5 | NDS PA_NSO QL=21 EA/28 Days |
| KISQALI TAB 400MG DAILY DOSE PACK (42) | 5 | NDS PA_NSO QL=42 EA/28 Days |
| KISQALI TAB 600MG DAILY DOSE PACK (63) | 5 | NDS PA_NSO QL=63 EA/28 Days |
| KOSELUGO 10MG CAP | 5 | NDS PA_NSO QL=240 EA/30 Days |
| KOSELUGO 25MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| KOSELUGO 5MG SPRINKLE CAP | 5 | NDS PA_NSO QL=600 EA/30 Days |
| KOSELUGO 7.5MG SPRINKLE CAP | 5 | NDS PA_NSO QL=360 EA/30 Days |
| KRAZATI 200MG TAB | 5 | NDS PA_NSO QL=180 EA/30 Days |
| *lapatinib ditosylate 250mg tab* | 5 | NDS PA_NSO QL=180 EA/30 Days |
| LORBRENA 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LORBRENA 25MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| LUMAKRAS 120MG TAB | 5 | NDS PA_NSO QL=240 EA/30 Days |
| LUMAKRAS 240MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| LUMAKRAS 320MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| LYNPARZA 100MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| LYNPARZA 150MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| LYTGOBI TAB 12MG DAILY DOSE PACK (21) | 5 | NDS PA_NSO QL=84 EA/28 Days |
| LYTGOBI TAB 16MG DAILY DOSE PACK (28) | 5 | NDS PA_NSO QL=112 EA/28 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| LYTGOBI TAB 20MG DAILY DOSE PACK (35) | 5 | NDS PA_NSO QL=140 EA/28 Days |
| MEKINIST 0.05MG/ML ORAL SOLN | 5 | NDS PA_NSO QL=1260 ML/30 Days |
| MEKINIST 0.5MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| MEKINIST 2MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| MEKTOVI 15MG TAB | 5 | NDS PA_NSO QL=180 EA/30 Days |
| NERLYNX 40MG TAB | 5 | NDS PA_NSO QL=180 EA/30 Days |
| *nilotinib 150mg cap* | 5 | NDS PA_NSO QL=112 EA/28 Days |
| *nilotinib 200mg cap* | 5 | NDS PA_NSO QL=112 EA/28 Days |
| *nilotinib 50mg cap* | 5 | NDS PA_NSO QL=120 EA/30 Days |
| NINLARO 2.3MG CAP | 5 | NDS PA_NSO QL=3 EA/28 Days |
| NINLARO 3MG CAP | 5 | NDS PA_NSO QL=3 EA/28 Days |
| NINLARO 4MG CAP | 5 | NDS PA_NSO QL=3 EA/28 Days |
| OGSIVEO 100MG TAB 7-DAY PACK (14) | 5 | NDS PA_NSO QL=56 EA/28 Days |
| OGSIVEO 150MG TAB 7-DAY PACK (14) | 5 | NDS PA_NSO QL=56 EA/28 Days |
| OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16) | 5 | NDS PA_NSO QL=16 EA/28 Days |
| OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20) | 5 | NDS PA_NSO QL=20 EA/28 Days |
| OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24) | 5 | NDS PA_NSO QL=24 EA/28 Days |
| OJEMDA 25MG/ML POWDER FOR ORAL SUSP | 5 | NDS PA_NSO QL=96 ML/28 Days |
| OJJAARA 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| OJJAARA 150MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| OJJAARA 200MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *pazopanib 200mg tab* | 5 | NDS PA_NSO QL=120 EA/30 Days |
| PEMAZYRE 13.5MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| PEMAZYRE 4.5MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| PEMAZYRE 9MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| PIQRAY TAB 200MG DAILY DOSE PACK (28) | 5 | NDS PA_NSO QL=28 EA/28 Days |
| PIQRAY TAB 250MG DAILY DOSE PACK (56) | 5 | NDS PA_NSO QL=56 EA/28 Days |
| PIQRAY TAB 300MG DAILY DOSE PACK (56) | 5 | NDS PA_NSO QL=56 EA/28 Days |
| QINLOCK 50MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| RETEVMO 120MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| RETEVMO 160MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| RETEVMO 40MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| RETEVMO 80MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| REZLIDHIA 150MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| ROMVIMZA 14MG CAP | 5 | NDS PA_NSO QL=8 EA/28 Days |
| ROMVIMZA 20MG CAP | 5 | NDS PA_NSO QL=8 EA/28 Days |
| ROMVIMZA 30MG CAP | 5 | NDS PA_NSO QL=8 EA/28 Days |
| ROZLYTREK 100MG CAP | 5 | NDS PA_NSO QL=150 EA/30 Days |
| ROZLYTREK 200MG CAP | 5 | NDS PA_NSO QL=90 EA/30 Days |
| ROZLYTREK 50MG ORAL PELLET | 5 | NDS PA_NSO QL=336 EA/28 Days |
| RUBRACA 200MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| RUBRACA 250MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| RUBRACA 300MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| RYDAPT 25MG CAP | 5 | NDS PA_NSO QL=224 EA/28 Days |
| SCEMBLIX 100MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| SCEMBLIX 20MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| SCEMBLIX 40MG TAB | 5 | NDS PA_NSO QL=240 EA/30 Days |
| *sorafenib 200mg tab* | 5 | NDS PA_NSO QL=120 EA/30 Days |
| STIVARGA 40MG TAB | 5 | NDS PA_NSO QL=84 EA/28 Days |
| *sunitinib malate 12.5mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *sunitinib malate 25mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *sunitinib malate 37.5mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| *sunitinib malate 50mg cap* | 5 | NDS PA_NSO QL=28 EA/28 Days |
| TABRECTA 150MG TAB | 5 | NDS PA_NSO QL=112 EA/28 Days |
| TABRECTA 200MG TAB | 5 | NDS PA_NSO QL=112 EA/28 Days |
| TAFINLAR 10MG TAB FOR ORAL SUSP | 5 | NDS PA_NSO QL=840 EA/28 Days |
| TAFINLAR 50MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| TAFINLAR 75MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| TALZENNA 0.1MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TALZENNA 0.25MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TALZENNA 0.35MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TALZENNA 0.5MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TALZENNA 0.75MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TALZENNA 1MG CAP | 5 | NDS PA_NSO QL=30 EA/30 Days |
| TEPMETKO 225MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| TIBSOVO 250MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| TRUQAP 160MG TAB | 5 | NDS PA_NSO QL=64 EA/28 Days |
| TRUQAP 200MG TAB | 5 | NDS PA_NSO QL=64 EA/28 Days |
| TURALIO 125MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| VANFLYTA 17.7MG TAB | 5 | NDS PA_NSO QL=28 EA/28 Days |
| VANFLYTA 26.5MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| VERZENIO 100MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| VERZENIO 150MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| VERZENIO 200MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| VERZENIO 50MG TAB | 5 | NDS PA_NSO QL=56 EA/28 Days |
| VITRAKVI 100MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| VITRAKVI 20MG/ML ORAL SOLN | 5 | NDS PA_NSO QL=300 ML/30 Days |
| VITRAKVI 25MG CAP | 5 | NDS PA_NSO QL=180 EA/30 Days |
| VONJO 100MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| VORANIGO 10MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| VORANIGO 40MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| XALKORI 150MG ORAL PELLET | 5 | NDS PA_NSO QL=180 EA/30 Days |
| XALKORI 200MG CAP | 5 | NDS PA_NSO QL=60 EA/30 Days |
| XALKORI 20MG ORAL PELLET | 5 | NDS PA_NSO QL=120 EA/30 Days |
| XALKORI 250MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| XALKORI 50MG ORAL PELLET | 5 | NDS PA_NSO QL=120 EA/30 Days |
| XOSPATA 40MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *yulithira 10mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *yulithira 2.5mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *yulithira 5mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| *yulithira 7.5mg tab* | 2 | PA_NSO QL=30 EA/30 Days |
| ZEJULA 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ZEJULA 200MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ZEJULA 300MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| ZELBORAF 240MG TAB | 5 | NDS PA_NSO QL=240 EA/30 Days |
| ZOLINZA 100MG CAP | 5 | NDS PA_NSO QL=120 EA/30 Days |
| ZYKADIA 150MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| **ANTINEOPLASTICS MISC.** | | |
| ACTIMMUNE 2000000UNIT/0.5ML INJ | 5 | NDS PA_NSO |
| AYVAKIT 100MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| AYVAKIT 200MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| AYVAKIT 25MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| AYVAKIT 300MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| AYVAKIT 50MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| BESREMI 500MCG/0.5ML PEN INJ | 5 | NDS PA_NSO QL=1 ML/28 Days |
| BESREMI 500MCG/ML SYRINGE | 5 | NDS PA_NSO QL=2 ML/28 Days |
| *bexarotene 75mg cap* | 5 | NDS PA_NSO QL=300 EA/30 Days |
| HERNEXEOS 60MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| *hydroxyurea 500mg cap* | 1 | |
| KOMZIFTI 200MG CAP | 5 | NDS PA_NSO QL=90 EA/30 Days |
| MATULANE 50MG CAP | 5 | NDS |
| MODEYSO 125MG CAP | 5 | NDS PA_NSO QL=20 EA/28 Days |
| REVUFORJ 110MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| REVUFORJ 160MG TAB | 5 | NDS PA_NSO QL=60 EA/30 Days |
| REVUFORJ 25MG TAB | 5 | NDS PA_NSO QL=240 EA/30 Days |
| *tretinoin 10mg cap* | 5 | NDS |
| TUKYSA 150MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| TUKYSA 50MG TAB | 5 | NDS PA_NSO QL=120 EA/30 Days |
| VENCLEXTA 100MG TAB | 5 | NDS PA_NSO QL=180 EA/30 Days |
| VENCLEXTA 10MG TAB | 3 | PA_NSO QL=60 EA/30 Days |
| VENCLEXTA 50MG TAB | 3 | PA_NSO QL=30 EA/30 Days |
| VENCLEXTA TAB STARTER PACK (42) | 5 | NDS PA_NSO QL=42 EA/28 Days |
| WELIREG 40MG TAB | 5 | NDS PA_NSO QL=90 EA/30 Days |
| XPOVIO TAB 100MG ONCE WEEKLY CARTON (8) | 5 | NDS PA_NSO QL=8 EA/28 Days |
| XPOVIO TAB 40MG ONCE WEEKLY CARTON (16) | 5 | NDS PA_NSO QL=16 EA/28 Days |
| XPOVIO TAB 40MG TWICE WEEKLY CARTON (8) | 5 | NDS PA_NSO QL=8 EA/28 Days |
| XPOVIO TAB 60MG ONCE WEEKLY CARTON (4) | 5 | NDS PA_NSO QL=4 EA/28 Days |
| XPOVIO TAB 60MG TWICE WEEKLY CARTON (24) | 5 | NDS PA_NSO QL=24 EA/28 Days |
| XPOVIO TAB 80MG ONCE WEEKLY CARTON (4) | 5 | NDS PA_NSO QL=4 EA/28 Days |
| XPOVIO TAB 80MG ONCE WEEKLY CARTON (8) | 5 | NDS PA_NSO QL=8 EA/28 Days |
| XPOVIO TAB 80MG TWICE WEEKLY CARTON (32) | 5 | NDS PA_NSO QL=32 EA/28 Days |
| **CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS** | | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| IWILFIN 192MG TAB | 5 | NDS PA_NSO QL=240 EA/30 Days |
| *leucovorin 10mg tab* | 2 | |
| *leucovorin 15mg tab* | 2 | |
| *leucovorin 25mg tab* | 2 | |
| *leucovorin 5mg tab* | 2 | |
| *mesna 400mg tab* | 2 | |
| **ANTIPARASITICS** | | |
| **ANTHELMINTICS** | | |
| *albendazole 200mg tab* | 2 | QL=672 EA/365 Days |
| *ivermectin 3mg tab* | 2 | PA QL=30 EA/90 Days |
| *praziquantel 600mg tab* | 2 | |
| **ANTIPROTOZOALS** | | |
| *atovaquone 750mg/5ml oral susp* | 2 | QL=300 ML/30 Days |
| *atovaquone/proguanil 250-100mg tab* | 2 | |
| *atovaquone/proguanil 62.5-25mg tab* | 2 | |
| CHLOROQUINE PHOSPHATE 250MG TAB | 2 | |
| *chloroquine phosphate 500mg tab* | 2 | |
| COARTEM 20-120MG TAB | 3 | QL=24 EA/3 Days |
| *hydroxychloroquine sulfate 200mg tab* | 2 | QL=90 EA/30 Days |
| *mefloquine 250mg tab* | 2 | |
| *nitazoxanide 500mg tab* | 5 | NDS PA QL=6 EA/3 Days |
| *pentamidine isethionate 300mg inj* | 2 | |
| *pentamidine isethionate 300mg/6ml inh soln* | 2 | PA_BvD QL=1 EA/28 Days |
| PRIMAQUINE PHOSPHATE 26.3MG TAB | 4 | |
| *pyrimethamine 25mg tab* | 5 | NDS PA QL=90 EA/30 Days |
| *quinine sulfate 324mg cap* | 2 | PA QL=42 EA/7 Days |
| **ANTIPARKINSON AND RELATED THERAPY AGENTS** | | |
| **ANTIPARKINSON ADJUNCTIVE THERAPY** | | |
| *carbidopa 25mg tab* | 2 | |
| *entacapone 200mg tab* | 2 | QL=300 EA/30 Days |
| **ANTIPARKINSON ANTICHOLINERGICS** | | |
| *benztropine mesylate 0.5mg tab* | 1 | |
| *benztropine mesylate 1mg tab* | 1 | |
| *benztropine mesylate 2mg tab* | 1 | |
| *trihexyphenidyl 2mg tab* | 1 | |
| *trihexyphenidyl 5mg tab* | 1 | |
| **ANTIPARKINSON DOPAMINERGICS** | | |
| *amantadine 100mg cap* | 1 | |
| *amantadine 10mg/ml oral soln* | 2 | |
| *bromocriptine 2.5mg tab* | 2 | |
| *bromocriptine 5mg cap* | 2 | |
| *carbidopa/entacapone/levodopa 12.5-200-50mg tab* | 2 | |
| *carbidopa/entacapone/levodopa 18.75-200-75mg tab* | 2 | |
| *carbidopa/entacapone/levodopa 25-200-100mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *carbidopa/entacapone/levodopa 31.25-200-125mg tab* | 2 | |
| *carbidopa/entacapone/levodopa 37.5-200-150mg tab* | 2 | |
| *carbidopa/entacapone/levodopa 50-200-200mg tab* | 2 | |
| *carbidopa/levodopa 10-100mg odt* | 2 | |
| *carbidopa/levodopa 10-100mg tab* | 1 | |
| *carbidopa/levodopa 25-100mg er tab* | 2 | |
| *carbidopa/levodopa 25-100mg odt* | 2 | |
| *carbidopa/levodopa 25-100mg tab* | 1 | |
| *carbidopa/levodopa 25-250mg odt* | 2 | |
| *carbidopa/levodopa 25-250mg tab* | 1 | |
| *carbidopa/levodopa 50-200mg er tab* | 2 | |
| *pramipexole 0.125mg tab* | 1 | |
| *pramipexole 0.25mg tab* | 1 | |
| *pramipexole 0.5mg tab* | 1 | |
| *pramipexole 0.75mg tab* | 1 | |
| *pramipexole 1.5mg tab* | 1 | |
| *pramipexole 1mg tab* | 1 | |
| *ropinirole 0.25mg tab* | 1 | |
| *ropinirole 0.5mg tab* | 1 | |
| *ropinirole 1mg tab* | 1 | |
| *ropinirole 2mg tab* | 1 | |
| *ropinirole 3mg tab* | 1 | |
| *ropinirole 4mg tab* | 1 | |
| *ropinirole 5mg tab* | 1 | |
| **ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS** | | |
| *rasagiline 0.5mg tab* | 2 | QL=30 EA/30 Days |
| *rasagiline 1mg tab* | 2 | QL=30 EA/30 Days |
| *selegiline 5mg cap* | 2 | |
| *selegiline 5mg tab* | 2 | |
| **ANTIPSYCHOTICS/ANTIMANIC AGENTS** | | |
| **ANTIMANIC AGENTS** | | |
| *divalproex sodium 250mg er tab* | 1 | |
| *divalproex sodium 500mg er tab* | 1 | |
| *lithium carbonate 150mg cap* | 1 | |
| *lithium carbonate 300mg cap* | 1 | |
| *lithium carbonate 300mg er tab* | 1 | |
| *lithium carbonate 300mg tab* | 1 | |
| *lithium carbonate 450mg er tab* | 1 | |
| LITHIUM CARBONATE 600MG CAP | 1 | |
| *lithium citrate 60mg/ml oral soln* | 2 | |
| **ANTIPSYCHOTICS - MISC.** | | |
| CAPLYTA 10.5MG CAP | 4 | PA_NSO QL=30 EA/30 Days |
| CAPLYTA 21MG CAP | 4 | PA_NSO QL=30 EA/30 Days |
| CAPLYTA 42MG CAP | 4 | PA_NSO QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| COBENFY 100-20MG CAP | 4 | PA_NSO QL=60 EA/30 Days |
| COBENFY 125-30MG CAP | 4 | PA_NSO QL=60 EA/30 Days |
| COBENFY 50-20MG CAP | 4 | PA_NSO QL=60 EA/30 Days |
| COBENFY CAP 28-DAY STARTER PACK (56) | 4 | PA_NSO QL=56 EA/28 Days |
| *haloperidol 0.5mg tab* | 1 | |
| *haloperidol 10mg tab* | 1 | |
| *haloperidol 1mg tab* | 1 | |
| *haloperidol 20mg tab* | 1 | |
| *haloperidol 2mg tab* | 1 | |
| *haloperidol 2mg/ml oral soln* | 2 | |
| *haloperidol 5mg tab* | 1 | |
| *haloperidol 5mg/ml inj* | 2 | |
| *haloperidol decanoate 100mg/ml (1ml) inj* | 2 | |
| *haloperidol decanoate 100mg/ml (5ml) inj* | 2 | |
| *haloperidol decanoate 50mg/ml (1ml) inj* | 2 | |
| *haloperidol decanoate 50mg/ml (5ml) inj* | 2 | |
| *lurasidone 120mg tab* | 2 | QL=30 EA/30 Days |
| *lurasidone 20mg tab* | 2 | QL=30 EA/30 Days |
| *lurasidone 40mg tab* | 2 | QL=30 EA/30 Days |
| *lurasidone 60mg tab* | 2 | QL=30 EA/30 Days |
| *lurasidone 80mg tab* | 2 | QL=60 EA/30 Days |
| MOLINDONE 10MG TAB | 2 | |
| MOLINDONE 25MG TAB | 2 | |
| MOLINDONE 5MG TAB | 2 | |
| NUPLAZID 10MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| NUPLAZID 34MG CAP | 4 | PA_NSO QL=30 EA/30 Days |
| *thiothixene 10mg cap* | 2 | |
| *thiothixene 1mg cap* | 2 | |
| *thiothixene 2mg cap* | 2 | |
| *thiothixene 5mg cap* | 2 | |
| VRAYLAR 0.5MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| VRAYLAR 0.75MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| VRAYLAR 1.5MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| VRAYLAR 3MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| VRAYLAR 4.5MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| VRAYLAR 6MG CAP | 3 | PA_NSO QL=30 EA/30 Days |
| *ziprasidone 20mg cap* | 2 | |
| *ziprasidone 20mg inj* | 2 | QL=6 EA/3 Days |
| *ziprasidone 40mg cap* | 2 | |
| *ziprasidone 60mg cap* | 2 | |
| *ziprasidone 80mg cap* | 2 | |
| **BENZISOXAZOLES** | | |
| FANAPT 10MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT 12MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT 1MG TAB | 4 | PA_NSO QL=60 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| FANAPT 2MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT 4MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT 6MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT 8MG TAB | 4 | PA_NSO QL=60 EA/30 Days |
| FANAPT TAB TITRATION PACK (8) | 4 | PA_NSO QL=8 EA/180 Days |
| FANAPT TAB TITRATION PACK B (12) | 4 | PA_NSO QL=12 EA/180 Days |
| FANAPT TAB TITRATION PACK C (8) | 4 | PA_NSO QL=8 EA/180 Days |
| INVEGA SUSTENNA 117MG/0.75ML SYRINGE | 5 | NDS PA_NSO QL=.75 ML/28 Days |
| INVEGA SUSTENNA 156MG/ML SYRINGE | 5 | NDS PA_NSO QL=1 ML/28 Days |
| INVEGA SUSTENNA 234MG/1.5ML SYRINGE | 5 | NDS PA_NSO QL=1.50 ML/28 Days |
| INVEGA SUSTENNA 39MG/0.25ML SYRINGE | 4 | PA_NSO QL=.25 ML/28 Days |
| INVEGA SUSTENNA 78MG/0.5ML SYRINGE | 5 | NDS PA_NSO QL=.50 ML/28 Days |
| *paliperidone 1.5mg er tab* | 2 | QL=30 EA/30 Days |
| *paliperidone 3mg er tab* | 2 | QL=30 EA/30 Days |
| *paliperidone 6mg er tab* | 2 | QL=60 EA/30 Days |
| *paliperidone 9mg er tab* | 2 | QL=30 EA/30 Days |
| RISPERIDONE 0.25MG ODT | 2 | QL=60 EA/30 Days |
| *risperidone 0.25mg tab* | 1 | |
| *risperidone 0.5mg odt* | 2 | QL=60 EA/30 Days |
| *risperidone 0.5mg tab* | 1 | |
| *risperidone 1mg odt* | 2 | QL=60 EA/30 Days |
| *risperidone 1mg tab* | 1 | |
| *risperidone 1mg/ml oral soln* | 2 | QL=240 ML/30 Days |
| *risperidone 2mg odt* | 2 | QL=60 EA/30 Days |
| *risperidone 2mg tab* | 1 | |
| *risperidone 3mg odt* | 2 | QL=60 EA/30 Days |
| *risperidone 3mg tab* | 1 | |
| *risperidone 4mg odt* | 2 | QL=60 EA/30 Days |
| *risperidone 4mg tab* | 1 | |
| *risperidone microspheres 12.5mg inj* | 2 | PA_NSO QL=2 EA/28 Days |
| *risperidone microspheres 25mg inj* | 2 | PA_NSO QL=2 EA/28 Days |
| *risperidone microspheres 37.5mg inj* | 5 | NDS PA_NSO QL=2 EA/28 Days |
| *risperidone microspheres 50mg inj* | 5 | NDS PA_NSO QL=2 EA/28 Days |
| **DIBENZAPINES** | | |
| *asenapine 10mg sl tab* | 2 | QL=60 EA/30 Days |
| *asenapine 2.5mg sl tab* | 2 | QL=60 EA/30 Days |
| *asenapine 5mg sl tab* | 2 | QL=60 EA/30 Days |
| *clozapine 100mg odt* | 2 | QL=270 EA/30 Days |
| *clozapine 100mg tab* | 2 | |
| *clozapine 12.5mg odt* | 2 | QL=90 EA/30 Days |
| *clozapine 150mg odt* | 2 | QL=180 EA/30 Days |
| *clozapine 200mg odt* | 2 | QL=120 EA/30 Days |
| *clozapine 200mg tab* | 2 | |
| *clozapine 25mg odt* | 2 | QL=270 EA/30 Days |
| *clozapine 25mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *clozapine 50mg tab* | 2 | |
| *loxapine 10mg cap* | 2 | |
| *loxapine 25mg cap* | 2 | |
| *loxapine 50mg cap* | 2 | |
| *loxapine 5mg cap* | 2 | |
| *olanzapine 10mg inj* | 2 | QL=3 EA/1 Days |
| *olanzapine 10mg odt* | 2 | QL=60 EA/30 Days |
| *olanzapine 10mg tab* | 2 | |
| *olanzapine 15mg odt* | 2 | QL=30 EA/30 Days |
| *olanzapine 15mg tab* | 2 | |
| *olanzapine 2.5mg tab* | 2 | |
| *olanzapine 20mg odt* | 2 | QL=30 EA/30 Days |
| *olanzapine 20mg tab* | 2 | |
| *olanzapine 5mg odt* | 2 | QL=30 EA/30 Days |
| *olanzapine 5mg tab* | 2 | |
| *olanzapine 7.5mg tab* | 2 | |
| *quetiapine 100mg tab* | 1 | |
| *quetiapine 150mg er tab* | 2 | QL=30 EA/30 Days |
| *quetiapine 200mg er tab* | 2 | QL=30 EA/30 Days |
| *quetiapine 200mg tab* | 1 | |
| *quetiapine 25mg tab* | 1 | |
| *quetiapine 300mg er tab* | 2 | QL=60 EA/30 Days |
| *quetiapine 300mg tab* | 1 | |
| *quetiapine 400mg er tab* | 2 | QL=60 EA/30 Days |
| *quetiapine 400mg tab* | 1 | |
| *quetiapine 50mg er tab* | 2 | QL=60 EA/30 Days |
| *quetiapine 50mg tab* | 1 | |
| SECUADO 3.8MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| SECUADO 5.7MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| SECUADO 7.6MG/24HR PATCH | 4 | PA_NSO QL=30 EA/30 Days |
| VERSACLOZ 50MG/ML ORAL SUSP | 4 | PA_NSO QL=600 ML/30 Days |
| **PHENOTHIAZINES** | | |
| *chlorpromazine 100mg tab* | 2 | |
| *chlorpromazine 100mg/ml oral soln* | 2 | |
| *chlorpromazine 10mg tab* | 2 | |
| *chlorpromazine 200mg tab* | 2 | |
| *chlorpromazine 25mg tab* | 2 | |
| *chlorpromazine 30mg/ml oral soln* | 2 | |
| *chlorpromazine 50mg tab* | 2 | |
| *compro 25mg rectal supp* | 2 | |
| FLUPHENAZINE 0.5MG/ML ORAL SOLN | 2 | |
| *fluphenazine 10mg tab* | 2 | |
| *fluphenazine 1mg tab* | 2 | |
| *fluphenazine 2.5mg tab* | 2 | |
| FLUPHENAZINE 2.5MG/ML INJ | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *fluphenazine 5mg tab* | 2 | |
| FLUPHENAZINE 5MG/ML ORAL SOLN | 2 | |
| *fluphenazine decanoate 25mg/ml inj* | 2 | |
| *perphenazine 16mg tab* | 2 | |
| *perphenazine 2mg tab* | 2 | |
| *perphenazine 4mg tab* | 2 | |
| *perphenazine 8mg tab* | 2 | |
| *prochlorperazine 10mg tab* | 1 | |
| *prochlorperazine 25mg rectal supp* | 2 | |
| *prochlorperazine 5mg tab* | 1 | |
| *thioridazine 100mg tab* | 2 | |
| *thioridazine 10mg tab* | 2 | |
| *thioridazine 25mg tab* | 2 | |
| *thioridazine 50mg tab* | 2 | |
| *trifluoperazine 10mg tab* | 2 | |
| *trifluoperazine 1mg tab* | 2 | |
| *trifluoperazine 2mg tab* | 2 | |
| *trifluoperazine 5mg tab* | 2 | |
| **QUINOLINONE DERIVATIVES** | | |
| ABILIFY MAINTENA 300MG INJ | 5 | NDS QL=1 EA/28 Days |
| ABILIFY MAINTENA 300MG/1.5ML SYRINGE | 5 | NDS QL=1 EA/28 Days |
| ABILIFY MAINTENA 400MG INJ | 5 | NDS QL=1 EA/28 Days |
| ABILIFY MAINTENA 400MG/2ML SYRINGE | 5 | NDS QL=1 EA/28 Days |
| *aripiprazole 10mg odt* | 2 | PA_NSO QL=60 EA/30 Days |
| *aripiprazole 10mg tab* | 2 | |
| *aripiprazole 15mg odt* | 2 | PA_NSO QL=60 EA/30 Days |
| *aripiprazole 15mg tab* | 2 | |
| *aripiprazole 1mg/ml oral soln* | 2 | QL=900 ML/30 Days |
| *aripiprazole 20mg tab* | 2 | |
| *aripiprazole 2mg tab* | 2 | |
| *aripiprazole 30mg tab* | 2 | |
| *aripiprazole 5mg tab* | 2 | |
| ARISTADA 1064MG/3.9ML SYRINGE | 5 | PA_NSO QL=3.90 ML/56 Days |
| ARISTADA 441MG/1.6ML SYRINGE | 5 | NDS PA_NSO QL=1.60 ML/28 Days |
| ARISTADA 662MG/2.4ML SYRINGE | 5 | NDS PA_NSO QL=2.40 ML/28 Days |
| ARISTADA 882MG/3.2ML SYRINGE | 5 | PA_NSO QL=3.20 ML/28 Days |
| ARISTADA INITIO 675MG/2.4ML SYRINGE | 5 | PA_NSO QL=2.40 ML/42 Days |
| OPIPZA 10MG ORAL FILM | 4 | PA_NSO QL=90 EA/30 Days |
| OPIPZA 2MG ORAL FILM | 4 | PA_NSO QL=30 EA/30 Days |
| OPIPZA 5MG ORAL FILM | 4 | PA_NSO QL=30 EA/30 Days |
| REXULTI 0.25MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| REXULTI 0.5MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| REXULTI 1MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| REXULTI 2MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| REXULTI 3MG TAB | 4 | PA_NSO QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| REXULTI 4MG TAB | 4 | PA_NSO QL=30 EA/30 Days |
| **ANTISPASTICITY AGENTS** | | |
| **ANTISPASTICITY AGENTS** | | |
| *baclofen 10mg tab* | 1 | |
| *baclofen 20mg tab* | 1 | |
| *baclofen 5mg tab* | 1 | |
| *carisoprodol 350mg tab* | 1 | PA |
| *chlorzoxazone 500mg tab* | 2 | PA QL=180 EA/30 Days |
| *cyclobenzaprine 10mg tab* | 1 | PA |
| *cyclobenzaprine 5mg tab* | 1 | PA |
| *dantrolene sodium 100mg cap* | 2 | |
| *dantrolene sodium 25mg cap* | 2 | |
| *dantrolene sodium 50mg cap* | 2 | |
| *metaxalone 800mg tab* | 2 | PA |
| *methocarbamol 500mg tab* | 1 | PA |
| *methocarbamol 750mg tab* | 1 | PA |
| *orphenadrine citrate 100mg er tab* | 2 | PA |
| *pyridostigmine bromide 60mg tab* | 2 | |
| *tizanidine 2mg tab* | 1 | |
| *tizanidine 4mg tab* | 1 | |
| **ANTIVIRALS** | | |
| **ANTIRETROVIRALS** | | |
| *abacavir 20mg/ml oral soln* | 2 | QL=960 ML/30 Days |
| *abacavir 300mg tab* | 2 | QL=60 EA/30 Days |
| *abacavir/lamivudine 600-300mg tab* | 2 | QL=30 EA/30 Days |
| APTIVUS 250MG CAP | 5 | QL=120 EA/30 Days |
| *atazanavir 150mg cap* | 2 | QL=30 EA/30 Days |
| *atazanavir 200mg cap* | 2 | QL=60 EA/30 Days |
| *atazanavir 300mg cap* | 2 | QL=30 EA/30 Days |
| BIKTARVY 30-120-15MG TAB | 5 | QL=30 EA/30 Days |
| BIKTARVY 50-200-25MG TAB | 5 | QL=30 EA/30 Days |
| CIMDUO 300-300MG TAB | 5 | QL=30 EA/30 Days |
| *darunavir 600mg tab* | 2 | QL=60 EA/30 Days |
| *darunavir 800mg tab* | 2 | QL=30 EA/30 Days |
| DELSTRIGO 100-300-300MG TAB | 5 | QL=30 EA/30 Days |
| DESCOVY 120-15MG TAB | 5 | QL=30 EA/30 Days |
| DESCOVY 200-25MG TAB | 5 | QL=30 EA/30 Days |
| DOVATO 50-300MG TAB | 5 | QL=30 EA/30 Days |
| EDURANT 2.5MG TAB FOR ORAL SUSP | 5 | QL=180 EA/30 Days |
| *efavirenz 600mg tab* | 2 | QL=30 EA/30 Days |
| *efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab* | 2 | QL=30 EA/30 Days |
| EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB | 5 | QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab* | 5 | QL=30 EA/30 Days |
| *emtricitabine 200mg cap* | 2 | QL=30 EA/30 Days |
| *emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab* | 5 | QL=30 EA/30 Days |
| *emtricitabine/tenofovir disoproxil fumarate 100-150mg tab* | 2 | QL=30 EA/30 Days |
| *emtricitabine/tenofovir disoproxil fumarate 133-200mg tab* | 2 | QL=30 EA/30 Days |
| *emtricitabine/tenofovir disoproxil fumarate 167-250mg tab* | 2 | QL=30 EA/30 Days |
| *emtricitabine/tenofovir disoproxil fumarate 200-300mg tab* | 2 | QL=30 EA/30 Days |
| EMTRIVA 10MG/ML ORAL SOLN | 3 | QL=850 ML/30 Days |
| *etravirine 100mg tab* | 5 | QL=60 EA/30 Days |
| *etravirine 200mg tab* | 5 | QL=60 EA/30 Days |
| EVOTAZ 300-150MG TAB | 5 | QL=30 EA/30 Days |
| *fosamprenavir 700mg tab* | 5 | QL=120 EA/30 Days |
| GENVOYA 150-150-200-10MG TAB | 5 | QL=30 EA/30 Days |
| IDVYNSO 100-0.25MG TAB | 5 | QL=30 EA/30 Days |
| INTELENCE 25MG TAB | 3 | QL=120 EA/30 Days |
| ISENTRESS 100MG CHEW TAB | 5 | QL=180 EA/30 Days |
| ISENTRESS 100MG GRANULES FOR ORAL SUSP | 5 | QL=60 EA/30 Days |
| ISENTRESS 25MG CHEW TAB | 3 | QL=180 EA/30 Days |
| ISENTRESS 400MG TAB | 5 | QL=60 EA/30 Days |
| ISENTRESS HD 600MG TAB | 5 | QL=60 EA/30 Days |
| JULUCA 50-25MG TAB | 5 | QL=30 EA/30 Days |
| *lamivudine 10mg/ml oral soln* | 2 | QL=960 ML/30 Days |
| *lamivudine 150mg tab* | 2 | QL=60 EA/30 Days |
| *lamivudine 300mg tab* | 2 | QL=30 EA/30 Days |
| *lamivudine/zidovudine 150-300mg tab* | 2 | QL=60 EA/30 Days |
| *lopinavir/ritonavir 100-25mg tab* | 2 | QL=300 EA/30 Days |
| *lopinavir/ritonavir 200-50mg tab* | 2 | QL=120 EA/30 Days |
| *maraviroc 150mg tab* | 5 | QL=60 EA/30 Days |
| *maraviroc 300mg tab* | 5 | QL=120 EA/30 Days |
| NEVIRAPINE 10MG/ML ORAL SUSP | 2 | QL=1200 ML/30 Days |
| *nevirapine 200mg tab* | 2 | QL=60 EA/30 Days |
| *nevirapine 400mg er tab* | 2 | QL=30 EA/30 Days |
| ODEFSEY 200-25-25MG TAB | 5 | QL=30 EA/30 Days |
| PIFELTRO 100MG TAB | 5 | QL=30 EA/30 Days |
| PREZCOBIX 150-675MG TAB | 5 | QL=30 EA/30 Days |
| PREZCOBIX 150-800MG TAB | 5 | QL=30 EA/30 Days |
| PREZISTA 100MG/ML ORAL SUSP | 5 | QL=400 ML/30 Days |
| PREZISTA 150MG TAB | 5 | QL=240 EA/30 Days |
| PREZISTA 75MG TAB | 3 | QL=480 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| REYATAZ 50MG ORAL POWDER | 5 | QL=240 EA/30 Days |
| *rilpivirine 25mg tab* | 5 | QL=30 EA/30 Days |
| *ritonavir 100mg tab* | 2 | QL=360 EA/30 Days |
| RUKOBIA 600MG ER TAB | 5 | QL=60 EA/30 Days |
| STRIBILD 150-150-200-300MG TAB | 5 | QL=30 EA/30 Days |
| SUNLENCA 300MG TAB | 5 | QL=4 EA/28 Days |
| SUNLENCA 300MG TAB THERAPY PACK (4) | 5 | QL=4 EA/28 Days |
| SUNLENCA 300MG TAB THERAPY PACK (5) | 5 | QL=5 EA/28 Days |
| SYMTUZA 150-800-200-10MG TAB | 5 | QL=30 EA/30 Days |
| *tenofovir disoproxil fumarate 300mg tab* | 2 | QL=30 EA/30 Days |
| TIVICAY 50MG TAB | 5 | QL=60 EA/30 Days |
| TIVICAY 5MG TAB FOR ORAL SUSP | 3 | QL=180 EA/30 Days |
| TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP | 3 | QL=180 EA/30 Days |
| TRIUMEQ 600-50-300MG TAB | 5 | QL=30 EA/30 Days |
| VIRACEPT 250MG TAB | 5 | QL=300 EA/30 Days |
| VIRACEPT 625MG TAB | 5 | QL=120 EA/30 Days |
| VIREAD 150MG TAB | 5 | QL=30 EA/30 Days |
| VIREAD 200MG TAB | 5 | QL=30 EA/30 Days |
| VIREAD 250MG TAB | 5 | QL=30 EA/30 Days |
| VIREAD 40MG/GM ORAL POWDER | 5 | QL=240 GM/30 Days |
| *zidovudine 100mg cap* | 2 | QL=180 EA/30 Days |
| *zidovudine 10mg/ml oral soln* | 2 | QL=1920 ML/30 Days |
| *zidovudine 300mg tab* | 2 | QL=60 EA/30 Days |
| **HEPATITIS AGENTS** | | |
| *adefovir dipivoxil 10mg tab* | 2 | QL=30 EA/30 Days |
| *entecavir 0.5mg tab* | 2 | QL=30 EA/30 Days |
| *entecavir 1mg tab* | 2 | QL=30 EA/30 Days |
| *lamivudine 100mg tab* | 2 | QL=90 EA/30 Days |
| MAVYRET 100-40MG TAB | 5 | NDS PA QL=84 EA/28 Days |
| MAVYRET 50-20MG ORAL PELLET | 5 | NDS PA QL=140 EA/28 Days |
| PEGASYS 180MCG/0.5ML SYRINGE | 5 | NDS QL=2 ML/28 Days |
| PEGASYS 180MCG/ML INJ | 5 | NDS QL=4 ML/28 Days |
| RIBAVIRIN 200MG CAP | 2 | QL=210 EA/30 Days |
| RIBAVIRIN 200MG TAB | 2 | QL=210 EA/30 Days |
| SOFOSBUVIR/VELPATASVIR 400-100MG TAB | 5 | NDS PA QL=28 EA/28 Days |
| VOSEVI 400-100-100MG TAB | 5 | NDS PA QL=28 EA/28 Days |
| **HERPES AGENTS** | | |
| *acyclovir 200mg cap* | 1 | |
| *acyclovir 400mg tab* | 1 | |
| *acyclovir 40mg/ml oral susp* | 2 | |
| *acyclovir 50mg/ml inj* | 2 | PA_BvD |
| *acyclovir 800mg tab* | 1 | |
| *famciclovir 125mg tab* | 2 | QL=60 EA/30 Days |
| *famciclovir 250mg tab* | 2 | QL=60 EA/30 Days |
| *famciclovir 500mg tab* | 2 | QL=90 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *valacyclovir 1000mg tab* | 1 | QL=120 EA/30 Days |
| *valacyclovir 500mg tab* | 1 | QL=60 EA/30 Days |
| **INFLUENZA AGENTS** | | |
| *oseltamivir 30mg cap* | 1 | QL=84 EA/180 Days |
| *oseltamivir 45mg cap* | 1 | QL=42 EA/180 Days |
| *oseltamivir 6mg/ml oral susp* | 2 | QL=540 ML/180 Days |
| *oseltamivir 75mg cap* | 1 | QL=42 EA/180 Days |
| RELENZA DISKHALER 5MG/BLISTER POWDER INHALER | 3 | QL=120 EA/365 Days |
| RIMANTADINE 100MG TAB | 2 | |
| XOFLUZA 40MG TAB | 4 | QL=2 EA/30 Days |
| XOFLUZA 80MG TAB | 4 | QL=1 EA/30 Days |
| **MISC. ANTIVIRALS** | | |
| LIVTENCITY 200MG TAB | 5 | NDS PA QL=120 EA/30 Days |
| PAXLOVID 150MG/100MG TAB PACK (20) | 2 | QL=20 EA/5 Days |
| PAXLOVID 150MG/100MG TAB PACK (30) | 2 | QL=30 EA/5 Days |
| PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11) | 2 | QL=11 EA/5 Days |
| PREVYMIS 120MG ORAL PELLET | 5 | NDS PA QL=120 EA/30 Days |
| PREVYMIS 240MG TAB | 5 | NDS PA QL=28 EA/28 Days |
| PREVYMIS 480MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| *valganciclovir 450mg tab* | 2 | QL=120 EA/30 Days |
| *valganciclovir 50mg/ml oral soln* | 5 | NDS QL=1056 ML/30 Days |
| **BIOLOGICALS MISC** | | |
| **BIOLOGICALS MISC** | | |
| ARCALYST 220MG INJ | 5 | NDS PA |
| AVTOZMA 162MG/0.9ML AUTO-INJECTOR | 5 | NDS PA QL=3.60 ML/28 Days |
| AVTOZMA 162MG/0.9ML SYRINGE | 5 | NDS PA QL=3.60 ML/28 Days |
| BENLYSTA 200MG/ML AUTO-INJECTOR | 5 | NDS PA QL=4 ML/28 Days |
| BENLYSTA 200MG/ML SYRINGE | 5 | NDS PA QL=4 ML/28 Days |
| CIMZIA 200MG INJ | 5 | NDS PA QL=2 EA/28 Days |
| CIMZIA 200MG/ML SYRINGE | 5 | NDS PA QL=4 EA/28 Days |
| CIMZIA 200MG/ML SYRINGE PACK (2) | 5 | NDS PA QL=2 EA/28 Days |
| CIMZIA 200MG/ML SYRINGE STARTER KIT (6) | 5 | NDS PA QL=3 EA/28 Days |
| COSENTYX 150MG/ML SYRINGE | 5 | NDS PA QL=8 ML/28 Days |
| COSENTYX 75MG/0.5ML SYRINGE | 5 | NDS PA QL=2 ML/28 Days |
| COSENTYX SENSOREADY 150MG/ML AUTO-INJECTOR | 5 | NDS PA QL=8 ML/28 Days |
| COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR | 5 | NDS PA QL=8 ML/28 Days |
| DUPIXENT 200MG/1.14ML AUTO-INJECTOR | 5 | NDS PA QL=4.56 ML/28 Days |
| DUPIXENT 200MG/1.14ML SYRINGE | 5 | NDS PA QL=4.56 ML/28 Days |
| DUPIXENT 300MG/2ML AUTO-INJECTOR | 5 | NDS PA QL=8 ML/28 Days |
| DUPIXENT 300MG/2ML SYRINGE | 5 | NDS PA QL=8 ML/28 Days |
| ENBREL 25MG/0.5ML INJ | 5 | NDS PA QL=8 ML/28 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| ENBREL 25MG/0.5ML SYRINGE | 5 | NDS PA QL=8 ML/28 Days |
| ENBREL 50MG/ML CARTRIDGE | 5 | NDS PA QL=8 ML/28 Days |
| ENBREL 50MG/ML SYRINGE | 5 | NDS PA QL=8 ML/28 Days |
| ENBREL SURECLICK 50MG/ML AUTO-INJECTOR | 5 | NDS PA QL=8 ML/28 Days |
| ENTYVIO 108MG/0.68ML AUTO-INJECTOR | 5 | NDS PA QL=1.36 ML/28 Days |
| FASENRA 10MG/0.5ML SYRINGE | 5 | PA QL=.50 ML/28 Days |
| FASENRA 30MG/ML AUTO-INJECTOR | 5 | PA QL=1 ML/28 Days |
| FASENRA 30MG/ML SYRINGE | 5 | PA QL=1 ML/28 Days |
| HADLIMA 40MG/0.4ML SYRINGE | 5 | NDS PA QL=2.40 ML/28 Days |
| HADLIMA 40MG/0.8ML SYRINGE | 5 | NDS PA QL=4.80 ML/28 Days |
| HADLIMA PUSHTOUCH 40MG/0.4ML AUTO-INJECTOR | 5 | NDS PA QL=2.40 ML/28 Days |
| HADLIMA PUSHTOUCH 40MG/0.8ML AUTO-INJECTOR | 5 | NDS PA QL=4.80 ML/28 Days |
| KINERET 100MG/0.67ML SYRINGE | 5 | NDS PA QL=18.76 ML/28 Days |
| NEMLUVIO 30MG AUTO-INJECTOR | 5 | NDS PA QL=2 EA/28 Days |
| NUCALA 100MG INJ | 5 | NDS PA QL=3 EA/28 Days |
| NUCALA 100MG/ML AUTO-INJECTOR | 5 | NDS PA QL=3 ML/28 Days |
| NUCALA 100MG/ML SYRINGE | 5 | NDS PA QL=3 ML/28 Days |
| NUCALA 40MG/0.4ML SYRINGE | 5 | NDS PA QL=.40 ML/28 Days |
| ORENCIA 125MG/ML SYRINGE | 5 | NDS PA QL=4 ML/28 Days |
| ORENCIA 50MG/0.4ML SYRINGE | 5 | NDS PA QL=1.60 ML/28 Days |
| ORENCIA 87.5MG/0.7ML SYRINGE | 5 | NDS PA QL=2.80 ML/28 Days |
| ORENCIA CLICKJECT 125MG/ML AUTO-INJECTOR | 5 | NDS PA QL=4 ML/28 Days |
| SIMLANDI 20MG/0.2ML SYRINGE | 4 | PA QL=2 EA/28 Days |
| SIMLANDI 40MG/0.4ML AUTO-INJECTOR | 5 | NDS PA QL=6 EA/28 Days |
| SIMLANDI 40MG/0.4ML SYRINGE | 5 | NDS PA QL=6 EA/28 Days |
| SIMLANDI 80MG/0.8ML AUTO-INJECTOR | 5 | NDS PA QL=3 EA/28 Days |
| SKYRIZI 150MG/ML AUTO-INJECTOR | 5 | PA QL=7 ML/365 Days |
| SKYRIZI 150MG/ML SYRINGE | 5 | PA QL=7 ML/365 Days |
| SKYRIZI 180MG/1.2ML CARTRIDGE | 5 | PA QL=1.20 ML/56 Days |
| SKYRIZI 360MG/2.4ML CARTRIDGE | 5 | PA QL=2.40 ML/56 Days |
| SKYRIZI 55MG/0.37ML SYRINGE | 5 | PA QL=2.59 ML/365 Days |
| STARJEMZA 45MG/0.5ML INJ | 3 | PA QL=.50 ML/28 Days |
| STARJEMZA 45MG/0.5ML SYRINGE | 3 | PA QL=.50 ML/28 Days |
| STARJEMZA 90MG/ML SYRINGE | 3 | PA QL=1 ML/28 Days |
| TREMFYA 100MG/ML AUTO-INJECTOR | 5 | PA QL=2 ML/28 Days |
| TREMFYA 100MG/ML SYRINGE | 5 | PA QL=2 ML/28 Days |
| TREMFYA 200MG/2ML AUTO-INJECTOR | 5 | NDS PA QL=2 ML/28 Days |
| TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2) | 5 | NDS PA QL=4 ML/28 Days |
| TREMFYA 200MG/2ML SYRINGE | 5 | NDS PA QL=2 ML/28 Days |
| TYENNE 162MG/0.9ML AUTO-INJECTOR | 5 | NDS PA QL=3.60 ML/28 Days |
| TYENNE 162MG/0.9ML SYRINGE | 5 | NDS PA QL=3.60 ML/28 Days |
| XOLAIR 150MG INJ | 5 | NDS PA QL=8 EA/28 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| XOLAIR 150MG/ML AUTO-INJECTOR | 5 | NDS PA QL=2 ML/28 Days |
| XOLAIR 150MG/ML SYRINGE | 5 | NDS PA QL=2 ML/28 Days |
| XOLAIR 300MG/2ML AUTO-INJECTOR | 5 | NDS PA QL=8 ML/28 Days |
| XOLAIR 300MG/2ML SYRINGE | 5 | NDS PA QL=8 ML/28 Days |
| XOLAIR 75MG/0.5ML AUTO-INJECTOR | 5 | NDS PA QL=1 ML/28 Days |
| XOLAIR 75MG/0.5ML SYRINGE | 5 | NDS PA QL=1 ML/28 Days |
| YESINTEK 45MG/0.5ML INJ | 3 | PA QL=.50 ML/28 Days |
| YESINTEK 45MG/0.5ML SYRINGE | 3 | PA QL=.50 ML/28 Days |
| YESINTEK 90MG/ML SYRINGE | 3 | PA QL=1 ML/28 Days |
| ZYMFENTRA 120MG/ML PEN INJ | 5 | NDS PA QL=2 EA/28 Days |
| ZYMFENTRA 120MG/ML SYRINGE | 5 | NDS PA QL=2 EA/28 Days |
| **CARDIOVASCULAR AGENTS** | | |
| **ALPHA-ADRENERGIC AGONISTS** | | |
| *droxidopa 100mg cap* | 2 | PA QL=90 EA/30 Days |
| *droxidopa 200mg cap* | 2 | PA QL=180 EA/30 Days |
| *droxidopa 300mg cap* | 2 | PA QL=180 EA/30 Days |
| *midodrine 10mg tab* | 2 | |
| *midodrine 2.5mg tab* | 2 | |
| *midodrine 5mg tab* | 2 | |
| **ANTIARRHYTHMICS** | | |
| *amiodarone 100mg tab* | 2 | |
| *amiodarone 200mg tab* | 1 | |
| *amiodarone 400mg tab* | 2 | |
| *disopyramide 100mg cap* | 2 | |
| *disopyramide 150mg cap* | 2 | |
| *dofetilide 125mcg cap* | 2 | |
| *dofetilide 250mcg cap* | 2 | |
| *dofetilide 500mcg cap* | 2 | |
| *flecainide acetate 100mg tab* | 2 | |
| *flecainide acetate 150mg tab* | 2 | |
| *flecainide acetate 50mg tab* | 2 | |
| *mexiletine 150mg cap* | 2 | |
| *mexiletine 200mg cap* | 2 | |
| *mexiletine 250mg cap* | 2 | |
| MULTAQ 400MG TAB | 3 | QL=60 EA/30 Days |
| *propafenone 150mg tab* | 2 | |
| *propafenone 225mg er cap* | 2 | |
| *propafenone 225mg tab* | 2 | |
| *propafenone 300mg tab* | 2 | |
| *propafenone 325mg er cap* | 2 | |
| *propafenone 425mg er cap* | 2 | |
| QUINIDINE SULFATE 200MG TAB | 2 | |
| QUINIDINE SULFATE 300MG TAB | 2 | |
| **BETA-ADRENERGIC BLOCKING AGENTS** | | |
| *acebutolol 200mg cap* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *acebutolol 400mg cap* | 2 | |
| *atenolol 100mg tab* | 1 | |
| *atenolol 25mg tab* | 1 | |
| *atenolol 50mg tab* | 1 | |
| *betaxolol 10mg tab* | 2 | |
| *betaxolol 20mg tab* | 2 | |
| *bisoprolol fumarate 10mg tab* | 2 | |
| *bisoprolol fumarate 5mg tab* | 2 | |
| *carvedilol 12.5mg tab* | 1 | |
| *carvedilol 25mg tab* | 1 | |
| *carvedilol 3.125mg tab* | 1 | |
| *carvedilol 6.25mg tab* | 1 | |
| *labetalol 100mg tab* | 2 | |
| *labetalol 200mg tab* | 2 | |
| *labetalol 300mg tab* | 2 | |
| *metoprolol succinate 100mg er tab* | 1 | |
| *metoprolol succinate 200mg er tab* | 1 | |
| *metoprolol succinate 25mg er tab* | 1 | |
| *metoprolol succinate 50mg er tab* | 1 | |
| *metoprolol tartrate 100mg tab* | 1 | |
| *metoprolol tartrate 25mg tab* | 1 | |
| *metoprolol tartrate 37.5mg tab* | 1 | |
| *metoprolol tartrate 50mg tab* | 1 | |
| *metoprolol tartrate 75mg tab* | 1 | |
| *nadolol 20mg tab* | 2 | |
| *nadolol 40mg tab* | 2 | |
| *nadolol 80mg tab* | 2 | |
| *nebivolol 10mg tab* | 2 | QL=60 EA/30 Days |
| *nebivolol 2.5mg tab* | 2 | QL=60 EA/30 Days |
| *nebivolol 20mg tab* | 2 | QL=60 EA/30 Days |
| *nebivolol 5mg tab* | 2 | QL=60 EA/30 Days |
| *pindolol 10mg tab* | 2 | |
| *pindolol 5mg tab* | 2 | |
| *propranolol 10mg tab* | 1 | |
| *propranolol 120mg er cap* | 2 | |
| *propranolol 160mg er cap* | 2 | |
| *propranolol 20mg tab* | 1 | |
| *propranolol 20mg/5ml oral soln* | 2 | |
| *propranolol 40mg tab* | 1 | |
| *propranolol 60mg er cap* | 2 | |
| *propranolol 60mg tab* | 1 | |
| *propranolol 80mg er cap* | 2 | |
| *propranolol 80mg tab* | 1 | |
| PROPRANOLOL 8MG/ML ORAL SOLN | 2 | |
| *sotalol 120mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *sotalol 160mg tab* | 2 | |
| *sotalol 240mg tab* | 2 | |
| *sotalol 80mg tab* | 2 | |
| *sotalol af 120mg tab* | 2 | |
| *sotalol af 160mg tab* | 2 | |
| *sotalol af 80mg tab* | 2 | |
| *timolol 10mg tab* | 2 | |
| TIMOLOL 5MG TAB | 2 | |
| **CALCIUM CHANNEL BLOCKING AGENTS** | | |
| *amlodipine 10mg tab* | 1 | |
| *amlodipine 2.5mg tab* | 1 | |
| *amlodipine 5mg tab* | 1 | |
| *cartia xt 120mg er (24hr) cap* | 2 | |
| *cartia xt 180mg er (24hr) cap* | 2 | |
| *cartia xt 240mg er (24hr) cap* | 2 | |
| *cartia xt 300mg er (24hr) cap* | 2 | |
| *dilt-xr 120mg cap* | 2 | |
| *dilt-xr 180mg cap* | 2 | |
| *dilt-xr 240mg cap* | 2 | |
| *diltiazem 120mg er (12hr) cap* | 2 | |
| *diltiazem 120mg er (24hr) cap* | 2 | |
| *diltiazem 120mg tab* | 2 | |
| *diltiazem 180mg er (24hr) cap* | 2 | |
| *diltiazem 240mg er (24hr) cap* | 2 | |
| *diltiazem 300mg er (24hr) cap* | 2 | |
| *diltiazem 30mg tab* | 1 | |
| *diltiazem 360mg er (24hr) cap* | 2 | |
| *diltiazem 420mg er (24hr) cap* | 2 | |
| *diltiazem 60mg er (12hr) cap* | 2 | |
| *diltiazem 60mg tab* | 2 | |
| *diltiazem 90mg er (12hr) cap* | 2 | |
| *diltiazem 90mg tab* | 2 | |
| *felodipine 10mg er tab* | 2 | |
| *felodipine 2.5mg er tab* | 2 | |
| *felodipine 5mg er tab* | 2 | |
| *nifedipine 30mg er tab* | 1 | |
| *nifedipine 30mg osmotic er tab* | 1 | |
| *nifedipine 60mg er tab* | 1 | |
| *nifedipine 60mg osmotic er tab* | 1 | |
| *nifedipine 90mg er tab* | 1 | |
| *nifedipine 90mg osmotic er tab* | 1 | |
| *nimodipine 30mg cap* | 2 | |
| *tiadylt 120mg er (24hr) cap* | 2 | |
| *tiadylt 180mg er (24hr) cap* | 2 | |
| *tiadylt 240mg er (24hr) cap* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *tiadylt 300mg er (24hr) cap* | 2 | |
| *tiadylt 360mg er (24hr) cap* | 2 | |
| *tiadylt 420mg er (24hr) cap* | 2 | |
| *verapamil 120mg er cap* | 2 | |
| *verapamil 120mg er tab* | 2 | |
| *verapamil 120mg tab* | 1 | |
| *verapamil 180mg er cap* | 2 | |
| *verapamil 180mg er tab* | 2 | |
| *verapamil 240mg er cap* | 2 | |
| *verapamil 240mg er tab* | 2 | |
| *verapamil 40mg tab* | 1 | |
| *verapamil 80mg tab* | 1 | |
| **CARDIOVASCULAR AGENTS, OTHER** | | |
| ATTRUBY 356MG TAB | 5 | NDS PA QL=112 EA/28 Days |
| *digoxin 0.125mg tab* | 1 | |
| *digoxin 0.25mg tab* | 1 | |
| *ivabradine 5mg tab* | 2 | PA QL=60 EA/30 Days |
| *ivabradine 7.5mg tab* | 2 | PA QL=60 EA/30 Days |
| *pentoxifylline 400mg er tab* | 2 | |
| *ranolazine 1000mg er tab* | 2 | QL=60 EA/30 Days |
| *ranolazine 500mg er tab* | 2 | QL=60 EA/30 Days |
| *sacubitril/valsartan 24-26mg tab* | 2 | QL=180 EA/30 Days |
| *sacubitril/valsartan 49-51mg tab* | 2 | QL=60 EA/30 Days |
| *sacubitril/valsartan 97-103mg tab* | 2 | QL=60 EA/30 Days |
| VERQUVO 10MG TAB | 3 | PA QL=30 EA/30 Days |
| VERQUVO 2.5MG TAB | 3 | PA QL=30 EA/30 Days |
| VERQUVO 5MG TAB | 3 | PA QL=30 EA/30 Days |
| WEGOVY 0.25MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| WEGOVY 0.5MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| WEGOVY 1.5MG TAB | 3 | PA QL=30 EA/30 Days |
| WEGOVY 1.7MG/0.75ML AUTO-INJECTOR | 3 | PA QL=3 ML/28 Days |
| WEGOVY 1MG/0.5ML AUTO-INJECTOR | 3 | PA QL=2 ML/28 Days |
| WEGOVY 2.4MG/0.75ML AUTO-INJECTOR | 3 | PA QL=3 ML/28 Days |
| WEGOVY 25MG TAB | 3 | PA QL=30 EA/30 Days |
| WEGOVY 4MG TAB | 3 | PA QL=30 EA/30 Days |
| WEGOVY 9MG TAB | 3 | PA QL=30 EA/30 Days |
| **DIURETICS, CARBONIC ANHYDRASE INHIBITORS** | | |
| *acetazolamide 125mg tab* | 1 | |
| *acetazolamide 250mg tab* | 1 | |
| *acetazolamide 500mg er cap* | 2 | |
| *methazolamide 25mg tab* | 2 | |
| *methazolamide 50mg tab* | 2 | |
| **DIURETICS, LOOP** | | |
| *bumetanide 0.25mg/ml inj* | 2 | |
| *bumetanide 0.5mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *bumetanide 1mg tab* | 2 | |
| *bumetanide 2mg tab* | 2 | |
| ENBUMYST 0.5MG/0.1ML NASAL SPRAY | 5 | NDS QL=36 EA/7 Days |
| *furosemide 10mg/ml inj* | 2 | |
| FUROSEMIDE 10MG/ML ORAL SOLN | 1 | |
| *furosemide 20mg tab* | 1 | |
| *furosemide 40mg tab* | 1 | |
| *furosemide 80mg tab* | 1 | |
| FUROSEMIDE 8MG/ML ORAL SOLN | 2 | |
| *torsemide 100mg tab* | 1 | |
| *torsemide 10mg tab* | 1 | |
| *torsemide 20mg tab* | 1 | |
| *torsemide 5mg tab* | 1 | |
| **DIURETICS, POTASSIUM-SPARING** | | |
| *amiloride 5mg tab* | 1 | |
| *spironolactone 100mg tab* | 1 | |
| *spironolactone 25mg tab* | 1 | |
| *spironolactone 50mg tab* | 1 | |
| **DIURETICS, THIAZIDE** | | |
| AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB | 2 | |
| *chlorthalidone 25mg tab* | 1 | |
| *chlorthalidone 50mg tab* | 1 | |
| *hydrochlorothiazide 12.5mg cap* | 1 | |
| *hydrochlorothiazide 12.5mg tab* | 1 | |
| *hydrochlorothiazide 25mg tab* | 1 | |
| *hydrochlorothiazide 50mg tab* | 1 | |
| *hydrochlorothiazide/spironolactone 25-25mg tab* | 2 | |
| *hydrochlorothiazide/triamterene 25-37.5mg cap* | 1 | |
| *hydrochlorothiazide/triamterene 25-37.5mg tab* | 1 | |
| *hydrochlorothiazide/triamterene 50-75mg tab* | 1 | |
| *indapamide 1.25mg tab* | 1 | |
| *indapamide 2.5mg tab* | 1 | |
| *metolazone 10mg tab* | 1 | |
| *metolazone 2.5mg tab* | 1 | |
| *metolazone 5mg tab* | 1 | |
| **VASODILATORS, DIRECT-ACTING ARTERIAL** | | |
| *hydralazine 100mg tab* | 1 | |
| *hydralazine 10mg tab* | 1 | |
| *hydralazine 25mg tab* | 1 | |
| *hydralazine 50mg tab* | 1 | |
| *minoxidil 10mg tab* | 1 | |
| *minoxidil 2.5mg tab* | 1 | |
| **VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS** | | |
| *isosorbide dinitrate 10mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *isosorbide dinitrate 20mg tab* | 2 | |
| *isosorbide dinitrate 30mg tab* | 2 | |
| *isosorbide dinitrate 5mg tab* | 2 | |
| *isosorbide mononitrate 10mg tab* | 2 | |
| *isosorbide mononitrate 120mg er tab* | 1 | |
| *isosorbide mononitrate 20mg tab* | 2 | |
| *isosorbide mononitrate 30mg er tab* | 1 | |
| *isosorbide mononitrate 60mg er tab* | 1 | |
| *nitro-bid 2% topical ointment* | 2 | |
| *nitroglycerin 0.1mg/hr patch* | 2 | |
| *nitroglycerin 0.2mg/hr patch* | 2 | |
| *nitroglycerin 0.3mg sl tab* | 1 | |
| *nitroglycerin 0.4mg sl tab* | 1 | |
| *nitroglycerin 0.4mg/hr patch* | 2 | |
| *nitroglycerin 0.6mg sl tab* | 1 | |
| *nitroglycerin 0.6mg/hr patch* | 2 | |
| **DENTAL AND ORAL AGENTS** | | |
| **DENTAL AND ORAL AGENTS** | | |
| *cevimeline 30mg cap* | 2 | |
| *chlorhexidine gluconate 0.12% mouthwash* | 1 | |
| *clotrimazole 10mg lozenge* | 1 | |
| *kourzeq 0.1% oral paste* | 2 | |
| *lidocaine viscous 2% mucous membrane topical soln* | 1 | |
| *nystatin 100000unit/ml oral susp* | 1 | |
| *periogard 0.12% mouthwash* | 1 | |
| *pilocarpine 5mg tab* | 2 | |
| *pilocarpine 7.5mg tab* | 2 | |
| *triamcinolone acetonide 0.1% oral paste* | 2 | |
| **DERMATOLOGICALS** | | |
| **ACNE PRODUCTS** | | |
| *accutane 10mg cap* | 2 | |
| *accutane 20mg cap* | 2 | |
| *accutane 40mg cap* | 2 | |
| *amnesteem 10mg cap* | 2 | |
| *amnesteem 20mg cap* | 2 | |
| *amnesteem 30mg cap* | 2 | |
| *amnesteem 40mg cap* | 2 | |
| *claravis 10mg cap* | 2 | |
| *claravis 20mg cap* | 2 | |
| *claravis 30mg cap* | 2 | |
| *claravis 40mg cap* | 2 | |
| *clindamycin 1% pad* | 2 | QL=60 EA/30 Days |
| *clindamycin 1% topical gel (once-daily)* | 2 | QL=75 ML/30 Days |
| *clindamycin 1% topical gel (twice-daily)* | 2 | QL=75 GM/30 Days |
| *clindamycin 1% topical lotion* | 2 | QL=60 ML/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *clindamycin 1% topical soln* | 1 | QL=60 ML/30 Days |
| ERY 2% PAD | 2 | QL=60 EA/30 Days |
| ERYTHROMYCIN 2% TOPICAL GEL | 2 | QL=60 GM/30 Days |
| *erythromycin 2% topical soln* | 2 | QL=60 ML/30 Days |
| *isotretinoin 10mg cap* | 2 | |
| *isotretinoin 20mg cap* | 2 | |
| *isotretinoin 30mg cap* | 2 | |
| *isotretinoin 40mg cap* | 2 | |
| *sulfacetamide sodium 10% topical lotion* | 2 | QL=118 ML/30 Days |
| *tretinoin 0.01% topical gel* | 2 | PA QL=45 GM/30 Days |
| *tretinoin 0.025% topical cream* | 2 | PA QL=45 GM/30 Days |
| *tretinoin 0.025% topical gel* | 2 | PA QL=45 GM/30 Days |
| *tretinoin 0.05% topical cream* | 2 | PA QL=45 GM/30 Days |
| *tretinoin 0.1% topical cream* | 2 | PA QL=45 GM/30 Days |
| *zenatane 10mg cap* | 2 | |
| *zenatane 20mg cap* | 2 | |
| *zenatane 30mg cap* | 2 | |
| *zenatane 40mg cap* | 2 | |
| **ANTIBIOTICS - TOPICAL** | | |
| *gentamicin 0.1% topical cream* | 2 | QL=30 GM/30 Days |
| *gentamicin 0.1% topical ointment* | 2 | QL=30 GM/30 Days |
| *mupirocin 2% topical ointment* | 1 | QL=220 GM/30 Days |
| **ANTIFUNGALS - TOPICAL** | | |
| *ciclopirox 0.77% topical cream* | 1 | QL=90 GM/30 Days |
| *ciclopirox 0.77% topical gel* | 2 | QL=100 GM/30 Days |
| *ciclopirox 0.77% topical lotion* | 2 | QL=60 ML/30 Days |
| *ciclopirox 1% shampoo* | 2 | QL=120 ML/30 Days |
| *ciclopirox 8% topical soln* | 1 | QL=13.20 ML/30 Days |
| *clotrimazole 1% topical cream* | 1 | QL=45 GM/30 Days |
| *clotrimazole/betamethasone 1-0.05% topical cream* | 1 | QL=90 GM/30 Days |
| *econazole nitrate 1% topical cream* | 1 | QL=85 GM/30 Days |
| *ketoconazole 2% shampoo* | 1 | QL=240 ML/30 Days |
| *ketoconazole 2% topical cream* | 1 | QL=120 GM/30 Days |
| *nyamyc 100000unit/gm topical powder* | 1 | QL=60 GM/30 Days |
| *nystatin 100000unit/gm topical ointment* | 1 | QL=30 GM/30 Days |
| *nystatin 100000unit/gm topical powder* | 1 | QL=60 GM/30 Days |
| *nystatin 100000unit/ml topical cream* | 1 | QL=30 GM/30 Days |
| *nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream* | 1 | QL=60 GM/30 Days |
| *nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical ointment* | 1 | QL=60 GM/30 Days |
| *nystop 100000unit/gm topical powder* | 1 | QL=60 GM/30 Days |
| **ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL** | | |
| *bexarotene 1% topical gel* | 5 | NDS PA_NSO QL=60 GM/30 Days |
| *diclofenac sodium 3% topical gel* | 2 | PA QL=100 GM/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| FLUOROURACIL 2% TOPICAL SOLN | 2 | QL=10 ML/30 Days |
| *fluorouracil 5% topical cream* | 2 | QL=40 GM/30 Days |
| *fluorouracil 5% topical soln* | 2 | QL=10 ML/30 Days |
| PANRETIN 0.1% TOPICAL GEL | 5 | NDS PA_NSO QL=60 GM/30 Days |
| VALCHLOR 0.016% TOPICAL GEL | 5 | NDS PA_NSO QL=60 GM/30 Days |
| **ANTIPSORIATICS** | | |
| *acitretin 10mg cap* | 2 | |
| *acitretin 17.5mg cap* | 2 | |
| *acitretin 25mg cap* | 2 | |
| *calcipotriene 0.005% topical cream* | 2 | PA QL=120 GM/30 Days |
| *calcipotriene 0.005% topical ointment* | 2 | PA QL=120 GM/30 Days |
| CALCIPOTRIENE 0.005% TOPICAL SOLN | 2 | PA QL=120 ML/30 Days |
| METHOXSALEN 10MG CAP | 5 | NDS |
| OTEZLA 10/20/30MG TAB 28-DAY STARTER PACK (55) | 5 | NDS PA QL=55 EA/28 Days |
| OTEZLA 10/20MG TAB 28-DAY STARTER PACK (55) | 5 | NDS PA QL=55 EA/28 Days |
| OTEZLA 20MG TAB | 5 | NDS PA QL=60 EA/30 Days |
| OTEZLA 30MG TAB | 5 | NDS PA QL=60 EA/30 Days |
| OTEZLA XR 75MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| OTEZLA/OTEZLA XR 28-DAY 10/20/30/75MG STARTER PACK (41) | 5 | NDS PA QL=41 EA/28 Days |
| *tazarotene 0.1% topical cream* | 2 | PA QL=60 GM/30 Days |
| **CORTICOSTEROIDS - TOPICAL** | | |
| *alclometasone dipropionate 0.05% topical cream* | 2 | QL=120 GM/30 Days |
| ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL OINTMENT | 2 | QL=120 GM/30 Days |
| *betamethasone 0.05% aug topical cream* | 1 | QL=100 GM/30 Days |
| *betamethasone 0.05% aug topical lotion* | 2 | QL=120 ML/30 Days |
| *betamethasone 0.05% topical cream* | 2 | QL=90 GM/30 Days |
| *betamethasone 0.05% topical lotion* | 2 | QL=120 ML/30 Days |
| *betamethasone 0.1% topical cream* | 1 | QL=135 GM/30 Days |
| BETAMETHASONE 0.1% TOPICAL LOTION | 2 | QL=120 ML/30 Days |
| *betamethasone dipropionate 0.05% aug topical ointment* | 2 | QL=100 GM/30 Days |
| *betamethasone dipropionate 0.05% topical ointment* | 2 | QL=90 GM/30 Days |
| *betamethasone valerate 0.1% topical ointment* | 1 | QL=135 GM/30 Days |
| *clobetasol propionate 0.05% shampoo* | 2 | QL=236 ML/30 Days |
| *clobetasol propionate 0.05% topical cream* | 1 | QL=120 GM/30 Days |
| *clobetasol propionate 0.05% topical e cream* | 2 | QL=120 GM/30 Days |
| *clobetasol propionate 0.05% topical foam* | 2 | QL=100 GM/30 Days |
| *clobetasol propionate 0.05% topical gel* | 2 | QL=120 GM/30 Days |
| *clobetasol propionate 0.05% topical lotion* | 2 | QL=118 ML/30 Days |
| *clobetasol propionate 0.05% topical ointment* | 1 | QL=120 GM/30 Days |
| *clobetasol propionate 0.05% topical soln* | 1 | QL=100 ML/30 Days |
| *desonide 0.05% topical cream* | 2 | QL=60 GM/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *desonide 0.05% topical ointment* | 2 | QL=120 GM/30 Days |
| *desoximetasone 0.25% topical cream* | 2 | QL=100 GM/30 Days |
| *desoximetasone 0.25% topical ointment* | 2 | QL=120 GM/30 Days |
| *fluocinolone acetonide 0.01% topical cream* | 2 | QL=120 GM/30 Days |
| *fluocinolone acetonide 0.01% topical oil* | 2 | QL=120 ML/30 Days |
| *fluocinolone acetonide 0.01% topical soln* | 2 | QL=90 ML/30 Days |
| *fluocinolone acetonide 0.025% topical cream* | 2 | QL=120 GM/30 Days |
| *fluocinolone acetonide 0.025% topical ointment* | 2 | QL=120 GM/30 Days |
| *fluocinonide 0.05% topical cream* | 2 | QL=60 GM/30 Days |
| *fluocinonide 0.05% topical e cream* | 2 | QL=120 GM/30 Days |
| *fluocinonide 0.05% topical gel* | 2 | QL=60 GM/30 Days |
| *fluocinonide 0.05% topical ointment* | 1 | QL=60 GM/30 Days |
| *fluocinonide 0.05% topical soln* | 1 | QL=60 ML/30 Days |
| *fluocinonide 0.1% topical cream* | 1 | QL=60 GM/30 Days |
| *fluticasone propionate 0.005% topical ointment* | 2 | QL=240 GM/30 Days |
| *fluticasone propionate 0.05% topical cream* | 1 | QL=240 GM/30 Days |
| *halobetasol propionate 0.05% topical cream* | 2 | QL=50 GM/30 Days |
| *halobetasol propionate 0.05% topical ointment* | 2 | QL=50 GM/30 Days |
| *hydrocortisone 1% topical cream* | 1 | QL=240 GM/30 Days |
| HYDROCORTISONE 2.5% TOPICAL LOTION | 2 | QL=118 ML/30 Days |
| *hydrocortisone 2.5% topical ointment* | 1 | QL=240 GM/30 Days |
| *mometasone furoate 0.1% topical cream* | 1 | QL=180 GM/30 Days |
| *mometasone furoate 0.1% topical lotion* | 2 | QL=180 ML/30 Days |
| *mometasone furoate 0.1% topical ointment* | 1 | QL=180 GM/30 Days |
| *triamcinolone acetonide 0.025% topical cream* | 1 | QL=454 GM/30 Days |
| TRIAMCINOLONE ACETONIDE 0.025% TOPICAL LOTION | 1 | QL=120 ML/30 Days |
| *triamcinolone acetonide 0.025% topical ointment* | 1 | QL=454 GM/30 Days |
| *triamcinolone acetonide 0.1% topical cream* | 1 | QL=454 GM/30 Days |
| *triamcinolone acetonide 0.1% topical lotion* | 1 | QL=120 ML/30 Days |
| *triamcinolone acetonide 0.1% topical ointment* | 1 | QL=454 GM/30 Days |
| *triamcinolone acetonide 0.5% topical cream* | 1 | QL=454 GM/30 Days |
| *triamcinolone acetonide 0.5% topical ointment* | 1 | QL=120 GM/30 Days |
| **LOCAL ANESTHETICS - TOPICAL** | | |
| *lidocaine 4% mucous membrane topical soln* | 2 | QL=50 ML/30 Days |
| *lidocaine 5% patch* | 2 | PA QL=90 EA/30 Days |
| *lidocaine 5% topical ointment* | 1 | PA QL=107 GM/30 Days |
| *lidocaine/prilocaine 2.5-2.5% topical cream* | 1 | QL=30 GM/30 Days |
| **MISC. DERMATOLOGICAL PRODUCTS** | | |
| *acyclovir 5% topical ointment* | 1 | QL=30 GM/30 Days |
| *ammonium lactate 12% topical cream* | 1 | |
| *ammonium lactate 12% topical lotion* | 1 | |
| EUCRISA 2% TOPICAL OINTMENT | 3 | PA QL=100 GM/30 Days |
| *imiquimod 5% topical cream* | 1 | QL=24 EA/30 Days |
| LITFULO 50MG CAP | 5 | NDS PA QL=28 EA/28 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *malathion 0.5% topical lotion* | 2 | QL=59 ML/30 Days |
| *permethrin 5% topical cream* | 1 | QL=60 GM/30 Days |
| *pimecrolimus 1% topical cream* | 2 | QL=100 GM/30 Days |
| PODOFILOX 0.5% TOPICAL SOLN | 2 | QL=7 ML/30 Days |
| SELENIUM SULFIDE 2.5% SHAMPOO | 1 | QL=120 ML/30 Days |
| *tacrolimus 0.03% topical ointment* | 2 | QL=100 GM/30 Days |
| *tacrolimus 0.1% topical ointment* | 2 | QL=100 GM/30 Days |
| **ROSACEA AGENTS** | | |
| *azelaic acid 15% topical gel* | 2 | QL=50 GM/30 Days |
| *metronidazole 0.75% topical cream* | 2 | QL=45 GM/30 Days |
| *metronidazole 0.75% topical gel* | 2 | QL=45 GM/30 Days |
| *metronidazole 1% topical gel* | 2 | QL=60 GM/30 Days |
| **WOUND CARE PRODUCTS** | | |
| SANTYL 250UNIT/GM TOPICAL OINTMENT | 3 | PA QL=90 GM/30 Days |
| *silver sulfadiazine 1% topical cream* | 1 | |
| *ssd 1% topical cream* | 1 | |
| **ENDOCRINE AND METABOLIC AGENTS - MISC.** | | |
| **BONE DENSITY REGULATORS** | | |
| *alendronate 10mg tab* | 1 | QL=30 EA/30 Days |
| *alendronate 35mg tab* | 1 | QL=4 EA/28 Days |
| *alendronate 70mg tab* | 1 | QL=4 EA/28 Days |
| ENOBY 60MG/ML SYRINGE | 3 | QL=1 ML/168 Days |
| *ibandronate 150mg tab* | 1 | QL=1 EA/28 Days |
| *risedronate sodium 150mg tab* | 2 | QL=1 EA/28 Days |
| *risedronate sodium 30mg tab* | 2 | QL=30 EA/30 Days |
| *risedronate sodium 35mg tab* | 2 | QL=4 EA/28 Days |
| *risedronate sodium 35mg tab pack (12)* | 2 | QL=4 EA/28 Days |
| *risedronate sodium 35mg tab pack (4)* | 2 | QL=4 EA/28 Days |
| *risedronate sodium 5mg tab* | 2 | QL=30 EA/30 Days |
| *salmon calcitonin 200unit/act nasal spray* | 2 | QL=3.70 ML/28 Days |
| *teriparatide 560mcg/2.24ml pen inj* | 5 | NDS QL=2.48 ML/28 Days |
| TYMLOS 3120MCG/1.56ML PEN INJ | 5 | NDS QL=1.56 ML/30 Days |
| XTRENBO 120MG/1.7ML INJ | 3 | PA QL=1.70 ML/28 Days |
| **METABOLIC MODIFIERS** | | |
| *calcitriol 0.25mcg cap* | 1 | |
| *calcitriol 0.5mcg cap* | 1 | |
| *calcitriol 1mcg/ml oral soln* | 2 | |
| *carglumic acid 200mg tab for oral susp* | 5 | NDS PA |
| *cinacalcet 30mg tab* | 2 | QL=60 EA/30 Days |
| *cinacalcet 60mg tab* | 2 | QL=60 EA/30 Days |
| *cinacalcet 90mg tab* | 2 | QL=120 EA/30 Days |
| CYSTADANE 1GM POWDER FOR ORAL SOLN | 5 | NDS |
| *levocarnitine 100mg/ml oral soln* | 2 | |
| *levocarnitine 330mg tab* | 2 | |
| *paricalcitol 1mcg cap* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *paricalcitol 2mcg cap* | 2 | |
| *paricalcitol 4mcg cap* | 2 | |
| REDEMPLO 25MG/0.5ML SYRINGE | 5 | PA QL=.50 ML/84 Days |
| REVCOVI 2.4MG/1.5ML INJ | 5 | NDS PA |
| *sapropterin 100mg powder for oral soln* | 5 | NDS PA |
| *sapropterin 100mg tab* | 5 | NDS PA |
| *sapropterin 500mg powder for oral soln* | 5 | NDS PA |
| *sodium phenylbutyrate 3gm/tsp oral powder* | 2 | |
| TRYNGOLZA 50MG/0.8ML AUTO-INJECTOR | 5 | NDS PA QL=.80 ML/28 Days |
| TRYNGOLZA 80MG/0.8ML AUTO-INJECTOR | 5 | NDS PA QL=.80 ML/28 Days |
| **ENDOCRINE MEDICATIONS** | | |
| **ANTITHYROID DRUGS** | | |
| *methimazole 10mg tab* | 1 | |
| *methimazole 5mg tab* | 1 | |
| *propylthiouracil 50mg tab* | 2 | |
| **GLUCOCORTICOID DRUGS** | | |
| *budesonide 3mg dr cap* | 2 | QL=90 EA/30 Days |
| *budesonide 9mg er tab* | 2 | PA QL=30 EA/30 Days |
| *dexamethasone 0.5mg tab* | 1 | |
| DEXAMETHASONE 0.5MG/5ML ORAL SOLN | 2 | |
| *dexamethasone 0.75mg tab* | 1 | |
| *dexamethasone 1.5mg tab* | 1 | |
| *dexamethasone 1mg tab* | 1 | |
| *dexamethasone 2mg tab* | 1 | |
| *dexamethasone 4mg tab* | 1 | |
| *dexamethasone 6mg tab* | 1 | |
| *hydrocortisone 10mg tab* | 2 | |
| *hydrocortisone 20mg tab* | 2 | |
| *hydrocortisone 5mg tab* | 2 | |
| *methylprednisolone 16mg tab* | 2 | PA_BvD |
| *methylprednisolone 32mg tab* | 2 | PA_BvD |
| *methylprednisolone 4mg tab* | 2 | PA_BvD |
| *methylprednisolone 4mg tab pack (21)* | 2 | |
| *methylprednisolone 8mg tab* | 2 | PA_BvD |
| *prednisolone 1mg/ml oral soln* | 2 | PA_BvD |
| *prednisolone 3mg/ml oral soln* | 2 | PA_BvD |
| *prednisolone 5mg/ml oral soln* | 2 | PA_BvD |
| *prednisone 10mg tab* | 1 | PA_BvD |
| *prednisone 10mg tab (21)* | 2 | |
| *prednisone 10mg tab pack (48)* | 2 | |
| *prednisone 1mg tab* | 1 | PA_BvD |
| PREDNISONE 1MG/ML ORAL SOLN | 2 | PA_BvD |
| *prednisone 2.5mg tab* | 1 | PA_BvD |
| *prednisone 20mg tab* | 1 | PA_BvD |
| *prednisone 50mg tab* | 1 | PA_BvD |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *prednisone 5mg tab* | 1 | PA_BvD |
| *prednisone 5mg tab pack (21)* | 2 | |
| *prednisone 5mg tab pack (48)* | 2 | |
| TARPEYO 4MG DR CAP | 5 | NDS PA QL=120 EA/30 Days |
| **OTHER ENDOCRINE DRUGS** | | |
| *cabergoline 0.5mg tab* | 2 | |
| *desmopressin acetate 0.01% (0.01mg/act) nasal spray* | 2 | |
| *desmopressin acetate 0.1mg tab* | 2 | |
| *desmopressin acetate 0.2mg tab* | 2 | |
| *fludrocortisone acetate 0.1mg tab* | 1 | |
| INCRELEX 40MG/4ML INJ | 5 | NDS PA |
| ISTURISA 1MG TAB | 5 | NDS PA QL=240 EA/30 Days |
| ISTURISA 5MG TAB | 5 | NDS PA QL=360 EA/30 Days |
| KERENDIA 10MG TAB | 3 | PA QL=30 EA/30 Days |
| KERENDIA 20MG TAB | 3 | PA QL=30 EA/30 Days |
| KERENDIA 40MG TAB | 3 | PA QL=30 EA/30 Days |
| NORDITROPIN 10MG/1.5ML PEN INJ | 5 | NDS PA |
| NORDITROPIN 15MG/1.5ML PEN INJ | 5 | NDS PA |
| NORDITROPIN 5MG/1.5ML PEN INJ | 5 | NDS PA |
| *octreotide 0.05mg/ml inj* | 2 | PA |
| *octreotide 0.1mg/ml inj* | 2 | PA |
| *octreotide 0.2mg/ml inj* | 2 | PA |
| *octreotide 0.5mg/ml inj* | 2 | PA |
| *octreotide 1mg/ml inj* | 2 | PA |
| OMNITROPE 10MG/1.5ML CARTRIDGE | 5 | NDS PA |
| OMNITROPE 5.8MG INJ | 5 | NDS PA |
| OMNITROPE 5MG/1.5ML CARTRIDGE | 5 | NDS PA |
| *raloxifene 60mg tab* | 2 | |
| SIGNIFOR 0.3MG/ML INJ | 5 | NDS PA QL=60 ML/30 Days |
| SIGNIFOR 0.6MG/ML INJ | 5 | NDS PA QL=60 ML/30 Days |
| SIGNIFOR 0.9MG/ML INJ | 5 | NDS PA QL=60 ML/30 Days |
| SOMAVERT 10MG INJ | 5 | NDS PA QL=60 EA/30 Days |
| SOMAVERT 15MG INJ | 5 | NDS PA QL=60 EA/30 Days |
| SOMAVERT 20MG INJ | 5 | NDS PA QL=60 EA/30 Days |
| SOMAVERT 25MG INJ | 5 | NDS PA QL=30 EA/30 Days |
| SOMAVERT 30MG INJ | 5 | NDS PA QL=30 EA/30 Days |
| *tolvaptan 15mg tab (jynarque equiv)* | 5 | NDS PA QL=120 EA/30 Days |
| *tolvaptan 15mg tab therapy pack (56)* | 5 | NDS PA QL=56 EA/28 Days |
| *tolvaptan 15mg/30mg tab pack (56)* | 5 | NDS PA QL=56 EA/28 Days |
| *tolvaptan 15mg/45mg tab pack (56)* | 5 | NDS PA QL=56 EA/28 Days |
| *tolvaptan 30mg tab (jynarque equiv)* | 5 | NDS PA QL=120 EA/30 Days |
| *tolvaptan 30mg/60mg tab pack (56)* | 5 | NDS PA QL=56 EA/28 Days |
| *tolvaptan 30mg/90mg tab pack (56)* | 5 | NDS PA QL=56 EA/28 Days |
| **THYROID SUPPLEMENTS** | | |
| *levothyroxine 100mcg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *levothyroxine 112mcg tab* | 1 | |
| *levothyroxine 125mcg tab* | 1 | |
| *levothyroxine 137mcg tab* | 1 | |
| *levothyroxine 150mcg tab* | 1 | |
| *levothyroxine 175mcg tab* | 1 | |
| *levothyroxine 200mcg tab* | 1 | |
| *levothyroxine 25mcg tab* | 1 | |
| *levothyroxine 300mcg tab* | 1 | |
| *levothyroxine 50mcg tab* | 1 | |
| *levothyroxine 75mcg tab* | 1 | |
| *levothyroxine 88mcg tab* | 1 | |
| *levoxyl 100mcg tab* | 1 | |
| *levoxyl 112mcg tab* | 1 | |
| *levoxyl 125mcg tab* | 1 | |
| *levoxyl 137mcg tab* | 1 | |
| *levoxyl 150mcg tab* | 1 | |
| *levoxyl 175mcg tab* | 1 | |
| *levoxyl 200mcg tab* | 1 | |
| *levoxyl 25mcg tab* | 1 | |
| *levoxyl 50mcg tab* | 1 | |
| *levoxyl 75mcg tab* | 1 | |
| *levoxyl 88mcg tab* | 1 | |
| *liomny 25mcg tab* | 2 | |
| *liomny 50mcg tab* | 2 | |
| *liomny 5mcg tab* | 2 | |
| *liothyronine sodium 25mcg tab* | 2 | |
| *liothyronine sodium 50mcg tab* | 2 | |
| *liothyronine sodium 5mcg tab* | 2 | |
| SYNTHROID 100MCG TAB | 3 | |
| SYNTHROID 112MCG TAB | 3 | |
| SYNTHROID 125MCG TAB | 3 | |
| SYNTHROID 137MCG TAB | 3 | |
| SYNTHROID 150MCG TAB | 3 | |
| SYNTHROID 175MCG TAB | 3 | |
| SYNTHROID 200MCG TAB | 3 | |
| SYNTHROID 25MCG TAB | 3 | |
| SYNTHROID 300MCG TAB | 3 | |
| SYNTHROID 50MCG TAB | 3 | |
| SYNTHROID 75MCG TAB | 3 | |
| SYNTHROID 88MCG TAB | 3 | |
| **GASTROINTESTINAL MEDICATIONS** | | |
| **ANTIDIARRHEAL DRUGS** | | |
| *alosetron 0.5mg tab* | 2 | QL=60 EA/30 Days |
| *alosetron 1mg tab* | 2 | QL=60 EA/30 Days |
| *atropine sulfate/diphenoxylate 0.025-2.5mg tab* | 1 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *loperamide 2mg cap* | 1 | |
| XERMELO 250MG TAB | 5 | NDS PA QL=84 EA/28 Days |
| **ANTISPASMODICS/DRUGS AFFECT GI MOTILITY** | | |
| *constulose 10gm/15ml oral soln* | 1 | |
| *dicyclomine 10mg cap* | 1 | |
| *dicyclomine 20mg tab* | 1 | |
| *dicyclomine 2mg/ml oral soln* | 2 | |
| *enulose 10gm/15ml oral soln* | 1 | |
| GAVILYTE-C POWDER FOR ORAL SOLN | 1 | |
| *gavilyte-g powder for oral soln* | 1 | |
| *gavilyte-n powder for oral soln* | 1 | |
| *generlac 10gm/15ml oral soln* | 1 | |
| *glycopyrrolate 1mg tab* | 2 | |
| *glycopyrrolate 2mg tab* | 2 | |
| *lactulose 667mg/ml oral soln* | 1 | |
| LINZESS 145MCG CAP | 3 | QL=30 EA/30 Days |
| LINZESS 290MCG CAP | 3 | QL=30 EA/30 Days |
| LINZESS 72MCG CAP | 3 | QL=30 EA/30 Days |
| *lubiprostone 24mcg cap* | 2 | QL=60 EA/30 Days |
| *lubiprostone 8mcg cap* | 2 | QL=60 EA/30 Days |
| *metoclopramide 10mg tab* | 1 | |
| *metoclopramide 1mg/ml oral soln* | 2 | |
| *metoclopramide 5mg tab* | 1 | |
| MOVANTIK 12.5MG TAB | 3 | PA QL=30 EA/30 Days |
| MOVANTIK 25MG TAB | 3 | PA QL=30 EA/30 Days |
| *peg 3350 powder for oral soln (100gm moviprep equiv)* | 2 | |
| *peg 3350/electrolyte powder for oral soln* | 1 | |
| *peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln* | 1 | |
| *prucalopride 1mg tab* | 2 | QL=30 EA/30 Days |
| *prucalopride 2mg tab* | 2 | QL=30 EA/30 Days |
| *sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit* | 2 | |
| *sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)* | 2 | |
| SUFLAVE ORAL SOLN PACK | 3 | |
| SUTAB 225-188-1479MG TAB | 3 | |
| **ANTIULCER DRUGS** | | |
| *bismuth subcitrate/metronidazole/tetracycline 140-125-125mg cap* | 2 | QL=120 EA/10 Days |
| *cimetidine 200mg tab* | 2 | |
| *cimetidine 300mg tab* | 2 | |
| *cimetidine 400mg tab* | 2 | |
| *cimetidine 800mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *esomeprazole 10mg granules for oral susp* | 4 | QL=30 EA/30 Days |
| *esomeprazole 20mg dr cap* | 2 | |
| *esomeprazole 20mg granules for oral susp* | 4 | QL=30 EA/30 Days |
| *esomeprazole 40mg dr cap* | 2 | |
| *esomeprazole 40mg granules for oral susp* | 4 | QL=60 EA/30 Days |
| *famotidine 20mg tab* | 1 | |
| *famotidine 40mg tab* | 1 | |
| *lansoprazole 15mg dr cap* | 1 | |
| *lansoprazole 30mg dr cap* | 1 | |
| *misoprostol 100mcg tab* | 2 | |
| *misoprostol 200mcg tab* | 2 | |
| *omeprazole 10mg dr cap* | 1 | |
| *omeprazole 20mg dr cap* | 1 | |
| *omeprazole 40mg dr cap* | 1 | |
| *pantoprazole 20mg dr tab* | 1 | |
| *pantoprazole 40mg dr tab* | 1 | |
| *rabeprazole sodium 20mg dr tab* | 2 | |
| *sucralfate 1000mg tab* | 1 | |
| *sucralfate 100mg/ml oral susp* | 2 | |
| VOQUEZNA 500-20MG DUAL THERAPY PACK (112) | 3 | QL=112 EA/14 Days |
| VOQUEZNA 500-500-20MG TRIPLE THERAPY PACK (112) | 3 | QL=112 EA/14 Days |
| **GENITOURINARY AGENTS** | | |
| **ANTISPASMODICS, URINARY** | | |
| *bethanechol chloride 10mg tab* | 2 | |
| *bethanechol chloride 25mg tab* | 2 | |
| *bethanechol chloride 50mg tab* | 2 | |
| *bethanechol chloride 5mg tab* | 2 | |
| *fesoterodine fumarate 4mg er tab* | 2 | QL=30 EA/30 Days |
| *fesoterodine fumarate 8mg er tab* | 2 | QL=30 EA/30 Days |
| GEMTESA 75MG TAB | 3 | QL=30 EA/30 Days |
| MYRBETRIQ 25MG ER TAB | 3 | QL=30 EA/30 Days |
| MYRBETRIQ 50MG ER TAB | 3 | QL=30 EA/30 Days |
| *oxybutynin chloride 10mg er tab* | 1 | |
| *oxybutynin chloride 15mg er tab* | 1 | |
| *oxybutynin chloride 1mg/ml oral soln* | 1 | QL=600 ML/30 Days |
| *oxybutynin chloride 5mg er tab* | 1 | |
| *oxybutynin chloride 5mg tab* | 1 | |
| *solifenacin succinate 10mg tab* | 2 | |
| *solifenacin succinate 5mg tab* | 2 | |
| *tolterodine tartrate 1mg tab* | 2 | QL=60 EA/30 Days |
| *tolterodine tartrate 2mg er cap* | 2 | QL=30 EA/30 Days |
| *tolterodine tartrate 2mg tab* | 2 | QL=60 EA/30 Days |
| *tolterodine tartrate 4mg er cap* | 2 | QL=30 EA/30 Days |
| *trospium chloride 20mg tab* | 2 | QL=60 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| **BENIGN PROSTATIC HYPERTROPHY AGENTS** | | |
| *alfuzosin 10mg er tab* | 1 | |
| *dutasteride 0.5mg cap* | 1 | QL=30 EA/30 Days |
| *finasteride 5mg tab* | 1 | |
| *silodosin 4mg cap* | 2 | QL=30 EA/30 Days |
| *silodosin 8mg cap* | 2 | QL=30 EA/30 Days |
| *tadalafil 2.5mg tab* | 2 | PA QL=30 EA/30 Days |
| *tadalafil 5mg tab* | 2 | PA QL=30 EA/30 Days |
| *tamsulosin 0.4mg cap* | 1 | |
| **GENITOURINARY AGENTS, OTHER** | | |
| CYSTAGON 150MG CAP | 3 | |
| CYSTAGON 50MG CAP | 3 | |
| FILSPARI 200MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| FILSPARI 400MG TAB | 5 | NDS PA QL=60 EA/30 Days |
| *potassium citrate 10meq er tab* | 2 | |
| *potassium citrate 15meq er tab* | 2 | |
| *potassium citrate 5meq er tab* | 2 | |
| *sodium chloride 0.9% irrigation soln* | 2 | |
| **GOUT AGENTS** | | |
| **GOUT AGENTS** | | |
| *allopurinol 100mg tab* | 1 | |
| *allopurinol 300mg tab* | 1 | |
| *colchicine 0.6mg tab* | 2 | |
| *colchicine/probenecid 0.5-500mg tab* | 2 | |
| *febuxostat 40mg tab* | 2 | ST QL=30 EA/30 Days |
| *febuxostat 80mg tab* | 2 | ST QL=30 EA/30 Days |
| *probenecid 500mg tab* | 2 | |
| **HEMATOPOIETIC AGENTS** | | |
| **HEMATOPOIETIC GROWTH FACTORS** | | |
| *eltrombopag olamine 12.5mg powder for oral susp* | 5 | NDS PA QL=90 EA/30 Days |
| *eltrombopag olamine 12.5mg tab* | 5 | NDS PA QL=30 EA/30 Days |
| *eltrombopag olamine 25mg powder for oral susp* | 5 | NDS PA QL=180 EA/30 Days |
| *eltrombopag olamine 25mg tab* | 5 | NDS PA QL=30 EA/30 Days |
| *eltrombopag olamine 50mg tab* | 5 | NDS PA QL=60 EA/30 Days |
| *eltrombopag olamine 75mg tab* | 5 | NDS PA QL=60 EA/30 Days |
| FULPHILA 6MG/0.6ML SYRINGE | 5 | NDS |
| LEUKINE 250MCG INJ | 5 | NDS PA |
| NIVESTYM 300MCG/0.5ML SYRINGE | 5 | NDS |
| NIVESTYM 300MCG/ML INJ | 5 | NDS |
| NIVESTYM 480MCG/0.8ML SYRINGE | 5 | NDS |
| NIVESTYM 480MCG/1.6ML INJ | 5 | NDS |
| RETACRIT 10000UNIT/ML INJ | 3 | PA QL=12 ML/28 Days |
| RETACRIT 20000UNIT/2ML INJ | 3 | PA QL=12 ML/28 Days |
| RETACRIT 20000UNIT/ML INJ | 3 | PA QL=12 ML/28 Days |
| RETACRIT 2000UNIT/ML INJ | 3 | PA QL=12 ML/28 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| RETACRIT 3000UNIT/ML INJ | 3 | PA QL=12 ML/28 Days |
| RETACRIT 40000UNIT/ML INJ | 3 | PA QL=4 ML/28 Days |
| RETACRIT 4000UNIT/ML INJ | 3 | PA QL=12 ML/28 Days |
| **IMMUNOLOGICAL AGENTS** | | |
| **ANGIOEDEMA (HAE) AGENTS** | | |
| HAEGARDA 2000UNIT INJ | 5 | NDS PA QL=30 EA/30 Days |
| HAEGARDA 3000UNIT INJ | 5 | NDS PA QL=20 EA/30 Days |
| *icatibant 30mg/3ml syringe* | 5 | NDS PA QL=27 ML/30 Days |
| **IMMUNE SUPPRESSANTS** | | |
| *azathioprine 50mg tab* | 2 | PA_BvD |
| *cyclosporine 100mg cap* | 2 | PA_BvD |
| *cyclosporine 25mg cap* | 2 | PA_BvD |
| *cyclosporine modified 100mg cap* | 2 | PA_BvD |
| *cyclosporine modified 100mg/ml oral soln* | 2 | PA_BvD |
| *cyclosporine modified 25mg cap* | 2 | PA_BvD |
| *cyclosporine modified 50mg cap* | 2 | PA_BvD |
| ENVARSUS XR 0.75MG TAB | 4 | PA_BvD |
| ENVARSUS XR 1MG TAB | 4 | PA_BvD |
| ENVARSUS XR 4MG TAB | 4 | PA_BvD |
| *everolimus 0.25mg tab* | 2 | PA_BvD QL=60 EA/30 Days |
| *everolimus 0.5mg tab* | 5 | NDS PA_BvD QL=120 EA/30 Days |
| *everolimus 0.75mg tab* | 5 | NDS PA_BvD QL=60 EA/30 Days |
| *everolimus 1mg tab* | 5 | NDS PA_BvD QL=60 EA/30 Days |
| *mycophenolate mofetil 200mg/ml oral susp* | 2 | PA_BvD |
| *mycophenolate mofetil 250mg cap* | 2 | PA_BvD |
| *mycophenolate mofetil 500mg tab* | 2 | PA_BvD |
| *mycophenolic acid 180mg dr tab* | 2 | PA_BvD |
| *mycophenolic acid 360mg dr tab* | 2 | PA_BvD |
| PROGRAF 0.2MG GRANULES FOR ORAL SUSP | 4 | PA_BvD |
| PROGRAF 1MG GRANULES FOR ORAL SUSP | 4 | PA_BvD |
| *sirolimus 0.5mg tab* | 2 | PA_BvD |
| *sirolimus 1mg tab* | 2 | PA_BvD |
| *sirolimus 1mg/ml oral soln* | 2 | PA_BvD |
| *sirolimus 2mg tab* | 2 | PA_BvD |
| *tacrolimus 0.5mg cap* | 2 | PA_BvD |
| *tacrolimus 1mg cap* | 2 | PA_BvD |
| *tacrolimus 5mg cap* | 2 | PA_BvD |
| **IMMUNIZING AGENTS, PASSIVE** | | |
| GAMMAGARD 10GM INJ | 5 | NDS PA |
| GAMMAGARD 10GM/100ML INJ | 5 | NDS PA |
| GAMMAGARD 2.5GM/25ML INJ | 5 | NDS PA |
| GAMMAGARD 5GM INJ | 5 | NDS PA |
| GAMMAGARD 5GM/50ML INJ | 5 | NDS PA |
| GAMMAGARD ERC 10GM/100ML INJ | 5 | NDS PA |
| GAMMAGARD ERC 5GM/50ML INJ | 5 | NDS PA |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| GAMUNEX 1GM/10ML INJ | 5 | NDS PA |
| PRIVIGEN 20GM/200ML INJ | 5 | NDS PA |
| **VACCINES** | | |
| ABRYSVO 120MCG/0.5ML INJ | 3 | QL=1 EA/365 DaysVAC |
| ACTHIB INJ | 3 | |
| ADACEL INJ | 3 | VAC |
| ADACEL SYRINGE | 3 | VAC |
| AREXVY 120MCG/0.5ML INJ | 3 | QL=1 EA/999 DaysVAC |
| BCG LIVE TICE STRAIN 50MG INJ | 3 | VAC |
| BEXSERO SYRINGE | 3 | VAC |
| BOOSTRIX SYRINGE | 3 | VAC |
| DAPTACEL INJ | 3 | |
| ENGERIX-B 10MCG/0.5ML SYRINGE | 3 | PA_BvD VAC |
| ENGERIX-B 20MCG/ML INJ | 3 | PA_BvD VAC |
| ENGERIX-B 20MCG/ML SYRINGE | 3 | PA_BvD VAC |
| GARDASIL 9 INJ | 3 | VAC |
| GARDASIL 9 SYRINGE | 3 | VAC |
| HAVRIX 1440ELU/ML SYRINGE | 3 | VAC |
| HAVRIX 720ELU/0.5ML SYRINGE | 3 | |
| HEPLISAV-B 20MCG/0.5ML SYRINGE | 3 | PA_BvD VAC |
| HIBERIX 10MCG INJ | 3 | |
| IMOVAX 2.5UNIT/ML INJ | 3 | PA_BvD VAC |
| INFANRIX SYRINGE | 3 | |
| IPOL INJ | 3 | VAC |
| IXIARO 0.006MG/0.5ML SYRINGE | 3 | VAC |
| JYNNEOS 0.5ML INJ | 3 | PA_BvD VAC |
| KINRIX SYRINGE | 3 | |
| M-M-R II INJ | 3 | VAC |
| MENQUADFI INJ | 3 | VAC |
| MENVEO INJ | 3 | VAC |
| MRESVIA 50MCG/0.5ML SYRINGE | 3 | QL=.50 ML/999 DaysVAC |
| PEDIARIX SYRINGE | 3 | |
| PEDVAXHIB 7.5MCG/0.5ML INJ | 3 | |
| PENBRAYA INJ | 3 | VAC |
| PENMENVY INJ | 3 | VAC |
| PENTACEL INJ | 3 | |
| PRIORIX INJ | 3 | VAC |
| PROQUAD INJ | 3 | |
| QUADRACEL INJ | 3 | |
| QUADRACEL SYRINGE | 3 | |
| RABAVERT 2.5UNIT/ML INJ | 3 | PA_BvD VAC |
| RECOMBIVAX 10MCG/ML INJ | 3 | PA_BvD VAC |
| RECOMBIVAX 40MCG/ML INJ | 3 | PA_BvD VAC |
| RECOMBIVAX 5MCG/0.5ML INJ | 3 | PA_BvD VAC |
| RECOMBIVAX HB 10MCG/ML SYRINGE | 3 | PA_BvD VAC |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| RECOMBIVAX HB 5MCG/0.5ML SYRINGE | 3 | PA_BvD VAC |
| ROTARIX 667000UNIT/ML ORAL SUSP | 3 | |
| ROTATEQ ORAL SUSP | 3 | |
| SHINGRIX 50MCG/0.5ML INJ | 3 | QL=2 EA/999 DaysVAC |
| SHINGRIX 50MCG/0.5ML SYRINGE | 3 | QL=1 ML/999 DaysVAC |
| TENIVAC 4-10UNIT/ML INJ | 3 | PA_BvD VAC |
| TENIVAC 4-10UNIT/ML SYRINGE | 3 | PA_BvD VAC |
| TICOVAC 1.2MCG/0.25ML SYRINGE | 3 | |
| TICOVAC 2.4MCG/0.5ML SYRINGE | 3 | VAC |
| TRUMENBA SYRINGE | 3 | VAC |
| TWINRIX SYRINGE | 3 | VAC |
| TYPHIM VI 25MCG/0.5ML SYRINGE | 3 | VAC |
| VAQTA 25UNIT/0.5ML INJ | 3 | |
| VAQTA 25UNIT/0.5ML SYRINGE | 3 | |
| VAQTA 50UNIT/ML INJ | 3 | VAC |
| VAQTA 50UNIT/ML SYRINGE | 3 | VAC |
| VARIVAX 1350PFU/0.5ML INJ | 3 | VAC |
| VAXCHORA ORAL SUSP | 3 | VAC |
| VIMKUNYA 40MCG/0.8ML SYRINGE | 3 | VAC |
| VIVOTIF DR CAP | 3 | VAC |
| YF-VAX INJ | 3 | VAC |
| **INFLAMMATORY BOWEL DISEASE AGENTS** | | |
| **AMINOSALICYLATES** | | |
| *balsalazide disodium 750mg cap* | 2 | |
| *mesalamine 1200mg dr tab* | 2 | QL=120 EA/30 Days |
| *mesalamine 1gm rectal supp* | 2 | QL=30 EA/30 Days |
| *mesalamine 375mg er cap* | 2 | QL=120 EA/30 Days |
| MESALAMINE 400MG DR CAP | 2 | QL=180 EA/30 Days |
| *mesalamine 66.7mg/ml enema* | 2 | QL=1800 ML/30 Days |
| *sulfasalazine 500mg dr tab* | 2 | |
| *sulfasalazine 500mg tab* | 2 | |
| **MEDICAL DEVICES AND SUPPLIES** | | |
| **DIABETIC SUPPLIES** | | |
| ALCOHOL SWAB 1X1 (INSULIN USE) | 2 | |
| GAUZE PAD 2x2 (INSULIN USE) | 2 | |
| INSULIN PEN NEEDLE | 2 | |
| INSULIN SYRINGE | 2 | |
| INSULIN SYRINGE (DISP) U-100 0.3ML | 2 | |
| INSULIN SYRINGE (DISP) U-100 1/2ML | 2 | |
| INSULIN SYRINGE (DISP) U-100 1ML | 2 | |
| **MIGRAINE PRODUCTS** | | |
| **MIGRAINE PRODUCTS** | | |
| AIMOVIG 140MG/ML AUTO-INJECTOR | 3 | PA QL=1 ML/30 Days |
| AIMOVIG 70MG/ML AUTO-INJECTOR | 3 | PA QL=1 ML/30 Days |
| *dihydroergotamine mesylate 0.5mg/act nasal inhaler* | 2 | PA QL=16 ML/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| EMGALITY 100MG/ML SYRINGE | 3 | PA QL=3 ML/30 Days |
| EMGALITY 120MG/ML AUTO-INJECTOR | 3 | PA QL=2 ML/30 Days |
| EMGALITY 120MG/ML SYRINGE | 3 | PA QL=2 ML/30 Days |
| *naratriptan 1mg tab* | 2 | QL=18 EA/30 Days |
| *naratriptan 2.5mg tab* | 2 | QL=18 EA/30 Days |
| QULIPTA 10MG TAB | 4 | PA QL=30 EA/30 Days |
| QULIPTA 30MG TAB | 4 | PA QL=30 EA/30 Days |
| QULIPTA 60MG TAB | 4 | PA QL=30 EA/30 Days |
| *rizatriptan 10mg odt* | 1 | QL=36 EA/60 Days |
| *rizatriptan 10mg tab* | 1 | QL=36 EA/60 Days |
| *rizatriptan 5mg odt* | 1 | QL=36 EA/60 Days |
| *rizatriptan 5mg tab* | 1 | QL=36 EA/60 Days |
| *sumatriptan 100mg tab* | 1 | QL=18 EA/30 Days |
| *sumatriptan 20mg/act nasal spray* | 2 | QL=12 EA/30 Days |
| *sumatriptan 25mg tab* | 1 | QL=18 EA/30 Days |
| *sumatriptan 50mg tab* | 1 | QL=18 EA/30 Days |
| *sumatriptan 5mg/act nasal spray* | 2 | QL=12 EA/30 Days |
| *sumatriptan 6mg/0.5ml auto-injector* | 2 | QL=5 ML/30 Days |
| *sumatriptan 6mg/0.5ml inj* | 2 | QL=5 ML/30 Days |
| UBRELVY 100MG TAB | 3 | PA QL=16 EA/30 Days |
| UBRELVY 50MG TAB | 3 | PA QL=16 EA/30 Days |
| ZAVZPRET 10MG/ACT NASAL SPRAY | 3 | PA QL=6 EA/30 Days |
| *zolmitriptan 2.5mg tab* | 2 | QL=18 EA/30 Days |
| *zolmitriptan 5mg tab* | 2 | QL=18 EA/30 Days |
| **MISCELLANEOUS THERAPEUTIC AGENTS** | | |
| **MISCELLANEOUS THERAPEUTIC AGENTS** | | |
| *calcium acetate 667mg cap* | 1 | QL=360 EA/30 Days |
| CREON 120000-24000-76000UNIT DR CAP | 3 | |
| CREON 15000-3000-9500UNIT DR CAP | 3 | |
| CREON 180000-36000-114000UNIT DR CAP | 3 | |
| CREON 30000-6000-19000UNIT DR CAP | 3 | |
| CREON 60000-12000-38000UNIT DR CAP | 3 | |
| *cromolyn sodium 20mg/ml oral soln* | 2 | |
| DROXIA 200MG CAP | 3 | |
| DROXIA 300MG CAP | 3 | |
| DROXIA 400MG CAP | 3 | |
| EVRYSDI 0.75MG/ML ORAL SOLN | 5 | NDS PA QL=240 ML/30 Days |
| EVRYSDI 5MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| *kionex 15gm/60ml oral susp* | 2 | |
| *l-glutamine 5gm powder for oral soln* | 5 | NDS PA QL=180 EA/30 Days |
| LOKELMA 10GM POWDER FOR ORAL SUSP | 3 | QL=90 EA/30 Days |
| LOKELMA 5GM POWDER FOR ORAL SUSP | 3 | QL=30 EA/30 Days |
| RADICAVA 105MG/5ML ORAL SUSP | 5 | NDS PA QL=70 ML/28 Days |
| REZDIFFRA 100MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| REZDIFFRA 60MG TAB | 5 | NDS PA QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| REZDIFFRA 80MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| REZUROCK 200MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| RHAPSIDO 25MG TAB | 5 | NDS PA QL=60 EA/30 Days |
| *riluzole 50mg tab* | 2 | QL=60 EA/30 Days |
| *sevelamer carbonate 800mg tab* | 2 | QL=510 EA/30 Days |
| *sodium polystyrene sulfonate 15000mg powder for oral susp* | 2 | |
| *sodium polystyrene sulfonate 15gm/60ml oral susp* | 2 | |
| *sps 15gm/60ml oral susp* | 2 | |
| *tranexamic acid 650mg tab* | 2 | QL=30 EA/5 Days |
| *ursodiol 250mg tab* | 2 | |
| *ursodiol 300mg cap* | 2 | |
| *ursodiol 500mg tab* | 2 | |
| VELSIPITY 2MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| VOWST 30000000UNIT CAP | 5 | PA QL=12 EA/90 Days |
| ZENPEP 105000-25000-79000UNIT DR CAP | 3 | |
| ZENPEP 14000-3000-10000UNIT DR CAP | 3 | |
| ZENPEP 24000-5000-17000UNIT DR CAP | 3 | |
| ZENPEP 252600-60000-189600UNIT DR CAP | 3 | |
| ZENPEP 40000-126000-168000UNIT DR CAP | 3 | |
| ZENPEP 42000-10000-32000UNIT DR CAP | 3 | |
| ZENPEP 63000-15000-47000UNIT DR CAP | 3 | |
| ZENPEP 84000-20000-63000UNIT DR CAP | 3 | |
| **NASAL AGENTS - SYSTEMIC AND TOPICAL** | | |
| **NASAL ANTIALLERGY** | | |
| *azelastine 0.1% (137mcg/act) nasal inhaler* | 1 | QL=60 ML/30 Days |
| *flunisolide 0.025% (25mcg/act) nasal inhaler* | 2 | QL=50 ML/30 Days |
| *fluticasone propionate 50mcg/act nasal inhaler* | 1 | QL=32 GM/30 Days |
| *ipratropium bromide 0.03% (0.021mg/act) nasal inhaler* | 2 | QL=30 ML/30 Days |
| *ipratropium bromide 0.06% (0.042mg/act) nasal inhaler* | 2 | QL=45 ML/30 Days |
| *olopatadine 0.6% (0.665mg/act) nasal inhaler* | 2 | QL=30.50 GM/30 Days |
| **NUTRIENTS** | | |
| **MISC. NUTRITIONAL SUBSTANCES** | | |
| CLINIMIX 4.25/10 INJ | 3 | PA_BvD |
| CLINIMIX 4.25/5 INJ | 3 | PA_BvD |
| CLINIMIX 5/15 INJ | 3 | PA_BvD |
| CLINIMIX 5/20 INJ | 3 | PA_BvD |
| *clinisol 15% inj* | 2 | PA_BvD |
| DEXTROSE 10% INJ | 2 | PA_BvD |
| DOJOLVI 100% ORAL SOLN | 5 | NDS PA |
| *electrolyte-148 inj* | 2 | |
| *glucose 50mg/ml inj* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj* | 2 | |
| GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ | 2 | |
| *glucose 50mg/ml/sodium chloride 4.5mg/ml inj* | 2 | |
| *glucose 50mg/ml/sodium chloride 9mg/ml inj* | 2 | |
| *glucose/potassium chloride/sodium chloride 5%-10meq-0.45% inj* | 2 | |
| *glucose/potassium chloride/sodium chloride 5%-40meq-0.45% inj* | 2 | |
| GLUCOSE/SODIUM CHLORIDE 10%-0.2% INJ | 3 | PA_BvD |
| GLUCOSE/SODIUM CHLORIDE 10%-0.45% INJ | 3 | PA_BvD |
| GLUCOSE/SODIUM CHLORIDE 2.5%-0.45% INJ | 2 | |
| INTRALIPID 20% INJ | 2 | PA_BvD |
| INTRALIPID 30% INJ | 4 | PA_BvD |
| *kcl/nacl 20meq-0.9% inj* | 2 | |
| *klor-con 10meq er tab* | 1 | |
| *klor-con 10meq micro er tab* | 1 | |
| *klor-con 15meq micro er tab* | 1 | |
| *klor-con 20meq micro er tab* | 1 | |
| *klor-con 20meq powder for oral soln* | 2 | |
| *klor-con 8meq er tab* | 1 | |
| *magnesium sulfate 500mg/ml inj* | 2 | |
| *magnesium sulfate 500mg/ml syringe* | 2 | |
| NUTRILIPID 20% INJ | 2 | PA_BvD |
| *plenamine 15% inj* | 2 | PA_BvD |
| *potassium chloride 1.33meq/ml oral soln* | 2 | |
| *potassium chloride 10meq er cap* | 1 | |
| *potassium chloride 10meq er tab* | 1 | |
| *potassium chloride 10meq micro er tab* | 1 | |
| POTASSIUM CHLORIDE 10MEQ/100ML INJ | 2 | |
| POTASSIUM CHLORIDE 15MEQ ER TAB | 1 | |
| *potassium chloride 15meq micro er tab* | 1 | |
| *potassium chloride 2.67meq/ml oral soln* | 2 | |
| *potassium chloride 20meq er tab* | 1 | |
| *potassium chloride 20meq micro er tab* | 1 | |
| *potassium chloride 20meq powder for oral soln* | 2 | |
| POTASSIUM CHLORIDE 20MEQ/100ML INJ | 2 | |
| *potassium chloride 2meq/ml (20ml) inj* | 2 | |
| *potassium chloride 2meq/ml inj* | 2 | |
| *potassium chloride 8meq er cap* | 1 | |
| *potassium chloride 8meq er tab* | 1 | |
| *potassium chloride/sodium chloride 20meq-0.45% inj* | 2 | |
| *potassium chloride/sodium chloride 40meq-0.9% inj* | 2 | |
| PROSOL 20% INJ | 4 | PA_BvD |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *sodium chloride 0.45% inj* | 2 | |
| *sodium chloride 0.9% inj* | 2 | |
| *sodium chloride 3% inj* | 2 | |
| *sodium chloride 50mg/ml inj* | 2 | |
| TPN ELECTROLYTES INJ | 2 | PA_BvD |
| TRAVASOL 10% INJ | 3 | PA_BvD |
| **OBSTETRICAL AND GYNECOLOGICAL MEDICATIONS** | | |
| **CONTRACEPTIVES** | | |
| *altavera tab 28-day pack* | 2 | |
| *alyacen 1/35 tab 28-day pack* | 2 | |
| *apri tab 28-day pack* | 2 | |
| ARANELLE TAB 28-DAY PACK | 2 | |
| *ashlyna tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *aubra tab 28-day pack* | 2 | |
| *aviane tab 28-day pack* | 2 | |
| *azurette tab 28-day pack* | 2 | |
| *blisovi 21 fe tab 1.5/30 28-day pack* | 2 | |
| *camila 0.35mg tab 28-day pack* | 2 | |
| *camrese lo tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *cryselle tab 28-day pack* | 2 | |
| *cyred tab 28-day pack* | 2 | |
| *deblitane 0.35mg tab 28-day pack* | 2 | |
| DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE | 3 | QL=.65 ML/84 Days |
| *drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack* | 2 | |
| *drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack* | 2 | |
| *eluryng 0.120-0.015mg/24hr vaginal system* | 2 | QL=1 EA/28 Days |
| *enilloring 0.120-0.015mg/24hr vaginal system* | 2 | QL=1 EA/28 Days |
| *enskyce tab 28-day pack* | 2 | |
| *errin 0.35mg tab 28-day pack* | 2 | |
| *estarylla tab 28-day pack* | 2 | |
| *ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system* | 2 | QL=1 EA/28 Days |
| *ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack* | 2 | |
| *ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack* | 2 | |
| *ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25mg-mcg tab 28-day pack* | 2 | |
| *ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35mg-mcg tab 28-day pack* | 2 | |
| *falmina tab 28-day pack* | 2 | |
| *feirza 1.5/30 tab 28-day pack* | 2 | |
| *feirza 1/20 tab 28-day pack* | 2 | |
| *hailey fe 1/20 tab 28-day pack* | 2 | |
| *heather 0.35mg tab 28-day pack* | 2 | |
| *iclevia tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *incassia 0.35mg tab 28-day pack* | 2 | |
| *introvale tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *isibloom tab 28-day pack* | 2 | |
| *jaimiess tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *jasmiel tab 28-day pack* | 2 | |
| *juleber tab 28-day pack* | 2 | |
| *junel 1.5/30 tab 21-day pack* | 2 | |
| *junel 1/20 tab 21-day pack* | 2 | |
| *junel fe 1.5/30 tab 28-day pack* | 2 | |
| *junel fe tab 1/20 28-day pack* | 2 | |
| *kariva tab 28-day pack* | 2 | |
| *kelnor 1/35 tab 28-day pack* | 2 | |
| *kurvelo tab 28-day pack* | 2 | |
| *larin 1.5/30 tab 21-day pack* | 2 | |
| *larin 1/20 tab 21-day pack* | 2 | |
| *larin fe 1.5/30 tab 28-day pack* | 2 | |
| *larin fe tab 1/20 28-day pack* | 2 | |
| *lessina tab 28-day pack* | 2 | |
| *levonest tab 28-day pack* | 2 | |
| *levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack* | 2 | |
| LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM | 3 | |
| *lo jaimiess tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *loryna tab 28-day pack* | 2 | |
| *low-ogestrel tab 28-day pack* | 2 | |
| *luizza 1.5/30 tab 21-day pack* | 2 | |
| *luizza 1/20 tab 21-day pack* | 2 | |
| *lyleq 0.35mg tab 28-day pack* | 2 | |
| *lyza 0.35mg tab 28-day pack* | 2 | |
| *marlissa tab 28-day pack* | 2 | |
| *medroxyprogesterone acetate 150mg/ml inj* | 2 | QL=1 ML/90 Days |
| *medroxyprogesterone acetate 150mg/ml syringe* | 2 | QL=1 ML/90 Days |
| *meleya 0.35mg tab 28-day pack* | 2 | |
| *microgestin 1.5/30 tab 21-day pack* | 2 | |
| *microgestin 1/20 tab 21-day pack* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *microgestin fe 1.5/30 tab 28-day pack* | 2 | |
| *microgestin fe 1/20 tab 28-day pack* | 2 | |
| *mili tab 28-day pack* | 2 | |
| *necon 0.5/35 tab 28-day pack* | 2 | |
| NEXPLANON 68MG IMPLANT | 3 | |
| *nikki tab 28-day pack* | 2 | |
| *nora-be 0.35mg tab 28-day pack* | 2 | |
| *norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch* | 2 | QL=3 EA/28 Days |
| *norethindrone 0.35mg tab 28-day pack* | 2 | |
| *nortrel 0.5/35 tab 28-day pack* | 2 | |
| *nortrel 1/35 tab 21-day pack* | 2 | |
| *nortrel 1/35 tab 28-day pack* | 2 | |
| *nortrel 7/7/7 tab 28-day pack* | 2 | |
| *nylia 1/35 tab 28-day pack* | 2 | |
| *nylia 7/7/7 tab 28-day pack* | 2 | |
| *orquidea 0.35mg tab 28-day pack* | 2 | |
| *pimtrea tab 28-day pack* | 2 | |
| *portia tab 28-day pack* | 2 | |
| *reclipsen tab 28-day pack* | 2 | |
| *setlakin tab 91-day pack* | 2 | QL=91 EA/91 Days |
| *sharobel 0.35mg tab 28-day pack* | 2 | |
| *sprintec tab 28-day pack* | 2 | |
| *syeda tab 28-day pack* | 2 | |
| *tarina fe 1/20 tab 28-day pack* | 2 | |
| *tri-estarylla tab 28-day pack* | 2 | |
| *tri-lo-estarylla tab 28-day pack* | 2 | |
| *tri-lo-sprintec tab 28-day pack* | 2 | |
| *tri-mili tab 28-day pack* | 2 | |
| *tri-sprintec tab 28-day pack* | 2 | |
| *tri-vylibra lo tab 28-day pack* | 2 | |
| *tri-vylibra tab 28-day pack* | 2 | |
| *turqoz tab 28-day pack* | 2 | |
| *valtya 1/35 tab 28-day pack* | 2 | |
| VALTYA 1/50 TAB 28-DAY PACK | 2 | |
| VELIVET TAB 28-DAY PACK | 2 | |
| *vestura tab 3-0.02mg 28-day pack* | 2 | |
| *vienva tab 28-day pack* | 2 | |
| *viorele tab 28-day pack* | 2 | |
| *vylibra tab 28-day pack* | 2 | |
| *xulane 150-35mcg/24hr patch* | 2 | QL=3 EA/28 Days |
| *zafemy 150-35mcg/24hr patch* | 2 | QL=3 EA/28 Days |
| *zovia 1/35 tab 28-day pack* | 2 | |
| **ESTROGEN DRUGS** | | |
| *abigale 1/0.5mg tab 28-day pack* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *abigale lo 0.5/0.1mg tab 28-day pack* | 2 | |
| *conjugated estrogens 0.3mg tab* | 2 | |
| *conjugated estrogens 0.45mg tab* | 2 | |
| *conjugated estrogens 0.625mg tab* | 2 | |
| *conjugated estrogens 0.9mg tab* | 2 | |
| *conjugated estrogens 1.25mg tab* | 2 | |
| *dotti 0.025mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *dotti 0.0375mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *dotti 0.05mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *dotti 0.075mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *dotti 0.1mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.01% vaginal cream* | 1 | |
| *estradiol 0.01mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.025mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.025mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.0375mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.0375mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.05mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.05mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.06mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.075mg/24hr twice weekly patch* | 2 | QL=8 EA/28 Days |
| *estradiol 0.075mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.1% (0.25mg/0.25gm) topical gel* | 2 | QL=30 EA/30 Days |
| *estradiol 0.1% (0.5mg/0.5gm) topical gel* | 2 | QL=30 EA/30 Days |
| *estradiol 0.1% (0.75mg/0.75gm) topical gel* | 2 | QL=30 EA/30 Days |
| *estradiol 0.1% (1.25mg/1.25gm) topical gel* | 2 | QL=37.50 GM/30 Days |
| *estradiol 0.1% (1mg/gm) topical gel* | 2 | QL=30 GM/30 Days |
| *estradiol 0.1mg/24hr weekly patch* | 2 | QL=4 EA/28 Days |
| *estradiol 0.5mg tab* | 1 | |
| *estradiol 10mcg vaginal insert* | 2 | |
| *estradiol 1mg tab* | 1 | |
| *estradiol 2mg tab* | 1 | |
| *estradiol valerate 10mg/ml inj* | 2 | |
| *estradiol valerate 20mg/ml inj* | 2 | |
| *estradiol valerate 40mg/ml inj* | 2 | |
| *estradiol/norethindrone acetate 0.5-0.1mg tab 28-day pack* | 2 | |
| *estradiol/norethindrone acetate 1-0.5mg 28-day pack* | 2 | |
| *ethinyl estradiol/norethindrone acetate 0.0025-0.5mg tab 28 day-pack* | 2 | |
| *ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack* | 2 | |
| *fyavolv 0.0025-0.5mg tab* | 2 | |
| *fyavolv 0.005-1mg tab* | 2 | |
| *jinteli 0.005-1mg tab* | 2 | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *mimvey tab 28-day pack* | 2 | |
| PREMARIN 0.625MG/GM VAGINAL CREAM | 3 | |
| PREMPHASE TAB 28-DAY PACK | 3 | |
| PREMPRO 0.3/1.5MG TAB 28-DAY PACK | 3 | |
| PREMPRO 0.45/1.5MG TAB 28-DAY PACK | 3 | |
| PREMPRO 0.625/2.5MG TAB 28-DAY PACK | 3 | |
| PREMPRO 0.625/5MG TAB 28-DAY PACK | 3 | |
| *yuvafem 10mcg vaginal insert* | 2 | |
| **PROGESTIN DRUGS** | | |
| *gallifrey 5mg tab* | 2 | |
| *medroxyprogesterone acetate 10mg tab* | 1 | |
| *medroxyprogesterone acetate 2.5mg tab* | 1 | |
| *medroxyprogesterone acetate 5mg tab* | 1 | |
| MEGESTROL ACETATE 125MG/ML ORAL SUSP | 2 | PA |
| *norethindrone acetate 5mg tab* | 2 | |
| *progesterone 100mg cap* | 2 | |
| *progesterone 200mg cap* | 2 | |
| **OPHTHALMIC AGENTS** | | |
| **BETA-BLOCKERS - OPHTHALMIC** | | |
| BETAXOLOL 0.5% OPHTH SOLN | 2 | |
| *brimonidine tartrate/timolol maleate 0.2-0.5% ophth soln* | 2 | |
| CARTEOLOL 1% OPHTH SOLN | 1 | |
| *dorzolamide/timolol 22.3-6.8mg/ml ophth soln* | 1 | |
| LEVOBUNOLOL 0.5% OPHTH SOLN | 1 | |
| *timolol 0.25% ophth gel* | 2 | |
| *timolol 0.25% ophth soln* | 1 | |
| *timolol 0.5% ophth gel* | 2 | |
| *timolol 0.5% ophth soln* | 1 | |
| **OPHTHALMIC ADRENERGIC AGENTS** | | |
| APRACLONIDINE 0.5% OPHTH SOLN | 2 | |
| *brimonidine tartrate 0.1% ophth soln* | 2 | |
| *brimonidine tartrate 0.15% ophth soln* | 2 | |
| *brimonidine tartrate 0.2% ophth soln* | 1 | |
| SIMBRINZA 0.2-1% OPHTH SUSP | 3 | QL=16 ML/30 Days |
| **OPHTHALMIC ANTI-INFECTIVES** | | |
| BACITRACIN/POLYMYXIN B 3.5GM OPHTH OINTMENT | 1 | QL=7 GM/7 Days |
| *ciprofloxacin 0.3% ophth soln* | 1 | QL=30 ML/30 Days |
| *erythromycin 0.5% ophth ointment* | 1 | QL=7 GM/7 Days |
| *gentamicin 0.3% ophth soln* | 1 | QL=10 ML/7 Days |
| *moxifloxacin 0.5% ophth soln* | 1 | QL=6 ML/7 Days |
| NATACYN 5% OPHTH SUSP | 3 | QL=15 ML/7 Days |
| NEOMYCIN/BACITRACIN/POLYMYXIN 5MG-400UNIT-10000UNIT OPHTH OINTMENT | 2 | QL=7 GM/7 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN | 2 | QL=10 ML/7 Days |
| *ofloxacin 0.3% ophth soln* | 1 | QL=60 ML/30 Days |
| *polymyxin b/trimethoprim 10000unit/ml-0.1% ophth soln* | 1 | QL=10 ML/7 Days |
| SULFACETAMIDE SODIUM 10% OPHTH SOLN | 1 | QL=15 ML/7 Days |
| *tobramycin 0.3% ophth soln* | 1 | QL=30 ML/30 Days |
| TRIFLURIDINE 1% OPHTH SOLN | 2 | QL=15 ML/7 Days |
| XDEMVY 0.25% OPHTH SOLN | 5 | PA QL=10 ML/42 Days |
| **OPHTHALMIC STEROIDS** | | |
| DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN | 2 | |
| *dexamethasone/neomycin/polymyxin b 0.1% ophth ointment* | 1 | |
| *dexamethasone/neomycin/polymyxin b 0.1% ophth susp* | 1 | |
| *dexamethasone/tobramycin 0.3-0.1% ophth susp* | 2 | |
| *difluprednate 0.05% ophth susp* | 2 | |
| *fluorometholone 0.1% ophth susp* | 2 | |
| *loteprednol etabonate 0.5% ophth gel* | 2 | |
| *loteprednol etabonate 0.5% ophth susp* | 2 | |
| NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCO TISONE 1% OPHTH OINTMENT | 2 | |
| PREDNISOLONE 1% OPHTH SOLN | 2 | |
| *prednisolone acetate 1% ophth susp* | 2 | |
| SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN | 1 | |
| **OPHTHALMICS - MISC.** | | |
| *atropine sulfate 1% ophth soln* | 2 | |
| *azelastine 0.05% ophth soln* | 1 | |
| CROMOLYN SODIUM 4% OPHTH SOLN | 1 | |
| *cyclosporine 0.05% ophth susp* | 2 | QL=60 EA/30 Days |
| CYSTADROPS 0.37% OPHTH SOLN | 5 | NDS PA QL=20 ML/28 Days |
| *diclofenac sodium 0.1% ophth soln* | 1 | QL=20 ML/365 Days |
| *dorzolamide 2% ophth soln* | 1 | |
| FLURBIPROFEN SODIUM 0.03% OPHTH SOLN | 2 | |
| KETOROLAC TROMETHAMINE 0.4% OPHTH SOLN | 2 | QL=20 ML/365 Days |
| *ketorolac tromethamine 0.5% ophth soln* | 1 | |
| MIEBO 1.338GM/ML OPHTH SOLN | 3 | QL=3 ML/30 Days |
| *pilocarpine 1% ophth soln* | 2 | |
| *pilocarpine 2% ophth soln* | 2 | |
| *pilocarpine 4% ophth soln* | 2 | |
| RHOPRESSA 0.02% OPHTH SOLN | 3 | QL=5 ML/30 Days |
| ROCKLATAN 0.02-0.005% OPHTH SOLN | 3 | QL=5 ML/30 Days |
| XIIDRA 5% OPHTH SOLN | 3 | QL=60 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| **PROSTAGLANDINS - OPHTHALMIC** | | |
| *bimatoprost 0.01% ophth soln* | 2 | QL=5 ML/30 Days |
| *bimatoprost 0.03% ophth soln* | 2 | QL=5 ML/30 Days |
| *latanoprost 0.005% ophth soln* | 1 | QL=5 ML/30 Days |
| *travoprost 0.004% ophth soln* | 2 | QL=5 ML/30 Days |
| **OTIC AGENTS** | | |
| **OTIC AGENTS - MISCELLANEOUS** | | |
| *acetic acid 2% otic soln* | 1 | |
| *ciprofloxacin/dexamethasone 0.3-0.1% otic susp* | 2 | QL=7.50 ML/7 Days |
| *fluocinolone acetonide 0.01% otic soln* | 2 | |
| *neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln* | 2 | |
| *neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp* | 2 | |
| *ofloxacin 0.3% otic soln* | 1 | |
| **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.** | | |
| **ANTIDEMENTIA AGENTS** | | |
| *donepezil 10mg odt* | 2 | QL=30 EA/30 Days |
| *donepezil 10mg tab* | 1 | |
| *donepezil 23mg tab* | 2 | QL=30 EA/30 Days |
| *donepezil 5mg odt* | 2 | QL=30 EA/30 Days |
| *donepezil 5mg tab* | 1 | |
| *galantamine 12mg tab* | 2 | QL=60 EA/30 Days |
| *galantamine 4mg tab* | 2 | QL=60 EA/30 Days |
| *galantamine 8mg tab* | 2 | QL=60 EA/30 Days |
| *galantamine hydrobromide 16mg er cap* | 2 | QL=30 EA/30 Days |
| *galantamine hydrobromide 24mg er cap* | 2 | QL=30 EA/30 Days |
| GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN | 2 | QL=200 ML/30 Days |
| *galantamine hydrobromide 8mg er cap* | 2 | QL=30 EA/30 Days |
| LEQEMBI IQLIK 250MG/1.25ML AUTO-INJECTOR | 5 | NDS PA QL=10 ML/28 Days |
| LEQEMBI IQLIK 360MG/1.8ML AUTO-INJECTOR | 5 | NDS PA QL=7.20 ML/28 Days |
| *memantine 10mg tab* | 1 | |
| *memantine 14mg er cap* | 2 | QL=30 EA/30 Days |
| *memantine 21mg er cap* | 2 | QL=30 EA/30 Days |
| *memantine 28mg er cap* | 2 | QL=30 EA/30 Days |
| *memantine 2mg/ml oral soln* | 2 | QL=300 ML/30 Days |
| *memantine 5mg tab* | 1 | |
| *memantine 7mg er cap* | 2 | QL=30 EA/30 Days |
| *rivastigmine 1.5mg cap* | 2 | QL=60 EA/30 Days |
| *rivastigmine 13.3mg/24hr patch* | 2 | QL=30 EA/30 Days |
| *rivastigmine 3mg cap* | 2 | QL=60 EA/30 Days |
| *rivastigmine 4.5mg cap* | 2 | QL=60 EA/30 Days |
| *rivastigmine 4.6mg/24hr patch* | 2 | QL=30 EA/30 Days |
| *rivastigmine 6mg cap* | 2 | QL=60 EA/30 Days |

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| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| *rivastigmine 9.5mg/24hr patch* | 2 | QL=30 EA/30 Days |
| **MOVEMENT DISORDER DRUG THERAPY** | | |
| AUSTEDO 12MG TAB | 5 | NDS PA QL=120 EA/30 Days |
| AUSTEDO 6MG TAB | 5 | NDS PA QL=120 EA/30 Days |
| AUSTEDO 9MG TAB | 5 | NDS PA QL=120 EA/30 Days |
| AUSTEDO XR 12MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 18MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 24MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 30MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 36MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 42MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 48MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR 6MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATIO PACK (28) | 5 | NDS PA QL=28 EA/28 Days |
| *tetrabenazine 12.5mg tab* | 2 | QL=90 EA/30 Days |
| *tetrabenazine 25mg tab* | 5 | NDS QL=120 EA/30 Days |
| **MULTIPLE SCLEROSIS AGENTS** | | |
| AVONEX 30MCG/0.5ML AUTO-INJECTOR | 5 | NDS QL=1 EA/28 Days |
| AVONEX 30MCG/0.5ML SYRINGE | 5 | NDS QL=1 EA/28 Days |
| BETASERON 0.3MG INJ | 5 | NDS QL=14 EA/28 Days |
| *dalfampridine 10mg er tab* | 2 | QL=60 EA/30 Days |
| *dimethyl fumarate 120mg dr cap* | 2 | QL=14 EA/7 Days |
| *dimethyl fumarate 120mg/240mg cap starter pack (60)* | 2 | QL=60 EA/180 Days |
| *dimethyl fumarate 240mg dr cap* | 2 | QL=60 EA/30 Days |
| *fingolimod 0.5mg cap* | 2 | QL=30 EA/30 Days |
| *glatiramer acetate 20mg/ml syringe* | 5 | NDS QL=30 ML/30 Days |
| *glatiramer acetate 40mg/ml syringe* | 5 | NDS QL=12 ML/28 Days |
| *glatopa 20mg/ml syringe* | 5 | NDS QL=30 ML/30 Days |
| *glatopa 40mg/ml syringe* | 5 | NDS QL=12 ML/28 Days |
| KESIMPTA 20MG/0.4ML PEN INJ | 5 | NDS QL=1.20 ML/28 Days |
| MAYZENT 0.25MG TAB | 5 | NDS QL=112 EA/28 Days |
| MAYZENT 1MG TAB | 5 | NDS QL=30 EA/30 Days |
| MAYZENT 2MG TAB | 5 | NDS QL=30 EA/30 Days |
| MAYZENT TAB STARTER PACK (12) | 3 | QL=12 EA/28 Days |
| MAYZENT TAB STARTER PACK (7) | 3 | QL=7 EA/28 Days |
| PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR | 5 | NDS QL=1 ML/28 Days |
| PLEGRIDY 125MCG/0.5ML SYRINGE | 5 | NDS QL=1 ML/28 Days |
| *teriflunomide 14mg tab* | 2 | QL=30 EA/30 Days |
| *teriflunomide 7mg tab* | 2 | QL=30 EA/30 Days |
| **PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.** | | |
| *dextromethorphan hydrobromide/quinidine sulfate 20-10mg cap* | 2 | PA QL=60 EA/30 Days |
| LYBALVI 10-10MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LYBALVI 15-10MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| LYBALVI 20-10MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| LYBALVI 5-10MG TAB | 5 | NDS PA_NSO QL=30 EA/30 Days |
| *pimozide 1mg tab* | 2 | |
| *pimozide 2mg tab* | 2 | |
| **RESPIRATORY TRACT AGENTS** | | |
| **ANTIHISTAMINES** | | |
| *cyproheptadine 0.4mg/ml oral soln* | 1 | |
| *cyproheptadine 4mg tab* | 1 | |
| *desloratadine 5mg tab* | 2 | |
| *levocetirizine 5mg tab* | 1 | |
| *promethazine 1.25mg/ml oral soln* | 1 | |
| *promethazine 12.5mg tab* | 1 | |
| *promethazine 25mg tab* | 1 | |
| *promethazine 50mg tab* | 1 | |
| **ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS** | | |
| ALVESCO 160MCG INHALER | 3 | QL=12.20 GM/30 Days |
| ALVESCO 80MCG INHALER | 3 | QL=12.20 GM/30 Days |
| ARNUITY ELLIPTA 100MCG POWDER INHALER | 3 | QL=30 EA/30 Days |
| ARNUITY ELLIPTA 200MCG POWDER INHALER | 3 | QL=30 EA/30 Days |
| ARNUITY ELLIPTA 50MCG POWDER INHALER | 3 | QL=30 EA/30 Days |
| ASMANEX 100MCG HFA INHALER | 3 | QL=13 GM/30 Days |
| ASMANEX 110MCG (30ACT) TWISTHALER | 3 | QL=1 EA/30 Days |
| ASMANEX 200MCG HFA INHALER | 3 | QL=13 GM/30 Days |
| ASMANEX 220MCG (120ACT) TWISTHALER | 3 | QL=1 EA/30 Days |
| ASMANEX 220MCG (30ACT) TWISTHALER | 3 | QL=1 EA/30 Days |
| ASMANEX 220MCG (60ACT) TWISTHALER | 3 | QL=1 EA/30 Days |
| ASMANEX 50MCG HFA INHALER | 3 | QL=13 GM/30 Days |
| *budesonide 0.25mg/2ml inh susp* | 2 | PA_BvD QL=120 ML/30 Days |
| *budesonide 0.5mg/2ml inh susp* | 2 | PA_BvD QL=120 ML/30 Days |
| *budesonide 1mg/2ml inh susp* | 2 | PA_BvD QL=120 ML/30 Days |
| QVAR 40MCG REDIHALER | 3 | QL=10.60 GM/30 Days |
| QVAR 80MCG REDIHALER | 3 | QL=21.20 GM/30 Days |
| **ANTILEUKOTRIENES** | | |
| *montelukast 10mg tab* | 1 | |
| *montelukast 4mg chew tab* | 1 | |
| *montelukast 5mg chew tab* | 1 | |
| *zafirlukast 10mg tab* | 2 | QL=60 EA/30 Days |
| *zafirlukast 20mg tab* | 2 | QL=60 EA/30 Days |
| **BRONCHODILATORS, ANTICHOLINERGIC** | | |
| ATROVENT 17MCG HFA INHALER | 3 | QL=25.80 GM/30 Days |
| INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER | 3 | QL=30 EA/30 Days |
| *ipratropium bromide 0.5mg/2.5ml (0.02%) neb soln* | 2 | PA_BvD |
| SPIRIVA RESPIMAT 1.25MCG/ACT INHALER | 3 | QL=4 GM/30 Days |
| **BRONCHODILATORS, SYMPATHOMIMETIC** | | |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| ADVAIR 115-21MCG/ACT HFA INHALER | 3 | QL=12 GM/30 Days |
| ADVAIR 230-21MCG/ACT HFA INHALER | 3 | QL=12 GM/30 Days |
| ADVAIR 45-21MCG/ACT HFA INHALER | 3 | QL=12 GM/30 Days |
| *albuterol 0.63mg/3ml neb soln* | 1 | PA_BvD |
| *albuterol 1.25mg/3ml neb soln* | 1 | PA_BvD |
| *albuterol 108mcg hfa inhaler (6.7gm)* | 1 | QL=13.40 GM/30 Days |
| *albuterol 108mcg hfa inhaler (8.5gm)* | 1 | QL=17 GM/30 Days |
| *albuterol 2.5mg/3ml (0.083%) neb soln* | 1 | PA_BvD |
| *albuterol 2mg/5ml oral soln* | 1 | |
| *albuterol 5mg/ml (0.05%) neb soln* | 1 | PA_BvD |
| ANORO ELLIPTA 62.5-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| *arformoterol tartrate 15mcg/2ml neb soln* | 2 | PA_BvD QL=120 ML/30 Days |
| BREO ELLIPTA 100-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| BREO ELLIPTA 200-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| BREO ELLIPTA 50-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| *breyna 160-4.5mcg/act inhaler* | 3 | QL=10.30 GM/30 Days |
| *breyna 80-4.5mcg/act inhaler* | 3 | QL=10.30 GM/30 Days |
| *budesonide/formoterol fumarate 160-4.5mcg inhaler* | 2 | QL=10.20 GM/30 Days |
| *budesonide/formoterol fumarate 80-4.5mcg inhaler* | 2 | QL=10.20 GM/30 Days |
| COMBIVENT RESPIMAT 20-100MCG/ACT INHALER | 3 | QL=8 GM/30 Days |
| DULERA 100-5MCG INHALER | 3 | QL=13 GM/30 Days |
| DULERA 200-5MCG INHALER | 3 | QL=13 GM/30 Days |
| DULERA 50-5MCG INHALER | 3 | QL=13 GM/30 Days |
| *epinephrine 0.15mg/0.3ml auto-injector (2pack)* | 1 | QL=2 EA/15 Days |
| *epinephrine 0.3mg/0.3ml auto-injector (2pack)* | 1 | QL=2 EA/15 Days |
| FLUTICASONE FUROATE/VILANTEROL 100-25MCG/INH POWDER INHALER | 3 | QL=60 EA/30 Days |
| FLUTICASONE FUROATE/VILANTEROL 200-25MCG/INH POWDER INHALER | 3 | QL=60 EA/30 Days |
| *fluticasone propionate/salmeterol 100-50mcg/act powder inhaler* | 2 | QL=60 EA/30 Days |
| *fluticasone propionate/salmeterol 250-50mcg/act powder inhaler* | 2 | QL=60 EA/30 Days |
| *fluticasone propionate/salmeterol 500-50mcg/act powder inhaler* | 2 | QL=60 EA/30 Days |
| *ipratropium/albuterol 0.5-2.5mg/3ml neb soln* | 1 | PA_BvD |
| STIOLTO RESPIMAT 2.5-2.5MCG/ACT INHALER | 3 | QL=4 GM/30 Days |
| STRIVERDI RESPIMAT 2.5MCG/ACT INHALER | 3 | QL=4 GM/30 Days |
| TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER | 3 | QL=60 EA/30 Days |
| *wixela 100-50mcg powder inhaler* | 2 | QL=60 EA/30 Days |
| *wixela 250-50mcg powder inhaler* | 2 | QL=60 EA/30 Days |
| *wixela 500-50mcg/act powder inhaler* | 2 | QL=60 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| **PULMONARY ANTIHYPERTENSIVES** | | |
| ADEMPAS 0.5MG TAB | 5 | NDS PA QL=90 EA/30 Days |
| ADEMPAS 1.5MG TAB | 5 | NDS PA QL=90 EA/30 Days |
| ADEMPAS 1MG TAB | 5 | NDS PA QL=90 EA/30 Days |
| ADEMPAS 2.5MG TAB | 5 | NDS PA QL=90 EA/30 Days |
| ADEMPAS 2MG TAB | 5 | NDS PA QL=90 EA/30 Days |
| *alyq 20mg tab* | 2 | PA QL=60 EA/30 Days |
| *ambrisentan 10mg tab* | 5 | NDS PA QL=30 EA/30 Days |
| *ambrisentan 5mg tab* | 5 | NDS PA QL=30 EA/30 Days |
| *bosentan 125mg tab* | 5 | NDS PA QL=60 EA/30 Days |
| *bosentan 62.5mg tab* | 5 | NDS PA QL=60 EA/30 Days |
| *macitentan 10mg tab* | 5 | NDS PA QL=30 EA/30 Days |
| *sildenafil 20mg tab* | 2 | PA QL=360 EA/30 Days |
| *tadalafil 20mg tab (pah)* | 2 | PA QL=60 EA/30 Days |
| WINREVAIR 45MG INJ | 5 | NDS PA QL=1 EA/21 Days |
| WINREVAIR 45MG INJ (2 VIAL PACK) | 5 | NDS PA QL=1 EA/21 Days |
| WINREVAIR 60MG INJ | 5 | NDS PA QL=1 EA/21 Days |
| WINREVAIR 60MG INJ (2 VIAL PACK) | 5 | NDS PA QL=1 EA/21 Days |
| **RESPIRATORY TRACT AGENTS, OTHER** | | |
| *acetylcysteine 200mg/ml inh soln* | 2 | PA_BvD |
| *acetylcysteine 400mg/4ml neb soln* | 2 | PA_BvD |
| ALYFTREK 10-50-125MG TAB | 5 | NDS PA QL=56 EA/28 Days |
| ALYFTREK 4-20-50MG TAB | 5 | NDS PA QL=84 EA/28 Days |
| BRINSUPRI 10MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| BRINSUPRI 25MG TAB | 5 | NDS PA QL=30 EA/30 Days |
| *cromolyn sodium 20mg/2ml neb soln* | 2 | PA_BvD |
| KALYDECO 13.4MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| KALYDECO 150MG TAB | 5 | NDS PA QL=60 EA/30 Days |
| KALYDECO 25MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| KALYDECO 5.8MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| KALYDECO 50MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| KALYDECO 75MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| *nintedanib 100mg cap* | 5 | NDS PA QL=60 EA/30 Days |
| *nintedanib 150mg cap* | 5 | NDS PA QL=60 EA/30 Days |
| OFEV 100MG CAP | 5 | NDS PA QL=60 EA/30 Days |
| OFEV 150MG CAP | 5 | NDS PA QL=60 EA/30 Days |
| ORKAMBI 125-100MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| ORKAMBI 125-100MG TAB | 5 | NDS PA QL=112 EA/28 Days |
| ORKAMBI 125-200MG TAB | 5 | NDS PA QL=112 EA/28 Days |
| ORKAMBI 188-150MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| ORKAMBI 94-75MG ORAL GRANULES | 5 | NDS PA QL=56 EA/28 Days |
| *pirfenidone 267mg cap* | 2 | PA QL=270 EA/30 Days |
| *pirfenidone 267mg tab* | 5 | NDS PA QL=270 EA/30 Days |
| *pirfenidone 801mg tab* | 5 | NDS PA QL=90 EA/30 Days |
| PROLASTIN-C 1000MG INJ | 5 | NDS PA |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| DRUG NAME | DRUG TIER | REQUIREMENTS/LIMITS |
|---|---|---|
| PULMOZYME 2.5MG/2.5ML NEB SOLN | 5 | NDS PA_BvD QL=150 ML/30 Days |
| *roflumilast 250mcg tab* | 2 | QL=28 EA/365 Days |
| *roflumilast 500mcg tab* | 2 | QL=30 EA/30 Days |
| SYMDEKO TAB 4-WEEK PACK (56) | 5 | NDS PA QL=56 EA/28 Days |
| SYMDEKO TAB 50-75MG/75MG PACK (56) | 5 | NDS PA QL=56 EA/28 Days |
| THEOPHYLLINE 100MG ER TAB | 2 | |
| THEOPHYLLINE 200MG ER TAB | 2 | |
| *theophylline 300mg er tab* | 2 | |
| *theophylline 400mg er tab* | 2 | |
| *theophylline 450mg er tab* | 2 | |
| *theophylline 600mg er tab* | 2 | |
| TRIKAFTA 100-50-75MG/150MG TAB PACK (84) | 5 | NDS PA QL=84 EA/28 Days |
| TRIKAFTA 100-50-75MG/75MG ORAL GRANULES PACK (56) | 5 | NDS PA QL=56 EA/28 Days |
| TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84) | 5 | NDS PA QL=84 EA/28 Days |
| TRIKAFTA 80-40-60MG/59.5MG ORAL GRANULES PACK (56) | 5 | NDS PA QL=56 EA/28 Days |
| **SLEEP DISORDER AGENTS** | | |
| **GABA RECEPTOR MODULATORS** | | |
| *eszopiclone 1mg tab* | 1 | QL=30 EA/30 Days |
| *eszopiclone 2mg tab* | 1 | QL=30 EA/30 Days |
| *eszopiclone 3mg tab* | 1 | QL=30 EA/30 Days |
| *temazepam 15mg cap* | 1 | QL=30 EA/30 Days |
| *temazepam 30mg cap* | 1 | QL=30 EA/30 Days |
| *zaleplon 10mg cap* | 1 | QL=30 EA/30 Days |
| *zaleplon 5mg cap* | 1 | QL=30 EA/30 Days |
| *zolpidem tartrate 10mg tab* | 1 | PA QL=30 EA/30 Days |
| *zolpidem tartrate 12.5mg er tab* | 2 | PA QL=30 EA/30 Days |
| *zolpidem tartrate 5mg tab* | 1 | PA QL=60 EA/30 Days |
| *zolpidem tartrate 6.25mg er tab* | 2 | PA QL=30 EA/30 Days |
| **SLEEP DISORDERS, OTHER** | | |
| LUMRYZ 4.5GM GRANULES FOR ORAL SUSP | 5 | NDS PA QL=30 EA/30 Days |
| LUMRYZ 6GM GRANULES FOR ORAL SUSP | 5 | NDS PA QL=30 EA/30 Days |
| LUMRYZ 7.5GM GRANULES FOR ORAL SUSP | 5 | NDS PA QL=30 EA/30 Days |
| LUMRYZ 9GM GRANULES FOR ORAL SUSP | 5 | NDS PA QL=30 EA/30 Days |
| LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28) | 5 | NDS PA QL=28 EA/28 Days |
| *ramelteon 8mg tab* | 2 | QL=30 EA/30 Days |
| *sodium oxybate 500mg/ml oral soln* | 5 | NDS PA QL=540 ML/30 Days |
| SUNOSI 150MG TAB | 3 | PA QL=30 EA/30 Days |
| SUNOSI 75MG TAB | 3 | PA QL=30 EA/30 Days |

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

**A**
*abacavir 20mg/ml oral soln* 43
*abacavir 300mg tab* 43
*abacavir/lamivudine 600-300mg tab* 43
*abigale 1/0.5mg tab 28-day pack* 72
*abigale lo 0.5/0.1mg tab 28-day pack* 73
ABILIFY MAINTENA 300MG INJ 42
ABILIFY MAINTENA 300MG/1.5ML SYRINGE 42
ABILIFY MAINTENA 400MG INJ 42
ABILIFY MAINTENA 400MG/2ML SYRINGE 42
*abiraterone acetate 250mg tab* 30
*abirtega 250mg tab* 30
ABRYSVO 120MCG/0.5ML INJ 65
*acamprosate calcium 333mg dr tab* 5
*acarbose 100mg tab* 19
*acarbose 25mg tab* 19
*acarbose 50mg tab* 19
*accutane 10mg cap* 53
*accutane 20mg cap* 53
*accutane 40mg cap* 53
*acebutolol 200mg cap* 48
*acebutolol 400mg cap* 49
ACETAMINOPHEN/CODEINE PHOSPHATE 120-12MG/5ML ORAL SOLN 4
*acetazolamide 125mg tab* 51
*acetazolamide 250mg tab* 51
*acetazolamide 500mg er cap* 51
*acetic acid 2% otic soln* 76
*acetylcysteine 200mg/ml inh soln* 80
*acetylcysteine 400mg/4ml neb soln* 80
*acitretin 10mg cap* 55
*acitretin 17.5mg cap* 55
*acitretin 25mg cap* 55
ACTHIB INJ 65
ACTIMMUNE 2000000UNIT/0.5ML INJ 36
*acyclovir 200mg cap* 45
*acyclovir 400mg tab* 45
*acyclovir 40mg/ml oral susp* 45
*acyclovir 5% topical ointment* 56
*acyclovir 50mg/ml inj* 45
*acyclovir 800mg tab* 45
ADACEL INJ 65
ADACEL SYRINGE 65
*adefovir dipivoxil 10mg tab* 45
ADEMPAS 0.5MG TAB 80
ADEMPAS 1.5MG TAB 80
ADEMPAS 1MG TAB 80
ADEMPAS 2.5MG TAB 80
ADEMPAS 2MG TAB 80
ADVAIR 115-21MCG/ACT HFA INHALER 79
ADVAIR 230-21MCG/ACT HFA INHALER 79
ADVAIR 45-21MCG/ACT HFA INHALER 79
AIMOVIG 140MG/ML AUTO-INJECTOR 66
AIMOVIG 70MG/ML AUTO-INJECTOR 66
AKEEGA 500-100MG TAB 30
AKEEGA 500-50MG TAB 30
*albendazole 200mg tab* 37
*albuterol 0.63mg/3ml neb soln* 79
*albuterol 1.25mg/3ml neb soln* 79
*albuterol 108mcg hfa inhaler (6.7gm)* 79
*albuterol 108mcg hfa inhaler (8.5gm)* 79
*albuterol 2.5mg/3ml (0.083%) neb soln* 79
*albuterol 2mg/5ml oral soln* 79
*albuterol 5mg/ml (0.05%) neb soln* 79
*alclometasone dipropionate 0.05% topical cream* 55
ALCLOMETASONE DIPROPIONATE 0.05% TOPICAL OINTMENT 55
ALCOHOL SWAB 1X1 (INSULIN USE) 66
ALECENSA 150MG CAP 31
*alendronate 10mg tab* 57
*alendronate 35mg tab* 57
*alendronate 70mg tab* 57
*alfuzosin 10mg er tab* 63
*aliskiren 150mg tab* 28
*aliskiren 300mg tab* 28
*allopurinol 100mg tab* 63
*allopurinol 300mg tab* 63
*alosetron 0.5mg tab* 60
*alosetron 1mg tab* 60
*alprazolam 0.25mg tab* 6
*alprazolam 0.5mg tab* 6
*alprazolam 1mg tab* 6
*alprazolam 2mg tab* 6
*altavera tab 28-day pack* 70
ALUNBRIG 180MG TAB 31
ALUNBRIG 30MG TAB 31
ALUNBRIG 90MG TAB 31
ALUNBRIG TAB INITIATION PACK (30) 31

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

ALVESCO 160MCG INHALER 78
ALVESCO 80MCG INHALER 78
*alyacen 1/35 tab 28-day pack* 70
ALYFTREK 10-50-125MG TAB 80
ALYFTREK 4-20-50MG TAB 80
*alyq 20mg tab* 80
*amantadine 100mg cap* 37
*amantadine 10mg/ml oral soln* 37
*ambrisentan 10mg tab* 80
*ambrisentan 5mg tab* 80
*amikacin 250mg/ml inj* 6
*amiloride 5mg tab* 52
AMILORIDE/HYDROCHLOROTHIAZIDE 5-50MG TAB 52
*amiodarone 100mg tab* 48
*amiodarone 200mg tab* 48
*amiodarone 400mg tab* 48
*amitriptyline 100mg tab* 18
*amitriptyline 10mg tab* 18
*amitriptyline 150mg tab* 18
*amitriptyline 25mg tab* 18
*amitriptyline 50mg tab* 18
*amitriptyline 75mg tab* 18
*amlodipine 10mg tab* 50
*amlodipine 2.5mg tab* 50
*amlodipine 5mg tab* 50
*amlodipine/benazepril 10-20mg cap* 26
*amlodipine/benazepril 10-40mg cap* 26
*amlodipine/benazepril 2.5-10mg cap* 27
*amlodipine/benazepril 5-10mg cap* 27
*amlodipine/benazepril 5-20mg cap* 27
*amlodipine/benazepril 5-40mg cap* 27
*amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-12.5-40mg tab* 27
*amlodipine/hydrochlorothiazide/olmesartan medoxomil 10-25-40mg tab* 27
*amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-20mg tab* 27
*amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-12.5-40mg tab* 27
*amlodipine/hydrochlorothiazide/olmesartan medoxomil 5-25-40mg tab* 27
*amlodipine/olmesartan medoxomil 10-20mg tab* 27
*amlodipine/olmesartan medoxomil 10-40mg tab* 27
*amlodipine/olmesartan medoxomil 5-20mg tab* 27
*amlodipine/olmesartan medoxomil 5-40mg tab* 27
*amlodipine/valsartan 10-160mg tab* 27
*amlodipine/valsartan 10-320mg tab* 27
*amlodipine/valsartan 5-160mg tab* 27
*amlodipine/valsartan 5-320mg tab* 27
*ammonium lactate 12% topical cream* 56
*ammonium lactate 12% topical lotion* 56
*amnesteem 10mg cap* 53
*amnesteem 20mg cap* 53
*amnesteem 30mg cap* 53
*amnesteem 40mg cap* 53
*amoxapine 100mg tab* 18
*amoxapine 150mg tab* 18
*amoxapine 25mg tab* 18
*amoxapine 50mg tab* 18
AMOXICILLIN 125MG CHEW TAB 9
*amoxicillin 250mg cap* 9
AMOXICILLIN 250MG CHEW TAB 9
*amoxicillin 25mg/ml oral susp* 9
*amoxicillin 40mg/ml oral susp* 9
*amoxicillin 500mg cap* 9
*amoxicillin 500mg tab* 9
*amoxicillin 50mg/ml oral susp* 9
*amoxicillin 80mg/ml oral susp* 9
*amoxicillin 875mg tab* 9
*amoxicillin/clavulanate 250-125mg tab* 10
*amoxicillin/clavulanate 500-125mg tab* 10
*amoxicillin/clavulanate 875-125mg tab* 10
*amoxicillin/k clavulanate 200-28.5mg/5ml oral susp* 10
*amoxicillin/k clavulanate 250-62.5mg/5ml oral susp* 10
*amoxicillin/k clavulanate 400-57mg/5ml oral susp* 10
*amoxicillin/k clavulanate 600-42.9mg/5ml oral susp* 10
*amphetamine/dextroamphetamine 10mg er cap* 1
*amphetamine/dextroamphetamine 10mg tab* 1


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*amphetamine/dextroamphetamine 12.5mg tab* 1
*amphetamine/dextroamphetamine 15mg er cap* 1
*amphetamine/dextroamphetamine 15mg tab* 1
*amphetamine/dextroamphetamine 20mg er cap* 1
*amphetamine/dextroamphetamine 20mg tab* 1
*amphetamine/dextroamphetamine 25mg er cap* 1
*amphetamine/dextroamphetamine 30mg er cap* 1
*amphetamine/dextroamphetamine 30mg tab* 1
*amphetamine/dextroamphetamine 5mg er cap* 1
*amphetamine/dextroamphetamine 5mg tab* 1
*amphetamine/dextroamphetamine 7.5mg tab* 1
AMPHOTERICIN B 50MG INJ 23
*amphotericin b liposomal 50mg inj* 23
*ampicillin 100mg/ml inj* 10
*ampicillin 1gm inj* 10
*ampicillin 2gm inj* 10
*ampicillin 500mg cap* 10
*ampicillin/sulbactam 1000-500mg inj* 10
*ampicillin/sulbactam 100-50mg/ml inj* 10
*ampicillin/sulbactam 2000-1000mg inj* 10
*anagrelide 0.5mg cap* 11
*anagrelide 1mg cap* 11
*anastrozole 1mg tab* 30
ANORO ELLIPTA 62.5-25MCG POWDER INHALER 79
APRACLONIDINE 0.5% OPHTH SOLN 74
*aprepitant 125mg cap* 22
*aprepitant 125mg/80mg cap therapy pack (3)* 22
*aprepitant 40mg cap* 22
*aprepitant 80mg cap* 22
*apri tab 28-day pack* 70
APTIVUS 250MG CAP 43
ARANELLE TAB 28-DAY PACK 70
ARCALYST 220MG INJ 46
AREXVY 120MCG/0.5ML INJ 65
*arformoterol tartrate 15mcg/2ml neb soln* 79
ARIKAYCE 590MG/8.4ML INH SUSP 6
*aripiprazole 10mg odt* 42
*aripiprazole 10mg tab* 42
*aripiprazole 15mg odt* 42
*aripiprazole 15mg tab* 42
*aripiprazole 1mg/ml oral soln* 42
*aripiprazole 20mg tab* 42
*aripiprazole 2mg tab* 42
*aripiprazole 30mg tab* 42
*aripiprazole 5mg tab* 42
ARISTADA 1064MG/3.9ML SYRINGE 42
ARISTADA 441MG/1.6ML SYRINGE 42
ARISTADA 662MG/2.4ML SYRINGE 42
ARISTADA 882MG/3.2ML SYRINGE 42
ARISTADA INITIO 675MG/2.4ML SYRINGE 42
*armodafinil 150mg tab* 1
*armodafinil 200mg tab* 1
*armodafinil 250mg tab* 1
*armodafinil 50mg tab* 1
ARNUITY ELLIPTA 100MCG POWDER INHALER 78
ARNUITY ELLIPTA 200MCG POWDER INHALER 78
ARNUITY ELLIPTA 50MCG POWDER INHALER 78
*asenapine 10mg sl tab* 40
*asenapine 2.5mg sl tab* 40
*asenapine 5mg sl tab* 40
*ashlyna tab 91-day pack* 70
ASMANEX 100MCG HFA INHALER 78
ASMANEX 110MCG (30ACT) TWISTHALER 78
ASMANEX 200MCG HFA INHALER 78
ASMANEX 220MCG (120ACT) TWISTHALER 78
ASMANEX 220MCG (30ACT) TWISTHALER 78
ASMANEX 220MCG (60ACT) TWISTHALER 78
ASMANEX 50MCG HFA INHALER 78
*aspirin/dipyridamole 25-200mg er cap* 11
*atazanavir 150mg cap* 43
*atazanavir 200mg cap* 43
*atazanavir 300mg cap* 43
*atenolol 100mg tab* 49
*atenolol 25mg tab* 49
*atenolol 50mg tab* 49
*atenolol/chlorthalidone 100-25mg tab* 27
*atenolol/chlorthalidone 50-25mg tab* 27
*atomoxetine 100mg cap* 1
*atomoxetine 10mg cap* 1
*atomoxetine 18mg cap* 1
*atomoxetine 25mg cap* 1
*atomoxetine 40mg cap* 1
*atomoxetine 60mg cap* 1
*atomoxetine 80mg cap* 1
*atorvastatin 10mg tab* 24

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*atorvastatin 20mg tab* 24
*atorvastatin 40mg tab* 24
*atorvastatin 80mg tab* 24
*atovaquone 750mg/5ml oral susp* 37
*atovaquone/proguanil 250-100mg tab* 37
*atovaquone/proguanil 62.5-25mg tab* 37
*atropine sulfate 1% ophth soln* 75
*atropine sulfate/diphenoxylate 0.025-2.5mg tab* 60
ATROVENT 17MCG HFA INHALER 78
ATTRUBY 356MG TAB 51
*aubra tab 28-day pack* 70
AUGTYRO 160MG CAP 31
AUGTYRO 40MG CAP 31
AUSTEDO 12MG TAB 77
AUSTEDO 6MG TAB 77
AUSTEDO 9MG TAB 77
AUSTEDO XR 12MG TAE 77
AUSTEDO XR 18MG TAE 77
AUSTEDO XR 24MG TAE 77
AUSTEDO XR 30MG TAE 77
AUSTEDO XR 36MG TAE 77
AUSTEDO XR 42MG TAE 77
AUSTEDO XR 48MG TAE 77
AUSTEDO XR 6MG TAB 77
AUSTEDO XR TAB ONCE DAILY 4 WEEK TITRATION PACK (28) 77
AUVELITY 105-45MG ER TAB 16
*aviane tab 28-day pack* 70
AVMAPKI/FAKZYNJA CO-PACK (66) 31
AVONEX 30MCG/0.5ML AUTO-INJECTOR 77
AVONEX 30MCG/0.5ML SYRINGE 77
AVTOZMA 162MG/0.9ML AUTO-INJECTOR 46
AVTOZMA 162MG/0.9ML SYRINGE 46
AYVAKIT 100MG TAB 36
AYVAKIT 200MG TAB 36
AYVAKIT 25MG TAB 36
AYVAKIT 300MG TAB 36
AYVAKIT 50MG TAB 36
*azathioprine 50mg tab* 64
*azelaic acid 15% topical gel* 57
*azelastine 0.05% ophth soln* 75
*azelastine 0.1% (137mcg/act) nasal inhaler* 68
*azithromycin 20mg/ml oral susp* 10
*azithromycin 250mg tab* 10
*azithromycin 250mg tab pack (6)* 10
*azithromycin 40mg/ml oral susp* 10
*azithromycin 500mg inj* 10
*azithromycin 500mg tab* 10
*azithromycin 500mg tab pack (3)* 10
*azithromycin 600mg tab* 10
*aztreonam 1gm inj* 6
*aztreonam 2gm inj* 6
*azurette tab 28-day pack* 70

**B**

BACITRACIN/POLYMYXIN B 3.5GM OPHTH OINTMENT 74
*baclofen 10mg tab* 43
*baclofen 20mg tab* 43
*baclofen 5mg tab* 43
*balsalazide disodium 750mg cap* 66
BALVERSA 3MG TAB 31
BALVERSA 4MG TAB 31
BALVERSA 5MG TAB 31
BAQSIMI 3MG/DOSE NASAL POWDER 19
BCG LIVE TICE STRAIN 50MG INJ 65
*benazepril 10mg tab* 25
*benazepril 20mg tab* 25
*benazepril 40mg tab* 25
*benazepril 5mg tab* 25
*benazepril/hydrochlorothiazide 10-12.5mg tab* 27
*benazepril/hydrochlorothiazide 20-12.5mg tab* 27
*benazepril/hydrochlorothiazide 20-25mg tab* 27
*benazepril/hydrochlorothiazide 5-6.25mg tab* 27
BENLYSTA 200MG/ML AUTO-INJECTOR 46
BENLYSTA 200MG/ML SYRINGE 46
*benztropine mesylate 0.5mg tab* 37
*benztropine mesylate 1mg tab* 37
*benztropine mesylate 2mg tab* 37
BESREMI 500MCG/0.5ML PEN INJ 36
BESREMI 500MCG/ML SYRINGE 36
*betamethasone 0.05% aug topical cream* 55
*betamethasone 0.05% aug topical lotion* 55
*betamethasone 0.05% topical cream* 55
*betamethasone 0.05% topical lotion* 55
*betamethasone 0.1% topical cream* 55
BETAMETHASONE 0.1% TOPICAL LOTION 55

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*betamethasone dipropionate 0.05% aug topical ointment* 55
*betamethasone dipropionate 0.05% topical ointment* 55
*betamethasone valerate 0.1% topical ointment* 55
BETASERON 0.3MG INJ 77
BETAXOLOL 0.5% OPHTH SOLN 74
*betaxolol 10mg tab* 49
*betaxolol 20mg tab* 49
*bethanechol chloride 10mg tab* 62
*bethanechol chloride 25mg tab* 62
*bethanechol chloride 50mg tab* 62
*bethanechol chloride 5mg tab* 62
*bexarotene 1% topical gel* 54
*bexarotene 75mg cap* 36
BEXSERO SYRINGE 65
*bicalutamide 50mg tab* 30
BICILLIN L-A 1200000UNIT/2ML SYRINGE 10
BICILLIN L-A 2400000UNIT/4ML SYRINGE 10
BICILLIN L-A 600000UNIT/ML SYRINGE 10
BIKTARVY 30-120-15MG TAB 43
BIKTARVY 50-200-25MG TAB 43
*bimatoprost 0.01% ophth soln* 76
*bimatoprost 0.03% ophth soln* 76
*bismuth subcitrate/metronidazole/ tetracycline 140-125-125mg cap* 61
*bisoprolol fumarate 10mg tab* 49
*bisoprolol fumarate 5mg tab* 49
*bisoprolol fumarate/hydrochlorothiazide 10-6.25mg tab* 27
*bisoprolol fumarate/hydrochlorothiazide 2.5-6.25mg tab* 27
*bisoprolol fumarate/hydrochlorothiazide 5-6.25mg tab* 27
*blisovi 21 fe tab 1.5/30 28-day pack* 70
BOOSTRIX SYRINGE 65
*bosentan 125mg tab* 80
*bosentan 62.5mg tab* 80
BOSULIF 100MG CAP 31
BOSULIF 50MG CAP 32
*bosutinib 100mg tab* 32
*bosutinib 400mg tab* 32
*bosutinib 500mg tab* 32
BRAFTOVI 75MG CAP 32
BREO ELLIPTA 100-25MCG POWDER INHALER 79
BREO ELLIPTA 200-25MCG POWDER INHALER 79
BREO ELLIPTA 50-25MCG POWDER INHALER 79
*breyna 160-4.5mcg/act inhaler* 79
*breyna 80-4.5mcg/act inhaler* 79
*brimonidine tartrate 0.1% ophth soln* 74
*brimonidine tartrate 0.15% ophth soln* 74
*brimonidine tartrate 0.2% ophth soln* 74
*brimonidine tartrate/timolol maleate 0.2-0.5% ophth soln* 74
BRINSUPRI 10MG TAB 80
BRINSUPRI 25MG TAB 80
*brivaracetam 100mg tab* 13
*brivaracetam 10mg tab* 13
*brivaracetam 10mg/ml oral soln* 13
*brivaracetam 25mg tab* 13
*brivaracetam 50mg tab* 13
*brivaracetam 75mg tab* 13
*bromocriptine 2.5mg tab* 37
*bromocriptine 5mg cap* 37
BRUKINSA 160MG TAB 32
*budesonide 0.25mg/2ml inh susp* 78
*budesonide 0.5mg/2ml inh susp* 78
*budesonide 1mg/2ml inh susp* 78
*budesonide 3mg dr cap* 58
*budesonide 9mg er tab* 58
*budesonide/formoterol fumarate 160-4.5mcg inhaler* 79
*budesonide/formoterol fumarate 80-4.5mcg inhaler* 79
*bumetanide 0.25mg/ml inj* 51
*bumetanide 0.5mg tab* 51
*bumetanide 1mg tab* 52
*bumetanide 2mg tab* 52
*buprenorphine 10mcg/hr weekly patch* 3
*buprenorphine 15mcg/hr weekly patch* 3
*buprenorphine 20mcg/hr weekly patch* 3
*buprenorphine 2mg sl tab* 5

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*buprenorphine 5mcg/hr weekly patch* 3
*buprenorphine 7.5mcg/hr weekly patch* 3
*buprenorphine 8mg sl tab* 5
*buprenorphine/naloxone 12-3mg sl film* 5
*buprenorphine/naloxone 2-0.5mg sl film* 5
*buprenorphine/naloxone 2-0.5mg sl tab* 5
*buprenorphine/naloxone 4-1mg sl film* 5
*buprenorphine/naloxone 8-2mg sl film* 5
*buprenorphine/naloxone 8-2mg sl tab* 5
*bupropion (12hr) 150mg er tab* 5
*bupropion 100mg tab* 16
*bupropion 75mg tab* 16
*bupropion sr (12hr) 100mg tab* 16
*bupropion sr (12hr) 150mg tab* 16
*bupropion sr (12hr) 200mg tab* 16
*bupropion xl (24hr) 150mg tab* 16
*bupropion xl (24hr) 300mg tab* 16
*buspirone 10mg tab* 5
*buspirone 15mg tab* 5
*buspirone 30mg tab* 5
*buspirone 5mg tab* 5
*buspirone 7.5mg tab* 6

**C**

*cabergoline 0.5mg tab* 59
CABOMETYX 20MG TAE 32
CABOMETYX 40MG TAE 32
CABOMETYX 60MG TAE 32
*calcipotriene 0.005% topical cream* 55
*calcipotriene 0.005% topical ointment* 55
CALCIPOTRIENE 0.005% TOPICAL SOLN 55
*calcitriol 0.25mcg cap* 57
*calcitriol 0.5mcg cap* 57
*calcitriol 1mcg/ml oral soln* 57
*calcium acetate 667mg cap* 67
CALQUENCE 100MG TAB 32
*camila 0.35mg tab 28-day pack* 70
*camrese lo tab 91-day pack* 70
*candesartan cilexetil 16mg tab* 26
*candesartan cilexetil 32mg tab* 26
*candesartan cilexetil 4mg tab* 26
*candesartan cilexetil 8mg tab* 26
*candesartan cilexetil/hydrochlorothiazide 16-12.5mg tab* 27
*candesartan cilexetil/hydrochlorothiazide 32-12.5mg tab* 27
*candesartan cilexetil/hydrochlorothiazide 32-25mg tab* 27
CAPLYTA 10.5MG CAP 38
CAPLYTA 21MG CAP 38
CAPLYTA 42MG CAP 38
CAPRELSA 100MG TAB 32
CAPRELSA 300MG TAB 32
*captopril 100mg tab* 25
*captopril 12.5mg tab* 25
*captopril 25mg tab* 25
*captopril 50mg tab* 25
*carbamazepine 100mg chew tab* 13
*carbamazepine 100mg er cap* 13
*carbamazepine 100mg er tab* 13
*carbamazepine 200mg er cap* 13
*carbamazepine 200mg er tab* 13
*carbamazepine 200mg tab* 13
*carbamazepine 20mg/ml oral susp* 13
*carbamazepine 300mg er cap* 13
*carbamazepine 400mg er tab* 13
*carbidopa 25mg tab* 37
*carbidopa/entacapone/levodopa 12.5-200-50mg tab* 37
*carbidopa/entacapone/levodopa 18.75-200-75mg tab* 37
*carbidopa/entacapone/levodopa 25-200-100mg tab* 37
*carbidopa/entacapone/levodopa 31.25-200-125mg tab* 38
*carbidopa/entacapone/levodopa 37.5-200-150mg tab* 38
*carbidopa/entacapone/levodopa 50-200-200mg tab* 38
*carbidopa/levodopa 10-100mg odt* 38
*carbidopa/levodopa 10-100mg tab* 38
*carbidopa/levodopa 25-100mg er tab* 38
*carbidopa/levodopa 25-100mg odt* 38

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*carbidopa/levodopa 25-100mg tab* 38
*carbidopa/levodopa 25-250mg odt* 38
*carbidopa/levodopa 25-250mg tab* 38
*carbidopa/levodopa 50-200mg er tab* 38
*carglumic acid 200mg tab for oral susp* 57
*carisoprodol 350mg tab* 43
CARTEOLOL 1% OPHTH SOLN 74
*cartia xt 120mg er (24hr) cap* 50
*cartia xt 180mg er (24hr) cap* 50
*cartia xt 240mg er (24hr) cap* 50
*cartia xt 300mg er (24hr) cap* 50
*carvedilol 12.5mg tab* 49
*carvedilol 25mg tab* 49
*carvedilol 3.125mg tab* 49
*carvedilol 6.25mg tab* 49
*caspofungin acetate 50mg inj* 23
*caspofungin acetate 70mg inj* 23
CAYSTON 75MG/ML NEB SOLN 7
CEFACLOR 250MG CAP 8
CEFACLOR 500MG CAP 8
*cefadroxil 100mg/ml oral susp* 8
*cefadroxil 500mg cap* 8
*cefadroxil 50mg/ml oral susp* 8
*cefazolin 1gm inj* 8
*cefazolin 200mg/ml inj* 8
*cefazolin 500mg inj* 8
*cefdinir 25mg/ml oral susp* 8
*cefdinir 300mg cap* 8
*cefdinir 50mg/ml oral susp* 8
*cefepime 1gm inj* 8
*cefepime 2gm inj* 9
*cefixime 400mg cap* 9
*cefoxitin 1gm inj* 9
*cefoxitin 200mg/ml inj* 9
*cefoxitin 2gm inj* 9
*cefpodoxime 100mg tab* 9
CEFPODOXIME 10MG/ML ORAL SUSP 9
*cefpodoxime 200mg tab* 9
CEFPODOXIME 20MG/ML ORAL SUSP 9
*cefprozil 250mg tab* 9
*cefprozil 25mg/ml oral susp* 9
*cefprozil 500mg tab* 9
*cefprozil 50mg/ml oral susp* 9
*ceftaroline fosamil 400mg inj* 9
*ceftaroline fosamil 600mg inj* 9
*ceftazidime 1gm inj* 9
CEFTAZIDIME 200MG/ML INJ 9
*ceftazidime 2gm inj* 9
*ceftriaxone 10gm inj* 9
*ceftriaxone 1gm inj* 9
*ceftriaxone 250mg inj* 9
*ceftriaxone 2gm inj* 9
*ceftriaxone 500mg inj* 9
*cefuroxime 1500mg inj* 9
*cefuroxime 250mg tab* 9
*cefuroxime 500mg tab* 9
*cefuroxime 750mg inj* 9
*celecoxib 100mg cap* 2
*celecoxib 200mg cap* 2
*celecoxib 400mg cap* 2
*celecoxib 50mg cap* 2
*cephalexin 250mg cap* 9
*cephalexin 25mg/ml oral susp* 9
*cephalexin 500mg cap* 9
*cephalexin 50mg/ml oral susp* 9
*cevimeline 30mg cap* 53
*chlordiazepoxide 10mg cap* 6
*chlordiazepoxide 25mg cap* 6
*chlordiazepoxide 5mg cap* 6
*chlorhexidine gluconate 0.12% mouthwash* 53
CHLOROQUINE PHOSPHATE 250MG TAB 37
*chloroquine phosphate 500mg tab* 37
*chlorpromazine 100mg tab* 41
*chlorpromazine 100mg/ml oral soln* 41
*chlorpromazine 10mg tab* 41
*chlorpromazine 200mg tab* 41
*chlorpromazine 25mg tab* 41
*chlorpromazine 30mg/ml oral soln* 41
*chlorpromazine 50mg tab* 41
*chlorthalidone 25mg tab* 52
*chlorthalidone 50mg tab* 52
*chlorzoxazone 500mg tab* 43
*cholestyramine 4gm powder for oral susp* 24
*cholestyramine light 4gm powder for oral susp* 24
*ciclopirox 0.77% topical cream* 54
*ciclopirox 0.77% topical gel* 54
*ciclopirox 0.77% topical lotion* 54
*ciclopirox 1% shampoo* 54
*ciclopirox 8% topical soln* 54
CILASTATIN/IMIPENEM 250-250MG INJ 7

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*cilastatin/imipenem 500-500mg inj* 7
*cilostazol 100mg tab* 11
*cilostazol 50mg tab* 11
CIMDUO 300-300MG TAB 43
*cimetidine 200mg tab* 61
*cimetidine 300mg tab* 61
*cimetidine 400mg tab* 61
*cimetidine 800mg tab* 61
CIMZIA 200MG INJ 46
CIMZIA 200MG/ML SYRINGE 46
CIMZIA 200MG/ML SYRINGE PACK (2) 46
CIMZIA 200MG/ML SYRINGE STARTER KIT (6) 46
*cinacalcet 30mg tab* 57
*cinacalcet 60mg tab* 57
*cinacalcet 90mg tab* 57
*ciprofloxacin 0.3% ophth soln* 74
*ciprofloxacin 250mg tab* 7
CIPROFLOXACIN 2MG/ML INJ 7
*ciprofloxacin 500mg tab* 7
*ciprofloxacin 750mg tab* 7
*ciprofloxacin/dexamethasone 0.3-0.1% otic susp* 76
*citalopram 10mg tab* 16
*citalopram 20mg tab* 16
*citalopram 2mg/ml oral soln* 17
*citalopram 40mg tab* 17
*claravis 10mg cap* 53
*claravis 20mg cap* 53
*claravis 30mg cap* 53
*claravis 40mg cap* 53
*clarithromycin 250mg tab* 10
CLARITHROMYCIN 25MG/ML ORAL SUSP 11
*clarithromycin 500mg tab* 11
CLARITHROMYCIN 50MG/ML ORAL SUSP 11
*clindamycin 1% pad* 53
*clindamycin 1% topical gel (once-daily)* 53
*clindamycin 1% topical gel (twice-daily)* 53
*clindamycin 1% topical lotion* 53
*clindamycin 1% topical soln* 54
*clindamycin 150mg cap* 7
*clindamycin 2% vaginal cream* 7
*clindamycin 300mg cap* 7
*clindamycin 300mg/2ml inj* 7
*clindamycin 300mg/50ml inj* 7
*clindamycin 600mg/4ml inj* 7
*clindamycin 600mg/50ml inj* 7
*clindamycin 75mg cap* 7
*clindamycin 75mg/5ml oral soln* 7
*clindamycin 900mg/50ml inj* 7
*clindamycin 900mg/6ml inj* 7
CLINIMIX 4.25/10 INJ 68
CLINIMIX 4.25/5 INJ 68
CLINIMIX 5/15 INJ 68
CLINIMIX 5/20 INJ 68
*clinisol 15% inj* 68
*clobazam 10mg tab* 12
*clobazam 2.5mg/ml oral susp* 12
*clobazam 20mg tab* 12
*clobetasol propionate 0.05% shampoo* 55
*clobetasol propionate 0.05% topical cream* 55
*clobetasol propionate 0.05% topical e cream* 55
*clobetasol propionate 0.05% topical foam* 55
*clobetasol propionate 0.05% topical gel* 55
*clobetasol propionate 0.05% topical lotion* 55
*clobetasol propionate 0.05% topical ointment* 55
*clobetasol propionate 0.05% topical soln* 18
*clomipramine 25mg cap* 18
*clomipramine 50mg cap* 18
*clomipramine 75mg cap* 12
*clonazepam 0.125mg odt* 12
*clonazepam 0.25mg odt* 12
*clonazepam 0.5mg odt* 12
*clonazepam 0.5mg tab* 12
*clonazepam 1mg odt* 12
*clonazepam 1mg tab* 12
*clonazepam 2mg odt* 12
*clonazepam 2mg tab* 1
*clonidine 0.1mg er tab* 26
*clonidine 0.1mg tab* 26
*clonidine 0.1mg/24hr weekly patch* 26
*clonidine 0.2mg tab* 26
*clonidine 0.2mg/24hr weekly patch* 26
*clonidine 0.3mg tab* 26
*clonidine 0.3mg/24hr weekly patch* 11
*clopidogrel 75mg tab* 6
*clorazepate dipotassium 15mg tab* 6
*clorazepate dipotassium 3.75mg tab* 6
*clorazepate dipotassium 7.5mg tab* 54
*clotrimazole 1% topical cream* 53
*clotrimazole 10mg lozenge*

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*clotrimazole/betamethasone 1-0.05% topical cream* 54
*clozapine 100mg odt* 40
*clozapine 100mg tab* 40
*clozapine 12.5mg odt* 40
*clozapine 150mg odt* 40
*clozapine 200mg odt* 40
*clozapine 200mg tab* 40
*clozapine 25mg odt* 40
*clozapine 25mg tab* 40
*clozapine 50mg tab* 41
COARTEM 20-120MG TAB 37
COBENFY 100-20MG CAP 39
COBENFY 125-30MG CAP 39
COBENFY 50-20MG CAP 39
COBENFY CAP 28-DAY STARTER PACK (56) 39
*codeine phosphate/acetaminophen 15-300mg tab* 4
*codeine phosphate/acetaminophen 30-300mg tab* 4
*codeine phosphate/acetaminophen 60-300mg tab* 4
*colchicine 0.6mg tab* 63
*colchicine/probenecid 0.5-500mg tab* 63
*colesevelam 625mg tab* 24
*colestipol 1gm tab* 24
*colestipol 5000mg granules for oral susp* 24
*colistin 75mg/ml inj* 7
COMBIVENT RESPIMAT 20-100MCG/ACT INHALER 79
COMETRIQ CAP 100MG DAILY DOSE PACK (56) 32
COMETRIQ CAP 140MG DAILY DOSE PACK (112) 32
COMETRIQ CAP 60MG DAILY DOSE PACK (84) 32
*compro 25mg rectal supp* 41
*conjugated estrogens 0.3mg tab* 73
*conjugated estrogens 0.45mg tab* 73
*conjugated estrogens 0.625mg tab* 73
*conjugated estrogens 0.9mg tab* 73
*conjugated estrogens 1.25mg tab* 73
*constulose 10gm/15ml oral soln* 61
COPIKTRA 15MG CAP 32
COPIKTRA 25MG CAP 32
COSENTYX 150MG/ML SYRINGE 46
COSENTYX 75MG/0.5ML SYRINGE 46
COSENTYX SENSOREADY 150MG/ML AUTO-INJECTOR 46
COSENTYX UNOREADY 300MG/2ML AUTO-INJECTOR 46
COTELLIC 20MG TAB 32
CREON 120000-24000-76000UNIT DR CAP 67
CREON 15000-3000-9500UNIT DR CAP 67
CREON 180000-36000-114000UNIT DR CAP 67
CREON 30000-6000-19000UNIT DR CAP 67
CREON 60000-12000-38000UNIT DR CAP 67
CRESEMBA 186MG CAP 23
CRESEMBA 74.5MG CAP 23
*cromolyn sodium 20mg/2ml neb soln* 80
*cromolyn sodium 20mg/ml oral soln* 67
CROMOLYN SODIUM 4% OPHTH SOLN 75
*cryselle tab 28-day pack* 70
*cyclobenzaprine 10mg tab* 43
*cyclobenzaprine 5mg tab* 43
*cyclophosphamide 25mg cap* 29
*cyclophosphamide 50mg cap* 29
CYCLOPHOSPHAMIDE 50MG TAB 29
*cyclosporine 0.05% ophth susp* 75
*cyclosporine 100mg cap* 64
*cyclosporine 25mg cap* 64
*cyclosporine modified 100mg cap* 64
*cyclosporine modified 100mg/ml oral soln* 64
*cyclosporine modified 25mg cap* 64
*cyclosporine modified 50mg cap* 64
*cyproheptadine 0.4mg/ml oral soln* 78
*cyproheptadine 4mg tab* 78
*cyred tab 28-day pack* 70
CYSTADANE 1GM POWDER FOR ORAL SOLN 57
CYSTADROPS 0.37% OPHTH SOLN 75
CYSTAGON 150MG CAP 63
CYSTAGON 50MG CAP 63

**D**

*dabigatran etexilate mesylate 110mg cap* 11

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*dabigatran etexilate mesylate 150mg cap* 11
*dabigatran etexilate mesylate 75mg cap* 11
*dalfampridine 10mg er tab* 77
*danazol 100mg cap* 4
*danazol 200mg cap* 4
*danazol 50mg cap* 4
*dantrolene sodium 100mg cap* 43
*dantrolene sodium 25mg cap* 43
*dantrolene sodium 50mg cap* 43
*dapagliflozin 10mg tab* 22
*dapagliflozin 5mg tab* 22
*dapagliflozin/metformin 10-1000mg er tab* 19
*dapagliflozin/metformin 10-500mg er tab* 19
*dapagliflozin/metformin 5-1000mg er tab* 19
*dapagliflozin/metformin 5-500mg er tab* 19
*dapsone 100mg tab* 28
*dapsone 25mg tab* 28
DAPTACEL INJ 65
*daptomycin 500mg inj* 7
*darunavir 600mg tab* 43
*darunavir 800mg tab* 43
*dasatinib 100mg tab* 32
*dasatinib 140mg tab* 32
*dasatinib 20mg tab* 32
*dasatinib 50mg tab* 32
*dasatinib 70mg tab* 32
*dasatinib 80mg tab* 32
DAURISMO 100MG TAB 30
DAURISMO 25MG TAB 30
*deblitane 0.35mg tab 28-day pack* 70
*deferasirox 180mg tab* 22
*deferasirox 360mg tab* 22
*deferasirox 90mg tab* 22
DELSTRIGO 100-300-300MG TAB 43
DEPO-SUBQ PROVERA 104MG/0.65ML SYRINGE 70
DESCOVY 120-15MG TAB 43
DESCOVY 200-25MG TAB 43
*desipramine 100mg tab* 18
*desipramine 10mg tab* 18
*desipramine 150mg tab* 18
*desipramine 25mg tab* 18
*desipramine 50mg tab* 18
*desipramine 75mg tab* 19
*desloratadine 5mg tab* 78
*desmopressin acetate 0.01% (0.01mg/act) nasal spray* 59
*desmopressin acetate 0.1mg tab* 59
*desmopressin acetate 0.2mg tab* 59
*desonide 0.05% topical cream* 55
*desonide 0.05% topical ointment* 56
*desoximetasone 0.25% topical cream* 56
*desoximetasone 0.25% topical ointment* 56
*desvenlafaxine succinate 100mg er tab* 18
*desvenlafaxine succinate 25mg er tab* 18
*desvenlafaxine succinate 50mg er tab* 18
*dexamethasone 0.5mg tab* 58
DEXAMETHASONE 0.5MG/5ML ORAL SOLN 58
*dexamethasone 0.75mg tab* 58
*dexamethasone 1.5mg tab* 58
*dexamethasone 1mg tab* 58
*dexamethasone 2mg tab* 58
*dexamethasone 4mg tab* 58
*dexamethasone 6mg tab* 58
DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN 75
*dexamethasone/neomycin /polymyxin b 0.1% ophth ointment* 75
*dexamethasone/neomycin /polymyxin b 0.1% ophth susp* 75
*dexamethasone/tobramycin 0.3-0.1% ophth susp* 75
*dexmethylphenidate 10mg tab* 1
*dexmethylphenidate 2.5mg tab* 1
*dexmethylphenidate 5mg tab* 1
*dextroamphetamine sulfate 10mg tab* 1
*dextroamphetamine sulfate 5mg tab* 1
*dextromethorphan hydrobromide/quinidine sulfate 20-10mg cap* 77
DEXTROSE 10% INJ 68
DIACOMIT 250MG CAP 13
DIACOMIT 250MG POWDER FOR ORAL SUSP 13
DIACOMIT 500MG CAP 13
DIACOMIT 500MG POWDER FOR ORAL SUSP 13
*diazepam 10mg tab* 6
*diazepam 10mg/2ml rectal gel* 12
*diazepam 1mg/ml oral soln* 6
*diazepam 2.5mg/0.5ml rectal gel* 12

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*diazepam 20mg/4ml rectal gel* 12
*diazepam 2mg tab* 6
*diazepam 5mg tab* 6
*diazepam 5mg/ml oral soln* 6
*diazoxide 50mg/ml oral susp* 20
*diclofenac potassium 50mg tab* 2
*diclofenac sodium 0.1% ophth soln* 75
*diclofenac sodium 1.5% topical soln* 2
*diclofenac sodium 100mg er tab* 2
*diclofenac sodium 25mg dr tab* 2
*diclofenac sodium 3% topical gel* 54
*diclofenac sodium 50mg dr tab* 2
*diclofenac sodium 75mg dr tab* 2
*dicloxacillin 250mg cap* 10
*dicloxacillin 500mg cap* 10
*dicyclomine 10mg cap* 61
*dicyclomine 20mg tab* 61
*dicyclomine 2mg/ml oral soln* 61
*diflunisal 500mg tab* 2
*difluprednate 0.05% ophth susp* 75
*digoxin 0.125mg tab* 51
*digoxin 0.25mg tab* 51
*dihydroergotamine mesylate 0.5mg/act nasal inhaler* 66
DILANTIN 30MG ER CAP 13
*diltiazem 120mg er (12hr) cap* 50
*diltiazem 120mg er (24hr) cap* 50
*diltiazem 120mg tab* 50
*diltiazem 180mg er (24hr) cap* 50
*diltiazem 240mg er (24hr) cap* 50
*diltiazem 300mg er (24hr) cap* 50
*diltiazem 30mg tab* 50
*diltiazem 360mg er (24hr) cap* 50
*diltiazem 420mg er (24hr) cap* 50
*diltiazem 60mg er (12hr) cap* 50
*diltiazem 60mg tab* 50
*diltiazem 90mg er (12hr) cap* 50
*diltiazem 90mg tab* 50
*dilt-xr 120mg cap* 50
*dilt-xr 180mg cap* 50
*dilt-xr 240mg cap* 50
*dimethyl fumarate 120mg dr cap* 77
*dimethyl fumarate 120mg/240mg cap starter pack (60)* 77
*dimethyl fumarate 240mg dr cap* 77
*dipyridamole 25mg tab* 11
*dipyridamole 50mg tab* 11
*dipyridamole 75mg tab* 11
*disopyramide 100mg cap* 48
*disopyramide 150mg cap* 48
*disulfiram 250mg tab* 5
*divalproex sodium 125mg dr cap* 16
*divalproex sodium 125mg dr tab* 16
*divalproex sodium 250mg dr tab* 16
*divalproex sodium 250mg er tab* 38
*divalproex sodium 500mg dr tab* 16
*divalproex sodium 500mg er tab* 38
*dofetilide 125mcg cap* 48
*dofetilide 250mcg cap* 48
*dofetilide 500mcg cap* 48
DOJOLVI 100% ORAL SOLN 68
*donepezil 10mg odt* 76
*donepezil 10mg tab* 76
*donepezil 23mg tab* 76
*donepezil 5mg odt* 76
*donepezil 5mg tab* 76
*dorzolamide 2% ophth soln* 75
*dorzolamide/timolol 22.3-6.8mg/ml ophth soln* 74
*dotti 0.025mg/24hr twice weekly patch* 73
*dotti 0.0375mg/24hr twice weekly patch* 73
*dotti 0.05mg/24hr twice weekly patch* 73
*dotti 0.075mg/24hr twice weekly patch* 73
*dotti 0.1mg/24hr twice weekly patch* 73
DOVATO 50-300MG TAB 43
*doxazosin 1mg tab* 26
*doxazosin 2mg tab* 26
*doxazosin 4mg tab* 26
*doxazosin 8mg tab* 26
*doxepin 100mg cap* 19
*doxepin 10mg cap* 19
DOXEPIN 10MG/ML ORAL SOLN 19
DOXEPIN 150MG CAP 19
*doxepin 25mg cap* 19
*doxepin 50mg cap* 19
*doxepin 75mg cap* 19
*doxy 100mg inj* 7
*doxycycline hyclate 100mg cap* 7
*doxycycline hyclate 100mg inj* 7

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*doxycycline hyclate 100mg tab* 7
*doxycycline hyclate 20mg tab* 7
*doxycycline hyclate 50mg cap* 7
*doxycycline monohydrate 100mg cap* 7
*doxycycline monohydrate 100mg tab* 7
*doxycycline monohydrate 50mg cap* 7
*doxycycline monohydrate 50mg tab* 7
*doxycycline monohydrate 5mg/ml oral susp* 7
*doxycycline monohydrate 75mg tab* 7
DRIZALMA 20MG DR SPRINKLE CAP 18
DRIZALMA 30MG DR SPRINKLE CAP 18
DRIZALMA 40MG DR SPRINKLE CAP 18
DRIZALMA 60MG DR SPRINKLE CAP 18
*dronabinol 10mg cap* 22
*dronabinol 2.5mg cap* 22
*dronabinol 5mg cap* 22
*drospirenone/ethinyl estradiol/inert ingredients 3-0.02-1mg tab 28-day pack* 70
*drospirenone/ethinyl estradiol/inert ingredients 3-0.03-1mg tab 28-day pack* 70
DROXIA 200MG CAP 67
DROXIA 300MG CAP 67
DROXIA 400MG CAP 67
*droxidopa 100mg cap* 48
*droxidopa 200mg cap* 48
*droxidopa 300mg cap* 48
DULERA 100-5MCG INHALER 79
DULERA 200-5MCG INHALER 79
DULERA 50-5MCG INHALER 79
*duloxetine 20mg dr cap* 18
*duloxetine 30mg dr cap* 18
*duloxetine 60mg dr cap* 18
DUPIXENT 200MG/1.14ML AUTO-INJECTOR 46
DUPIXENT 200MG/1.14ML SYRINGE 46
DUPIXENT 300MG/2ML AUTO-INJECTOR 46
DUPIXENT 300MG/2ML SYRINGE 46
*dutasteride 0.5mg cap* 63

**E**

*econazole nitrate 1% topical cream* 54
EDURANT 2.5MG TAB FOR ORAL SUSP 43
*efavirenz 600mg tab* 43
*efavirenz/emtricitabine/tenofovir disoproxil fumarate 600-200-300mg tab* 43
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE 400-300-300MG TAB 43
*efavirenz/lamivudine/tenofovir disoproxil fumarate 600-300-300mg tab* 44
*electrolyte-148 inj* 68
ELIGARD 22.5MG SYRINGE 30
ELIGARD 30MG SYRINGE 30
ELIGARD 45MG SYRINGE 30
ELIGARD 7.5MG SYRINGE 30
ELIQUIS 0.15MG SPRINKLE CAP 11
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (112) 11
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (28) 11
ELIQUIS 0.5MG TAB FOR ORAL SUSP DOSE PACK (84) 11
ELIQUIS 2.5MG TAB 11
ELIQUIS 5MG TAB 11
ELIQUIS 5MG TAB 30-DAY STARTER PACK (74) 11
*eltrombopag olamine 12.5mg powder for oral susp* 63
*eltrombopag olamine 12.5mg tab* 63
*eltrombopag olamine 25mg powder for oral susp* 63
*eltrombopag olamine 25mg tab* 63
*eltrombopag olamine 50mg tab* 63
*eltrombopag olamine 75mg tab* 63
*eluryng 0.120-0.015mg/24hr vaginal system* 70
EMGALITY 100MG/ML SYRINGE 67
EMGALITY 120MG/ML AUTO-INJECTOR 67
EMGALITY 120MG/ML SYRINGE 67

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

EMSAM 12MG/24HR PATCH 16
EMSAM 6MG/24HR PATCH 16
EMSAM 9MG/24HR PATCH 16
*emtricitabine 200mg cap* 44
*emtricitabine/rilpivirine/tenofovir disoproxil fumarate 200-25-300mg tab* 44
*emtricitabine/tenofovir disoproxil fumarate 100-150mg tab* 44
*emtricitabine/tenofovir disoproxil fumarate 133-200mg tab* 44
*emtricitabine/tenofovir disoproxil fumarate 167-250mg tab* 44
*emtricitabine/tenofovir disoproxil fumarate 200-300mg tab* 44
EMTRIVA 10MG/ML ORAL SOLN 44
*enalapril maleate 10mg tab* 25
*enalapril maleate 2.5mg tab* 25
*enalapril maleate 20mg tab* 25
*enalapril maleate 5mg tab* 25
*enalapril maleate/hydrochlorothiazide 10-25mg tab* 27
*enalapril maleate/hydrochlorothiazide 5-12.5mg tab* 27
ENBREL 25MG/0.5ML INJ 46
ENBREL 25MG/0.5ML SYRINGE 47
ENBREL 50MG/ML CARTRIDGE 47
ENBREL 50MG/ML SYRINGE 47
ENBREL SURECLICK 50MG/ML AUTO-INJECTOR 47
ENBUMYST 0.5MG/0.1ML NASAL SPRAY 52
ENGERIX-B 10MCG/0.5ML SYRINGE 65
ENGERIX-B 20MCG/ML INJ 65
ENGERIX-B 20MCG/ML SYRINGE 65
*enilloring 0.120-0.015mg/24hr vaginal system* 70
ENOBY 60MG/ML SYRINGE 57
*enoxaparin sodium 100mg/1ml syringe* 11
*enoxaparin sodium 120mg/0.8ml syringe* 11
*enoxaparin sodium 150mg/1ml syringe* 11
*enoxaparin sodium 30mg/0.3ml syringe* 11
*enoxaparin sodium 40mg/0.4ml syringe* 11
*enoxaparin sodium 60mg/0.6ml syringe* 11
*enoxaparin sodium 80mg/0.8ml syringe* 11
ENSACOVE 100MG CAP 32
ENSACOVE 25MG CAP 32
*enskyce tab 28-day pack* 70
*entacapone 200mg tab* 37
*entecavir 0.5mg tab* 45
*entecavir 1mg tab* 45
ENTYVIO 108MG/0.68ML AUTO-INJECTOR 47
*enulose 10gm/15ml oral soln* 61
ENVARSUS XR 0.75MG TAB 64
ENVARSUS XR 1MG TAB 64
ENVARSUS XR 4MG TAB 64
EPIDIOLEX 100MG/ML ORAL SOLN 13
*epinephrine 0.15mg/0.3ml auto-injector (2pack)* 79
*epinephrine 0.3mg/0.3ml auto-injector (2pack)* 79
*eplerenone 25mg tab* 28
*eplerenone 50mg tab* 28
ERIVEDGE 150MG CAP 30
ERLEADA 240MG TAB 30
ERLEADA 60MG TAB 30
*erlotinib 100mg tab* 29
*erlotinib 150mg tab* 29
*erlotinib 25mg tab* 29
*errin 0.35mg tab 28-day pack* 70
*ertapenem 1gm inj* 7
ERY 2% PAD 54
*erythromycin 0.5% ophth ointment* 74
ERYTHROMYCIN 2% TOPICAL GEL 54
*erythromycin 2% topical soln* 54
*erythromycin 250mg dr tab* 11
*erythromycin 250mg tab* 11
*erythromycin 333mg dr tab* 11
*erythromycin 500mg dr tab* 11
*erythromycin 500mg tab* 11
*escitalopram 10mg tab* 17
*escitalopram 1mg/ml oral soln* 17
*escitalopram 20mg tab* 17
*escitalopram 5mg tab* 17


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*eslicarbazepine acetate 200mg tab* 13
*eslicarbazepine acetate 400mg tab* 13
*eslicarbazepine acetate 600mg tab* 13
*eslicarbazepine acetate 800mg tab* 13
*esomeprazole 10mg granules for oral susp* 62
*esomeprazole 20mg dr cap* 62
*esomeprazole 20mg granules for oral susp* 62
*esomeprazole 40mg dr cap* 62
*esomeprazole 40mg granules for oral susp* 62
*estarylla tab 28-day pack* 70
*estradiol 0.01% vaginal cream* 73
*estradiol 0.01mg/24hr twice weekly patch* 73
*estradiol 0.025mg/24hr twice weekly patch* 73
*estradiol 0.025mg/24hr weekly patch* 73
*estradiol 0.0375mg/24hr twice weekly patch* 73
*estradiol 0.0375mg/24hr weekly patch* 73
*estradiol 0.05mg/24hr twice weekly patch* 73
*estradiol 0.05mg/24hr weekly patch* 73
*estradiol 0.06mg/24hr weekly patch* 73
*estradiol 0.075mg/24hr twice weekly patch* 73
*estradiol 0.075mg/24hr weekly patch* 73
*estradiol 0.1% (0.25mg/0.25gm) topical gel* 73
*estradiol 0.1% (0.5mg/0.5gm) topical gel* 73
*estradiol 0.1% (0.75mg/0.75gm) topical gel* 73
*estradiol 0.1% (1.25mg/1.25gm) topical gel* 73
*estradiol 0.1% (1mg/gm) topical gel* 73
*estradiol 0.1mg/24hr weekly patch* 73
*estradiol 0.5mg tab* 73
*estradiol 10mcg vaginal insert* 73
*estradiol 1mg tab* 73
*estradiol 2mg tab* 73
*estradiol valerate 10mg/ml inj* 73
*estradiol valerate 20mg/ml inj* 73
*estradiol valerate 40mg/ml inj* 73
*estradiol/norethindrone acetate 0.5-0.1mg tab 28-day pack* 73
*estradiol/norethindrone acetate 1-0.5mg 28-day pack* 73
*eszopiclone 1mg tab* 81
*eszopiclone 2mg tab* 81
*eszopiclone 3mg tab* 81
*ethambutol 100mg tab* 28
*ethambutol 400mg tab* 28
*ethinyl estradiol/ethinyl estradiol/levonorgestrel 0.01-0.02-0.1mg tab 91-day pack* 70
*ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system* 70
*ethinyl estradiol/inert ingredients/levonorgestrel 0.02-1-0.1mg tab 28-day pack* 70
*ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg tab 91-day pack* 70
*ethinyl estradiol/inert ingredients/norgestimate 0.035-1-0.25mg tab 28-day pack* 70
*ethinyl estradiol/norethindrone acetate 0.0025-0.5mg tab 28 day-pack* 73
*ethinyl estradiol/norethindrone acetate 0.005-1mg 28-day pack* 73
*ethinyl estradiol/norethindrone acetate 0.02-1mg tab 21-day pack* 70
*ethinyl estradiol/norgestimate 0.18-25/0.215-25/0.25-25 mg-mcg tab 28-day pack* 71
*ethinyl estradiol/norgestimate 0.18-35/0.215-35/0.25-35 mg-mcg tab 28-day pack* 71
*ethosuximide 250mg cap* 16
*ethosuximide 50mg/ml oral soln* 16
*etodolac 200mg cap* 2
*etodolac 300mg cap* 2
*etodolac 400mg tab* 2
*etodolac 500mg tab* 2
*etravirine 100mg tab* 44
*etravirine 200mg tab* 44
EUCRISA 2% TOPICAL OINTMENT 56
EULEXIN 125MG CAP 30


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*everolimus 0.25mg tab* 64
*everolimus 0.5mg tab* 64
*everolimus 0.75mg tab* 64
*everolimus 10mg tab* 32
*everolimus 1mg tab* 64
*everolimus 2.5mg tab* 32
*everolimus 2mg tab for oral susp* 32
*everolimus 3mg tab for oral susp* 32
*everolimus 5mg tab* 32
*everolimus 5mg tab for oral susp* 32
*everolimus 7.5mg tab* 32
EVOTAZ 300-150MG TAB 44
EVRYSDI 0.75MG/ML ORAL SOLN 67
EVRYSDI 5MG TAB 67
*exemestane 25mg tab* 30
EXXUA 18.2MG ER TAB 17
EXXUA 18.2MG TAB TITRATION PACK (32) 17
EXXUA 36.3MG ER TAB 17
EXXUA 54.5MG ER TAB 17
EXXUA 72.6MG ER TAB 17
*ezetimibe 10mg tab* 23
*ezetimibe/simvastatin 10-10mg tab* 23
*ezetimibe/simvastatin 10-20mg tab* 24
*ezetimibe/simvastatin 10-40mg tab* 24
*ezetimibe/simvastatin 10-80mg tab* 24

**F**

*falmina tab 28-day pack* 71
*famciclovir 125mg tab* 45
*famciclovir 250mg tab* 45
*famciclovir 500mg tab* 45
*famotidine 20mg tab* 62
*famotidine 40mg tab* 62
FANAPT 10MG TAB 39
FANAPT 12MG TAB 39
FANAPT 1MG TAB 39
FANAPT 2MG TAB 40
FANAPT 4MG TAB 40
FANAPT 6MG TAB 40
FANAPT 8MG TAB 40
FANAPT TAB TITRATION PACK (8) 40
FANAPT TAB TITRATION PACK B (12) 40
FANAPT TAB TITRATION PACK C (8) 40
FARXIGA 10MG TAB 22
FARXIGA 5MG TAB 22
FASENRA 10MG/0.5ML SYRINGE 47
FASENRA 30MG/ML AUTO-INJECTOR 47
FASENRA 30MG/ML SYRINGE 47
*febuxostat 40mg tab* 63
*febuxostat 80mg tab* 63
*feirza 1.5/30 tab 28-day pack* 71
*feirza 1/20 tab 28-day pack* 71
*felbamate 120mg/ml oral susp* 15
*felbamate 400mg tab* 15
*felbamate 600mg tab* 15
*felodipine 10mg er tab* 50
*felodipine 2.5mg er tab* 50
*felodipine 5mg er tab* 50
*fenofibrate 134mg cap* 24
*fenofibrate 145mg tab* 24
*fenofibrate 160mg tab* 24
*fenofibrate 200mg cap* 24
*fenofibrate 43mg cap* 24
*fenofibrate 48mg tab* 24
*fenofibrate 54mg tab* 24
*fenofibrate 67mg cap* 24
*fenofibric acid 135mg dr cap* 24
*fenofibric acid 45mg dr cap* 24
*fentanyl 100mcg/hr patch* 3
*fentanyl 12mcg/hr patch* 3
*fentanyl 25mcg/hr patch* 3
*fentanyl 50mcg/hr patch* 3
*fentanyl 75mcg/hr patch* 3
*fesoterodine fumarate 4mg er tab* 62
*fesoterodine fumarate 8mg er tab* 62
FETZIMA 120MG ER CAP 18
FETZIMA 20MG ER CAP 18
FETZIMA 40MG ER CAP 18
FETZIMA 80MG ER CAP 18
FETZIMA ER CAP TITRATION PACK (28) 18
FIASP 100UNIT/ML INJ 20
FIASP 100UNIT/ML PEN CARTRIDGE 20
FIASP FLEXTOUCH 100UNIT/ML PEN INJ (3ML) 20
*fidaxomicin 200mg tab* 11
FILSPARI 200MG TAB 63
FILSPARI 400MG TAB 63
*finasteride 5mg tab* 63
*fingolimod 0.5mg cap* 77
FINTEPLA 2.2MG/ML ORAL SOLN 13
FIRMAGON 120MG INJ 30
FIRMAGON 80MG INJ 30
*flecainide acetate 100mg tab* 48
*flecainide acetate 150mg tab* 48
*flecainide acetate 50mg tab* 48
*fluconazole 100mg tab* 23
*fluconazole 10mg/ml oral susp* 23
*fluconazole 150mg tab* 23
*fluconazole 200mg tab* 23
*fluconazole 200mg/100ml inj* 23

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*fluconazole 400mg/200ml inj* 23
*fluconazole 40mg/ml oral susp* 23
*fluconazole 50mg tab* 23
*flucytosine 250mg cap* 23
*flucytosine 500mg cap* 23
*fludrocortisone acetate 0.1mg tab* 59
*flunisolide 0.025% (25mcg/act) nasal inhaler* 68
*fluocinolone acetonide 0.01% otic soln* 76
*fluocinolone acetonide 0.01% topical cream* 56
*fluocinolone acetonide 0.01% topical oil* 56
*fluocinolone acetonide 0.01% topical soln* 56
*fluocinolone acetonide 0.025% topical cream* 56
*fluocinolone acetonide 0.025% topical ointment* 56
*fluocinonide 0.05% topical cream* 56
*fluocinonide 0.05% topical e cream* 56
*fluocinonide 0.05% topical gel* 56
*fluocinonide 0.05% topical ointment* 56
*fluocinonide 0.05% topical soln* 56
*fluocinonide 0.1% topical cream* 56
*fluorometholone 0.1% ophth susp* 75
FLUOROURACIL 2% TOPICAL SOLN 55
*fluorouracil 5% topical cream* 55
*fluorouracil 5% topical soln* 55
*fluoxetine 10mg cap* 17
*fluoxetine 20mg cap* 17
*fluoxetine 40mg cap* 17
*fluoxetine 4mg/ml oral soln* 17
*fluoxetine 60mg tab* 17
FLUPHENAZINE 0.5MG/ML ORAL SOLN 41
*fluphenazine 10mg tab* 41
*fluphenazine 1mg tab* 41
*fluphenazine 2.5mg tab* 41
FLUPHENAZINE 2.5MG/ML INJ 41
*fluphenazine 5mg tab* 42
FLUPHENAZINE 5MG/ML ORAL SOLN 42
*fluphenazine decanoate 25mg/ml inj* 42
FLURBIPROFEN SODIUM 0.03% OPHTH SOLN 75
FLUTICASONE FUROATE/VILANTEROL 100-25MCG/INH POWDER INHALER 79
FLUTICASONE FUROATE/VILANTEROL 200-25MCG/INH POWDER INHALER 79
*fluticasone propionate 0.005% topical ointment* 56
*fluticasone propionate 0.05% topical cream* 56
*fluticasone propionate 50mcg/act nasal inhaler* 68
*fluticasone propionate/salmeterol 100-50mcg/act powder inhaler* 79
*fluticasone propionate/salmeterol 250-50mcg/act powder inhaler* 79
*fluticasone propionate/salmeterol 500-50mcg/act powder inhaler* 79
*fluvoxamine maleate 100mg tab* 17
*fluvoxamine maleate 25mg tab* 17
*fluvoxamine maleate 50mg tab* 17
*fondaparinux sodium 10mg/0.8ml syringe* 11
*fondaparinux sodium 2.5mg/0.5ml syringe* 11
*fondaparinux sodium 5mg/0.4ml syringe* 11
*fondaparinux sodium 7.5mg/0.6ml syringe* 11
*fosamprenavir 700mg tab* 44
*fosfomycin 3gm powder for oral soln* 7
*fosinopril sodium 10mg tab* 25
*fosinopril sodium 20mg tab* 25
*fosinopril sodium 40mg tab* 25
*fosinopril sodium/hydrochlorothiazide 10-12.5mg tab* 27
*fosinopril sodium/hydrochlorothiazide 20-12.5mg tab* 27
FOTIVDA 0.89MG CAP 32
FOTIVDA 1.34MG CAP 32
FRUZAQLA 1MG CAP 29
FRUZAQLA 5MG CAP 29
FULPHILA 6MG/0.6ML SYRINGE 63
*furosemide 10mg/ml inj* 52
FUROSEMIDE 10MG/ML ORAL SOLN 52
*furosemide 20mg tab* 52
*furosemide 40mg tab* 52

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*furosemide 80mg tab* 52
FUROSEMIDE 8MG/ML ORAL SOLN 52
*fyavolv 0.0025-0.5mg tab* 73
*fyavolv 0.005-1mg tab* 73

**G**

*gabapentin 100mg cap* 13
*gabapentin 300mg cap* 13
*gabapentin 400mg cap* 13
*gabapentin 50mg/ml oral soln* 13
*gabapentin 600mg tab (neurontin equiv)* 13
*gabapentin 800mg tab* 13
*galantamine 12mg tab* 76
*galantamine 4mg tab* 76
*galantamine 8mg tab* 76
*galantamine hydrobromide 16mg er cap* 76
*galantamine hydrobromide 24mg er cap* 76
GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN 76
*galantamine hydrobromide 8mg er cap* 76
*gallifrey 5mg tab* 74
GAMMAGARD 10GM INJ 64
GAMMAGARD 10GM/100ML INJ 64
GAMMAGARD 2.5GM/25ML INJ 64
GAMMAGARD 5GM INJ 64
GAMMAGARD 5GM/50ML INJ 64
GAMMAGARD ERC 10GM/100ML INJ 64
GAMMAGARD ERC 5GM/50ML INJ 64
GAMUNEX 1GM/10ML INJ 65
GARDASIL 9 INJ 65
GARDASIL 9 SYRINGE 65
GAUZE PAD 2x2 (INSULIN USE) 66
GAVILYTE-C POWDER FOR ORAL SOLN 61
*gavilyte-g powder for oral soln* 61
*gavilyte-n powder for oral soln* 61
GAVRETO 100MG CAP 32
*gefitinib 250mg tab* 29
*gemfibrozil 600mg tab* 24
GEMTESA 75MG TAB 62
*generlac 10gm/15ml oral soln* 61
*gentamicin 0.1% topical cream* 54
*gentamicin 0.1% topical ointment* 54
*gentamicin 0.3% ophth soln* 74
GENTAMICIN 0.8MG/ML INJ 6
GENTAMICIN 1.2MG/ML INJ 6
GENTAMICIN 1.6MG/ML INJ 6
GENTAMICIN 1MG/ML INJ 6
*gentamicin 40mg/ml inj* 6
GENVOYA 150-150-200-10MG TAB 44
GILOTRIF 20MG TAB 29
GILOTRIF 30MG TAB 29
GILOTRIF 40MG TAB 29
*glatiramer acetate 20mg/ml syringe* 77
*glatiramer acetate 40mg/ml syringe* 77
*glatopa 20mg/ml syringe* 77
*glatopa 40mg/ml syringe* 77
*glimepiride 1mg tab* 22
*glimepiride 2mg tab* 22
*glimepiride 4mg tab* 22
*glipizide 10mg er tab* 22
*glipizide 10mg tab* 22
*glipizide 2.5mg er tab* 22
*glipizide 5mg er tab* 22
*glipizide 5mg tab* 22
*glipizide/metformin 2.5-250mg tab* 19
*glipizide/metformin 2.5-500mg tab* 19
*glipizide/metformin 5-500mg tab* 19
*glucose 50mg/ml inj* 68
*glucose 50mg/ml/potassium chloride 0.02meq/ml/sodium chloride 4.5mg/ml inj* 69
GLUCOSE 50MG/ML/SODIUM CHLORIDE 2MG/ML INJ 69
*glucose 50mg/ml/sodium chloride 4.5mg/ml inj* 69
*glucose 50mg/ml/sodium chloride 9mg/ml inj* 69
*glucose/potassium chloride/sodium chloride 5%-10meq-0.45% inj* 69
*glucose/potassium chloride/sodium chloride 5%-40meq-0.45% inj* 69
GLUCOSE/SODIUM CHLORIDE 10%-0.2% INJ 69
GLUCOSE/SODIUM CHLORIDE 10%-0.45% INJ 69
GLUCOSE/SODIUM CHLORIDE 2.5%-0.45% INJ 69
*glyburide 1.25mg tab* 22
*glyburide 2.5mg tab* 22
*glyburide 5mg tab* 22

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*glyburide/metformin 1.25-250mg tab* 19
*glyburide/metformin 2.5-500mg tab* 19
*glyburide/metformin 5-500mg tab* 19
*glycopyrrolate 1mg tab* 61
*glycopyrrolate 2mg tab* 61
GOMEKLI 1MG CAP 32
GOMEKLI 1MG TAB FOR ORAL SUSP 32
GOMEKLI 2MG CAP 32
*granisetron 1mg tab* 22
*griseofulvin 125mg tab* 23
*griseofulvin 250mg tab* 23
*griseofulvin 25mg/ml oral susp* 23
*griseofulvin 500mg tab* 23
*guanfacine 1mg er tab* 1
*guanfacine 1mg tab* 26
*guanfacine 2mg er tab* 1
*guanfacine 2mg tab* 26
*guanfacine 3mg er tab* 1
*guanfacine 4mg er tab* 1
GVOKE 1MG/0.2ML INJ 20
GVOKE 1MG/0.2ML SYRINGE 20
GVOKE HYPOPEN 0.5MG/0.1ML AUTO-INJECTOR 20
GVOKE HYPOPEN 1MG/0.2ML AUTO-INJECTOR 20

**H**

HADLIMA 40MG/0.4ML SYRINGE 47
HADLIMA 40MG/0.8ML SYRINGE 47
HADLIMA PUSHTOUCH 40MG/0.4ML AUTO-INJECTOR 47
HADLIMA PUSHTOUCH 40MG/0.8ML AUTO-INJECTOR 47
HAEGARDA 2000UNIT INJ 64
HAEGARDA 3000UNIT INJ 64
*hailey fe 1/20 tab 28-day pack* 71
*halobetasol propionate 0.05% topical cream* 56
*halobetasol propionate 0.05% topical ointment* 56
*haloperidol 0.5mg tab* 39
*haloperidol 10mg tab* 39
*haloperidol 1mg tab* 39
*haloperidol 20mg tab* 39
*haloperidol 2mg tab* 39
*haloperidol 2mg/ml oral soln* 39
*haloperidol 5mg tab* 39
*haloperidol 5mg/ml inj* 39
*haloperidol decanoate 100mg/ml (1ml) inj* 39
*haloperidol decanoate 100mg/ml (5ml) inj* 39
*haloperidol decanoate 50mg/ml (1ml) inj* 39
*haloperidol decanoate 50mg/ml (5ml) inj* 39
HAVRIX 1440ELU/ML SYRINGE 65
HAVRIX 720ELU/0.5ML SYRINGE 65
*heather 0.35mg tab 28-day pack* 71
*heparin sodium porcine 10000unit/ml inj* 11
*heparin sodium porcine 1000unit/ml inj* 12
*heparin sodium porcine 20000unit/ml inj* 12
*heparin sodium porcine 5000unit/ml inj* 12
HEPLISAV-B 20MCG/0.5ML SYRINGE 65
HERNEXEOS 60MG TAB 36
HIBERIX 10MCG INJ 65
HUMALOG 100UNIT/ML CARTRIDGE 21
HUMALOG JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMALOG KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMALOG KWIKPEN 200UNIT/ML PEN INJ (3ML) 21
HUMALOG MIX (50/50) KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMALOG MIX (75/25) 100UNIT/ML INJ 21
HUMALOG MIX (75/25) KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMULIN (70/30) 100UNIT/ML INJ 21
HUMULIN (70/30) KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMULIN N 100UNIT/ML INJ 21
HUMULIN N KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
HUMULIN R 100UNIT/ML INJ 21
HUMULIN R U-500 KWIKPEN 500UNIT/ML PEN INJ (3ML) 21
*hydralazine 100mg tab* 52
*hydralazine 10mg tab* 52
*hydralazine 25mg tab* 52
*hydralazine 50mg tab* 52
*hydrochlorothiazide 12.5mg cap* 52
*hydrochlorothiazide 12.5mg tab* 52

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*hydrochlorothiazide 25mg tab* 52
*hydrochlorothiazide 50mg tab* 52
*hydrochlorothiazide/irbesartan 12.5-150mg tab* 27
*hydrochlorothiazide/irbesartan 12.5-300mg tab* 27
*hydrochlorothiazide/lisinopril 12.5-10mg tab* 28
*hydrochlorothiazide/lisinopril 12.5-20mg tab* 28
*hydrochlorothiazide/lisinopril 25-20mg tab* 28
*hydrochlorothiazide/losartan potassium 12.5-100mg tab* 28
*hydrochlorothiazide/losartan potassium 12.5-50mg tab* 28
*hydrochlorothiazide/losartan potassium 25-100mg tab* 28
*hydrochlorothiazide/metoprolol tartrate 25-100mg tab* 28
*hydrochlorothiazide/metoprolol tartrate 25-50mg tab* 28
*hydrochlorothiazide/metoprolol tartrate 50-100mg tab* 28
*hydrochlorothiazide/olmesartan medoxomil 12.5-20mg tab* 28
*hydrochlorothiazide/olmesartan medoxomil 12.5-40mg tab* 28
*hydrochlorothiazide/olmesartan medoxomil 25-40mg tab* 28
*hydrochlorothiazide/spironolactone 25-25mg tab* 52
*hydrochlorothiazide/telmisartan 12.5-40mg tab* 28
*hydrochlorothiazide/telmisartan 12.5-80mg tab* 28
*hydrochlorothiazide/telmisartan 25-80mg tab* 28
*hydrochlorothiazide/triamterene 25-37.5mg cap* 52
*hydrochlorothiazide/triamterene 25-37.5mg tab* 52
*hydrochlorothiazide/triamterene 50-75mg tab* 52
*hydrochlorothiazide/valsartan 12.5-160mg tab* 28
*hydrochlorothiazide/valsartan 12.5-320mg tab* 28
*hydrochlorothiazide/valsartan 12.5-80mg tab* 28
*hydrochlorothiazide/valsartan 25-160mg tab* 28
*hydrochlorothiazide/valsartan 25-320mg tab* 28
*hydrocodone bitartrate/acetaminophen 0.5-21.7mg/ml oral soln* 4
*hydrocodone bitartrate/acetaminophen 10-325mg tab* 4
*hydrocodone bitartrate/acetaminophen 5-325mg tab* 4
*hydrocodone bitartrate/acetaminophen 7.5-325mg tab* 4
*hydrocodone bitartrate/ibuprofen 7.5-200mg tab* 4
*hydrocortisone 1% topical cream* 56
*hydrocortisone 1.67mg/ml enema* 5
*hydrocortisone 10mg tab* 58
*hydrocortisone 2.5% perianal cream* 5
HYDROCORTISONE 2.5% TOPICAL LOTION 56
*hydrocortisone 2.5% topical ointment* 56
*hydrocortisone 20mg tab* 58
*hydrocortisone 5mg tab* 58
*hydromorphone 2mg tab* 3
*hydromorphone 4mg tab* 3
*hydromorphone 8mg tab* 3
*hydroxychloroquine sulfate 200mg tab* 37
*hydroxyurea 500mg cap* 36
*hydroxyzine 10mg tab* 6
*hydroxyzine 25mg tab* 6
*hydroxyzine 2mg/ml oral soln* 6
*hydroxyzine 50mg tab* 6
*hydroxyzine pamoate 25mg cap* 6
*hydroxyzine pamoate 50mg cap* 6
HYRNUO 10MG TAB 32

**I**

*ibandronate 150mg tab* 57
IBRANCE 100MG TAB 32
IBRANCE 125MG CAP 32
IBRANCE 125MG TAB 32
IBRANCE 75MG TAB 32
IBTROZI 200MG CAP 32
*ibu 600mg tab* 3
*ibu 800mg tab* 3
*ibuprofen 400mg tab* 3
*ibuprofen 600mg tab* 3
*ibuprofen 800mg tab* 3
*icatibant 30mg/3ml syringe* 64
*iclevia tab 91-day pack* 71
ICLUSIG 10MG TAB 33
ICLUSIG 15MG TAB 33
ICLUSIG 30MG TAB 33
ICLUSIG 45MG TAB 33
*icosapent ethyl 0.5gm cap* 24
*icosapent ethyl 1gm cap* 24
IDHIFA 100MG TAB 33

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

IDHIFA 50MG TAB 33
IDVYNSO 100-0.25MG TAB 44
*imatinib 100mg tab* 33
*imatinib 400mg tab* 33
IMBRUVICA 140MG CAP 33
IMBRUVICA 140MG TAB 33
IMBRUVICA 280MG TAB 33
IMBRUVICA 420MG TAB 33
IMBRUVICA 70MG CAP 33
IMBRUVICA 70MG/ML ORAL SUSP 33
*imipramine 10mg tab* 19
*imipramine 25mg tab* 19
*imipramine 50mg tab* 19
*imiquimod 5% topical cream* 56
IMKELDI 80MG/ML ORAL SOLN 33
IMOVAX 2.5UNIT/ML INJ 65
*incassia 0.35mg tab 28-day pack* 71
INCRELEX 40MG/4ML INJ 59
INCRUSE ELLIPTA 62.5MCG/INH POWDER INHALER 78
*indapamide 1.25mg tab* 52
*indapamide 2.5mg tab* 52
*indomethacin 25mg cap* 3
*indomethacin 50mg cap* 3
*indomethacin 75mg er cap* 3
INFANRIX SYRINGE 65
INLURIYO 200MG TAB 30
INLYTA 1MG TAB 29
INLYTA 5MG TAB 29
INQOVI 35-100MG TAB PACK (5) 31
INREBIC 100MG CAP 33
INSULIN GLARGINE MAX SOLOSTAR 300UNIT/ML PEN INJ (3ML) 21
INSULIN GLARGINE SOLOSTAR 300UNIT/ML PEN INJ (1.5ML) 21
INSULIN LISPRO 100UNIT/ML INJ 21
INSULIN LISPRO JUNIOR KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
INSULIN LISPRO KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
INSULIN LISPRO PROTAMINE HUMAN (75/25) 100UNIT/ML PEN INJ (3ML) 21
INSULIN PEN NEEDLE 66
INSULIN SYRINGE 66
INSULIN SYRINGE (DISP) U-100 0.3ML 66
INSULIN SYRINGE (DISP) U-100 1/2ML 66
INSULIN SYRINGE (DISP) U-100 1ML 66
INTELENCE 25MG TAB 44
INTRALIPID 20% INJ 69
INTRALIPID 30% INJ 69
*introvale tab 91-day pack* 71
INVEGA SUSTENNA 117MG/0.75ML SYRINGE 40
INVEGA SUSTENNA 156MG/ML SYRINGE 40
INVEGA SUSTENNA 234MG/1.5ML SYRINGE 40
INVEGA SUSTENNA 39MG/0.25ML SYRINGE 40
INVEGA SUSTENNA 78MG/0.5ML SYRINGE 40
IPOL INJ 65
*ipratropium bromide 0.03% (0.021mg/act) nasal inhaler* 68
*ipratropium bromide 0.06% (0.042mg/act) nasal inhaler* 68
*ipratropium bromide 0.5mg/2.5ml (0.02%) neb soln* 78
*ipratropium/albuterol 0.5-2.5mg/3ml neb soln* 79
*irbesartan 150mg tab* 26
*irbesartan 300mg tab* 26
*irbesartan 75mg tab* 26
ISENTRESS 100MG CHEW TAB 44
ISENTRESS 100MG GRANULES FOR ORAL SUSP 44
ISENTRESS 25MG CHEW TAB 44
ISENTRESS 400MG TAB 44
ISENTRESS HD 600MG TAB 44
*isibloom tab 28-day pack* 71
*isoniazid 100mg tab* 28
*isoniazid 10mg/ml oral soln* 28
*isoniazid 300mg tab* 28
*isosorbide dinitrate 10mg tab* 52
*isosorbide dinitrate 20mg tab* 53
*isosorbide dinitrate 30mg tab* 53
*isosorbide dinitrate 5mg tab* 53
*isosorbide mononitrate 10mg tab* 53
*isosorbide mononitrate 120mg er tab* 53
*isosorbide mononitrate 20mg tab* 53
*isosorbide mononitrate 30mg er tab* 53
*isosorbide mononitrate 60mg er tab* 53

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*isotretinoin 10mg cap* 54
*isotretinoin 20mg cap* 54
*isotretinoin 30mg cap* 54
*isotretinoin 40mg cap* 54
ISTURISA 1MG TAB 59
ISTURISA 5MG TAB 59
ITOVEBI 3MG TAB 33
ITOVEBI 9MG TAB 33
*itraconazole 100mg cap* 23
*ivabradine 5mg tab* 51
*ivabradine 7.5mg tab* 51
*ivermectin 3mg tab* 37
IWILFIN 192MG TAB 37
IXIARO 0.006MG/0.5ML SYRINGE 65

**J**

*jaimiess tab 91-day pack* 71
JAKAFI 10MG TAB 33
JAKAFI 15MG TAB 33
JAKAFI 20MG TAB 33
JAKAFI 25MG TAB 33
JAKAFI 5MG TAB 33
*jantoven 10mg tab* 12
*jantoven 1mg tab* 12
*jantoven 2.5mg tab* 12
*jantoven 2mg tab* 12
*jantoven 3mg tab* 12
*jantoven 4mg tab* 12
*jantoven 5mg tab* 12
*jantoven 6mg tab* 12
*jantoven 7.5mg tab* 12
JARDIANCE 10MG TAB 22
JARDIANCE 25MG TAB 22
*jasmiel tab 28-day pack* 71
JAYPIRCA 100MG TAB 33
JAYPIRCA 50MG TAB 33
JIDEYTRO 100MG TAB 33
JIDEYTRO 25MG TAB 33
*jinteli 0.005-1mg tab* 73
*juleber tab 28-day pack* 71
JULUCA 50-25MG TAB 44
*junel 1.5/30 tab 21-day pack* 71
*junel 1/20 tab 21-day pack* 71
*junel fe 1.5/30 tab 28-day pack* 71
*junel fe tab 1/20 28-day pack* 71
JYNNEOS 0.5ML INJ 65

**K**

KALYDECO 13.4MG ORAL GRANULES 80
KALYDECO 150MG TAB 80
KALYDECO 25MG ORAL GRANULES 80
KALYDECO 5.8MG ORAL GRANULES 80
KALYDECO 50MG ORAL GRANULES 80
KALYDECO 75MG ORAL GRANULES 80
*kariva tab 28-day pack* 71
*kcl/nacl 20meq-0.9% inj* 69
*kelnor 1/35 tab 28-day pack* 71
KERENDIA 10MG TAB 59
KERENDIA 20MG TAB 59
KERENDIA 40MG TAB 59
KESIMPTA 20MG/0.4ML PEN INJ 77
*ketoconazole 2% shampoo* 54
*ketoconazole 2% topical cream* 54
*ketoconazole 200mg tab* 23
KETOROLAC TROMETHAMINE 0.4% OPHTH SOLN 75
*ketorolac tromethamine 0.5% ophth soln* 75
*ketorolac tromethamine 10mg tab* 3
KINERET 100MG/0.67ML SYRINGE 47
KINRIX SYRINGE 65
*kionex 15gm/60ml oral susp* 67
KISQALI TAB 200MG DAILY DOSE PACK (21) 33
KISQALI TAB 400MG DAILY DOSE PACK (42) 33
KISQALI TAB 600MG DAILY DOSE PACK (63) 33
*klor-con 10meq er tab* 69
*klor-con 10meq micro er tab* 69
*klor-con 15meq micro er tab* 69
*klor-con 20meq micro er tab* 69
*klor-con 20meq powder for oral soln* 69
*klor-con 8meq er tab* 69
KLOXXADO 8MG/0.1ML NASAL SPRAY 5
KOMZIFTI 200MG CAP 36
KOSELUGO 10MG CAP 33
KOSELUGO 25MG CAP 33
KOSELUGO 5MG SPRINKLE CAP 33
KOSELUGO 7.5MG SPRINKLE CAP 33
*kourzeq 0.1% oral paste* 53
KRAZATI 200MG TAB 33
*kurvelo tab 28-day pack* 71

**L**

*labetalol 100mg tab* 49
*labetalol 200mg tab* 49
*labetalol 300mg tab* 49
*lacosamide 100mg tab* 14
*lacosamide 10mg/ml oral soln* 14
*lacosamide 150mg tab* 14
*lacosamide 200mg tab* 14
*lacosamide 50mg tab* 14
*lactulose 667mg/ml oral soln* 61
*lamivudine 100mg tab* 45

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*lamivudine 10mg/ml oral soln* 44
*lamivudine 150mg tab* 44
*lamivudine 300mg tab* 44
*lamivudine/zidovudine 150-300mg tab* 44
*lamotrigine 100mg tab* 14
*lamotrigine 150mg tab* 14
*lamotrigine 200mg tab* 14
*lamotrigine 25mg chew tab* 14
*lamotrigine 25mg tab* 14
*lamotrigine 5mg chew tab* 14
*lansoprazole 15mg dr cap* 62
*lansoprazole 30mg dr cap* 62
LANTUS 100UNIT/ML INJ 21
LANTUS SOLOSTAR 100UNIT/ML PEN INJ (3ML) 21
*lapatinib ditosylate 250mg tab* 33
*larin 1.5/30 tab 21-day pack* 71
*larin 1/20 tab 21-day pack* 71
*larin fe 1.5/30 tab 28-day pack* 71
*larin fe tab 1/20 28-day pack* 71
*latanoprost 0.005% ophth soln* 76
LAZCLUZE 240MG TAB 29
LAZCLUZE 80MG TAB 30
*leflunomide 10mg tab* 2
*leflunomide 20mg tab* 2
*lenalidomide 10mg cap* 31
*lenalidomide 15mg cap* 31
*lenalidomide 2.5mg cap* 31
*lenalidomide 20mg cap* 31
*lenalidomide 25mg cap* 31
*lenalidomide 5mg cap* 31
LENVIMA 10MG DAILY DOSE PACK (30) 29
LENVIMA 12MG DAILY DOSE PACK (90) 29
LENVIMA 14MG DAILY DOSE PACK (60) 29
LENVIMA 18MG DAILY DOSE PACK (90) 29
LENVIMA 20MG DAILY DOSE PACK (60) 29
LENVIMA 24MG DAILY DOSE PACK (90) 29
LENVIMA 4MG DAILY DOSE PACK (30) 29
LENVIMA 8MG DAILY DOSE PACK (60) 29
LEQEMBI IQLIK 250MG/1.25ML AUTO-INJECTOR 76
LEQEMBI IQLIK 360MG/1.8ML AUTO-INJECTOR 76
*lessina tab 28-day pack* 71
*letrozole 2.5mg tab* 30
*leucovorin 10mg tab* 37
*leucovorin 15mg tab* 37
*leucovorin 25mg tab* 37
*leucovorin 5mg tab* 37
LEUKERAN 2MG TAB 29
LEUKINE 250MCG INJ 63
*levetiracetam 1000mg tab* 14
*levetiracetam 100mg/ml oral soln* 14
*levetiracetam 250mg tab* 14
*levetiracetam 500mg er tab* 14
*levetiracetam 500mg tab* 14
*levetiracetam 750mg er tab* 14
*levetiracetam 750mg tab* 14
LEVOBUNOLOL 0.5% OPHTH SOLN 74
*levocarnitine 100mg/ml oral soln* 57
*levocarnitine 330mg tab* 57
*levocetirizine 5mg tab* 78
*levofloxacin 250mg tab* 7
*levofloxacin 25mg/ml oral soln* 7
*levofloxacin 500mg tab* 7
*levofloxacin 500mg/100ml inj* 7
*levofloxacin 750mg tab* 7
*levofloxacin 750mg/150ml inj* 7
*levonest tab 28-day pack* 71
*levonorgestrel/ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg tab 28-day pack* 71
*levothyroxine 100mcg tab* 59
*levothyroxine 112mcg tab* 60
*levothyroxine 125mcg tab* 60
*levothyroxine 137mcg tab* 60
*levothyroxine 150mcg tab* 60
*levothyroxine 175mcg tab* 60
*levothyroxine 200mcg tab* 60
*levothyroxine 25mcg tab* 60
*levothyroxine 300mcg tab* 60
*levothyroxine 50mcg tab* 60
*levothyroxine 75mcg tab* 60
*levothyroxine 88mcg tab* 60
*levoxyl 100mcg tab* 60
*levoxyl 112mcg tab* 60
*levoxyl 125mcg tab* 60
*levoxyl 137mcg tab* 60
*levoxyl 150mcg tab* 60
*levoxyl 175mcg tab* 60
*levoxyl 200mcg tab* 60
*levoxyl 25mcg tab* 60
*levoxyl 50mcg tab* 60
*levoxyl 75mcg tab* 60
*levoxyl 88mcg tab* 60
*l-glutamine 5gm powder for oral soln* 67
*lidocaine 4% mucous membrane topical soln* 56
*lidocaine 5% patch* 56
*lidocaine 5% topical ointment* 56

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*lidocaine viscous 2% mucous membrane topical soln* 53
*lidocaine/prilocaine 2.5-2.5% topical cream* 56
LIFYORLI CAP 125MG 1-DOSE SUPPLY PACK (2) 30
LIFYORLI CAP 125MG 3-DOSE SUPPLY PACK (6) 30
LIFYORLI CAP 125MG 9-DOSE SUPPLY PACK (18) 30
LIFYORLI CAP 150MG 1-DOSE SUPPLY PACK (3) 30
LIFYORLI CAP 150MG 3-DOSE SUPPLY PACK (9) 30
LIFYORLI CAP 150MG 9-DOSE SUPPLY PACK (27) 30
LILETTA 20.1MCG/DAY INTRAUTERINE SYSTEM 71
*linezolid 100mg/5ml oral susp* 7
*linezolid 600mg tab* 7
*linezolid 600mg/300ml inj* 7
LINZESS 145MCG CAP 61
LINZESS 290MCG CAP 61
LINZESS 72MCG CAP 61
*liomny 25mcg tab* 60
*liomny 50mcg tab* 60
*liomny 5mcg tab* 60
*liothyronine sodium 25mcg tab* 60
*liothyronine sodium 50mcg tab* 60
*liothyronine sodium 5mcg tab* 60
*lisdexamfetamine dimesylate 10mg cap* 1
*lisdexamfetamine dimesylate 20mg cap* 1
*lisdexamfetamine dimesylate 30mg cap* 1
*lisdexamfetamine dimesylate 40mg cap* 1
*lisdexamfetamine dimesylate 50mg cap* 1
*lisdexamfetamine dimesylate 60mg cap* 1
*lisdexamfetamine dimesylate 70mg cap* 1
*lisinopril 10mg tab* 25
*lisinopril 2.5mg tab* 25
*lisinopril 20mg tab* 25
*lisinopril 30mg tab* 25
*lisinopril 40mg tab* 25
*lisinopril 5mg tab* 25
LITFULO 50MG CAP 56
*lithium carbonate 150mg cap* 38
*lithium carbonate 300mg cap* 38
*lithium carbonate 300mg er tab* 38
*lithium carbonate 300mg tab* 38
*lithium carbonate 450mg er tab* 38
LITHIUM CARBONATE 600MG CAP 38
*lithium citrate 60mg/ml oral soln* 38
LIVTENCITY 200MG TAB 46
*lo jaimiess tab 91-day pack* 71
LOKELMA 10GM POWDER FOR ORAL SUSP 67
LOKELMA 5GM POWDER FOR ORAL SUSP 67
*lomustine 100mg cap* 29
*lomustine 10mg cap* 29
*lomustine 40mg cap* 29
LONSURF 6.14-15MG TAB 31
LONSURF 8.19-20MG TAB 31
*loperamide 2mg cap* 61
*lopinavir/ritonavir 100-25mg tab* 44
*lopinavir/ritonavir 200-50mg tab* 44
*lorazepam 0.5mg tab* 6
*lorazepam 1mg tab* 6
*lorazepam 2mg tab* 6
*lorazepam 2mg/ml oral soln* 6
LORBRENA 100MG TAB 33
LORBRENA 25MG TAB 33
*loryna tab 28-day pack* 71
*losartan potassium 100mg tab* 26
*losartan potassium 25mg tab* 26
*losartan potassium 50mg tab* 26
*loteprednol etabonate 0.5% ophth gel* 75
*loteprednol etabonate 0.5% ophth susp* 75
*lovastatin 10mg tab* 24
*lovastatin 20mg tab* 24
*lovastatin 40mg tab* 24
*low-ogestrel tab 28-day pack* 71
*loxapine 10mg cap* 41
*loxapine 25mg cap* 41
*loxapine 50mg cap* 41
*loxapine 5mg cap* 41
*lubiprostone 24mcg cap* 61
*lubiprostone 8mcg cap* 61
*luizza 1.5/30 tab 21-day pack* 71
*luizza 1/20 tab 21-day pack* 71
LUMAKRAS 120MG TAB 33

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

LUMAKRAS 240MG TAB 33
LUMAKRAS 320MG TAB 33
LUMRYZ 4.5GM GRANULES FOR ORAL SUSP 81
LUMRYZ 6GM GRANULES FOR ORAL SUSP 81
LUMRYZ 7.5GM GRANULES FOR ORAL SUSP 81
LUMRYZ 9GM GRANULES FOR ORAL SUSP 81
LUMRYZ GRANULES FOR ORAL SUSP 28-DAY STARTER PACK (28) 81
LUPRON 11.25MG SYRINGE (3 MONTH) 30
LUPRON 3.75MG SYRINGE (1 MONTH) 30
*lurasidone 120mg tab* 39
*lurasidone 20mg tab* 39
*lurasidone 40mg tab* 39
*lurasidone 60mg tab* 39
*lurasidone 80mg tab* 39
LYBALVI 10-10MG TAB 77
LYBALVI 15-10MG TAB 77
LYBALVI 20-10MG TAB 78
LYBALVI 5-10MG TAB 78
*lyleq 0.35mg tab 28-day pack* 71
LYNPARZA 100MG TAB 33
LYNPARZA 150MG TAB 33
LYSODREN 500MG TAB 30
LYTGOBI TAB 12MG DAILY DOSE PACK (21) 33
LYTGOBI TAB 16MG DAILY DOSE PACK (28) 33
LYTGOBI TAB 20MG DAILY DOSE PACK (35) 34
LYUMJEV 100UNIT/ML INJ 21
LYUMJEV KWIKPEN 100UNIT/ML PEN INJ (3ML) 21
LYUMJEV KWIKPEN 200UNIT/ML PEN INJ (3ML) 21
*lyza 0.35mg tab 28-day pack* 71


**M**


*macitentan 10mg tab* 80
*magnesium sulfate 500mg/ml inj* 69
*magnesium sulfate 500mg/ml syringe* 69
*malathion 0.5% topical lotion* 57
*maraviroc 150mg tab* 44
*maraviroc 300mg tab* 44
*marlissa tab 28-day pack* 71
MARPLAN 10MG TAB 16
MATULANE 50MG CAP 36
MAVYRET 100-40MG TAB 45
MAVYRET 50-20MG ORAL PELLET 45
MAYZENT 0.25MG TAB 77
MAYZENT 1MG TAB 77
MAYZENT 2MG TAB 77
MAYZENT TAB STARTER PACK (12) 77
MAYZENT TAB STARTER PACK (7) 77
*meclizine 12.5mg tab* 22
*meclizine 25mg tab* 22
*medroxyprogesterone acetate 10mg tab* 74
*medroxyprogesterone acetate 150mg/ml inj* 71
*medroxyprogesterone acetate 150mg/ml syringe* 71
*medroxyprogesterone acetate 2.5mg tab* 74
*medroxyprogesterone acetate 5mg tab* 74
*mefloquine 250mg tab* 37
MEGESTROL ACETATE 125MG/ML ORAL SUSP 74
*megestrol acetate 20mg tab* 30
*megestrol acetate 40mg tab* 30
*megestrol acetate 40mg/ml oral susp* 30
MEKINIST 0.05MG/ML ORAL SOLN 34
MEKINIST 0.5MG TAB 34
MEKINIST 2MG TAB 34
MEKTOVI 15MG TAB 34
*meleya 0.35mg tab 28-day pack* 71
*meloxicam 15mg tab* 3
*meloxicam 7.5mg tab* 3
*memantine 10mg tab* 76
*memantine 14mg er cap* 76
*memantine 21mg er cap* 76
*memantine 28mg er cap* 76
*memantine 2mg/ml oral soln* 76
*memantine 5mg tab* 76
*memantine 7mg er cap* 76
MENQUADFI INJ 65
MENVEO INJ 65
*mercaptopurine 2000mg/100ml oral susp* 29
*mercaptopurine 50mg tab* 29
*meropenem 1gm inj* 7
*meropenem 500mg inj* 7
*mesalamine 1200mg dr tab* 66
*mesalamine 1gm rectal supp* 66
*mesalamine 375mg er cap* 66
MESALAMINE 400MG DR CAP 66
*mesalamine 66.7mg/ml enema* 66
*mesna 400mg tab* 37
*metaxalone 800mg tab* 43


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*metformin 1000mg tab* 20
*metformin 500mg er tab* 20
*metformin 500mg tab* 20
*metformin 750mg er tab* 20
*metformin 850mg tab* 20
*metformin/pioglitazone 150-15mg tab* 19
*metformin/pioglitazone 850-15mg tab* 19
*metformin/sitagliptin phosphate 1000-100mg er tab* 19
*metformin/sitagliptin phosphate 1000-50mg er tab* 19
*metformin/sitagliptin phosphate 1000-50mg tab* 19
*metformin/sitagliptin phosphate 500-50mg er tab* 19
*metformin/sitagliptin phosphate 500-50mg tab* 19
*methadone 10mg tab* 3
METHADONE 1MG/ML ORAL SOLN 3
METHADONE 2MG/ML ORAL SOLN 3
*methadone 5mg tab* 3
*methazolamide 25mg tab* 51
*methazolamide 50mg tab* 51
*methenamine hippurate 1gm tab* 8
*methimazole 10mg tab* 58
*methimazole 5mg tab* 58
*methocarbamol 500mg tab* 43
*methocarbamol 750mg tab* 43
*methotrexate 2.5mg tab* 29
METHOTREXATE 25MG/ML INJ 29
*methotrexate 50mg/2ml inj* 29
METHOXSALEN 10MG CAP 55
*methsuximide 300mg cap* 16
*methylphenidate 10mg er tab* 2
*methylphenidate 10mg tab* 2
*methylphenidate 18mg er osmotic tab* 2
*methylphenidate 1mg/ml oral soln* 2
*methylphenidate 20mg er tab* 2
*methylphenidate 20mg tab* 2
*methylphenidate 27mg er osmotic tab* 2
*methylphenidate 2mg/ml oral soln* 2
*methylphenidate 36mg er osmotic tab* 2
*methylphenidate 54mg er osmotic tab* 2
*methylphenidate 5mg tab* 2
*methylprednisolone 16mg tab* 58
*methylprednisolone 32mg tab* 58
*methylprednisolone 4mg tab* 58
*methylprednisolone 4mg tab pack (21)* 58
*methylprednisolone 8mg tab* 58
*metoclopramide 10mg tab* 61
*metoclopramide 1mg/ml oral soln* 61
*metoclopramide 5mg tab* 61
*metolazone 10mg tab* 52
*metolazone 2.5mg tab* 52
*metolazone 5mg tab* 52
*metoprolol succinate 100mg er tab* 49
*metoprolol succinate 200mg er tab* 49
*metoprolol succinate 25mg er tab* 49
*metoprolol succinate 50mg er tab* 49
*metoprolol tartrate 100mg tab* 49
*metoprolol tartrate 25mg tab* 49
*metoprolol tartrate 37.5mg tab* 49
*metoprolol tartrate 50mg tab* 49
*metoprolol tartrate 75mg tab* 49
*metronidazole 0.75% topical cream* 57
*metronidazole 0.75% topical gel* 57
*metronidazole 0.75% vaginal gel* 8
*metronidazole 1% topical gel* 57
*metronidazole 250mg tab* 8
*metronidazole 500mg tab* 8
*metronidazole 5mg/ml inj* 8
*metyrosine 250mg cap* 28
*mexiletine 150mg cap* 48
*mexiletine 200mg cap* 48
*mexiletine 250mg cap* 48
*micafungin sodium 100mg inj* 23
*micafungin sodium 50mg inj* 23
*microgestin 1.5/30 tab 21-day pack* 71
*microgestin 1/20 tab 21-day pack* 71
*microgestin fe 1.5/30 tab 28-day pack* 72
*microgestin fe 1/20 tab 28-day pack* 72
*midodrine 10mg tab* 48

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*midodrine 2.5mg tab* 48
*midodrine 5mg tab* 48
MIEBO 1.338GM/ML OPHTH SOLN 75
*mifepristone 300mg tab* 20
*mili tab 28-day pack* 72
*mimvey tab 28-day pack* 74
*minocycline 100mg cap* 8
*minocycline 50mg cap* 8
*minocycline 75mg cap* 8
*minoxidil 10mg tab* 52
*minoxidil 2.5mg tab* 52
*mirtazapine 15mg odt* 16
*mirtazapine 15mg tab* 16
*mirtazapine 30mg odt* 16
*mirtazapine 30mg tab* 16
*mirtazapine 45mg odt* 16
*mirtazapine 45mg tab* 16
*mirtazapine 7.5mg tab* 16
*misoprostol 100mcg tab* 62
*misoprostol 200mcg tab* 62
M-M-R II INJ 65
*modafinil 100mg tab* 2
*modafinil 200mg tab* 2
MODEYSO 125MG CAP 36
*moexipril 15mg tab* 25
*moexipril 7.5mg tab* 25
MOLINDONE 10MG TAB 39
MOLINDONE 25MG TAB 39
MOLINDONE 5MG TAB 39
*mometasone furoate 0.1% topical cream* 56
*mometasone furoate 0.1% topical lotion* 56
*mometasone furoate 0.1% topical ointment* 56
*montelukast 10mg tab* 78
*montelukast 4mg chew tab* 78
*montelukast 5mg chew tab* 78
*morphine sulfate 100mg er tab* 3
*morphine sulfate 15mg er tab* 3
*morphine sulfate 15mg tab* 3
*morphine sulfate 200mg er tab* 3
MORPHINE SULFATE 20MG/5ML ORAL SOLN 3
*morphine sulfate 20mg/ml oral soln* 4
*morphine sulfate 2mg/ml oral soln* 4
*morphine sulfate 30mg er tab* 4
*morphine sulfate 30mg tab* 4
*morphine sulfate 60mg er tab* 4
MOUNJARO 10MG/0.5ML AUTO-INJECTOR 20
MOUNJARO 12.5MG/0.5ML AUTO-INJECTOR 20
MOUNJARO 15MG/0.5ML AUTO-INJECTOR 20
MOUNJARO 2.5MG/0.5ML AUTO-INJECTOR 20
MOUNJARO 5MG/0.5ML AUTO-INJECTOR 20
MOUNJARO 7.5MG/0.5ML AUTO-INJECTOR 20
MOVANTIK 12.5MG TAB 61
MOVANTIK 25MG TAB 61
*moxifloxacin 0.5% ophth soln* 74
MOXIFLOXACIN 1.6MG/ML INJ 8
*moxifloxacin 400mg tab* 8
MRESVIA 50MCG/0.5ML SYRINGE 65
MULTAQ 400MG TAB 48
*mupirocin 2% topical ointment* 54
*mycophenolate mofetil 200mg/ml oral susp* 64
*mycophenolate mofetil 250mg cap* 64
*mycophenolate mofetil 500mg tab* 64
*mycophenolic acid 180mg dr tab* 64
*mycophenolic acid 360mg dr tab* 64
MYRBETRIQ 25MG ER TAB 62
MYRBETRIQ 50MG ER TAB 62

**N**

*nabumetone 500mg tab* 3
*nabumetone 750mg tab* 3
*nadolol 20mg tab* 49
*nadolol 40mg tab* 49
*nadolol 80mg tab* 49
*nafcillin 100mg/ml inj* 10
*nafcillin 1gm inj* 10
*nafcillin 2gm inj* 10
NALOXONE 0.4MG/ML CARTRIDGE 5
*naloxone 0.4mg/ml inj* 5
*naloxone 0.4mg/ml syringe* 5
*naloxone 2mg/2ml syringe* 5
*naltrexone 50mg tab* 5
*naproxen 250mg tab* 3
*naproxen 375mg dr tab* 3
*naproxen 375mg tab* 3
*naproxen 500mg tab* 3
*naratriptan 1mg tab* 67
*naratriptan 2.5mg tab* 67
NATACYN 5% OPHTH SUSP 74
*nateglinide 120mg tab* 20
*nateglinide 60mg tab* 20

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAYZILAM 5MG/0.1ML NASAL SPRAY 13
*nebivolol 10mg tab* 49
*nebivolol 2.5mg tab* 49
*nebivolol 20mg tab* 49
*nebivolol 5mg tab* 49
*necon 0.5/35 tab 28-day pack* 72
NEFAZODONE 100MG TAB 17
NEFAZODONE 150MG TAB 17
NEFAZODONE 200MG TAB 17
NEFAZODONE 250MG TAB 17
NEFAZODONE 50MG TAB 17
NEMLUVIO 30MG AUTO-INJECTOR 47
*neomycin sulfate 500mg tab* 6
NEOMYCIN/BACITRACIN/POLYMYXIN 5MG-400UNIT-10000UNIT OPHTH OINTMENT 74
NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN 75
NEOMYCIN/POLYMYXIN/BACITRACIN/HYDROCORTISONE 1% OPHTH OINTMENT 75
*neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln* 76
*neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp* 76
NERLYNX 40MG TAB 34
NEVIRAPINE 10MG/ML ORAL SUSP 44
*nevirapine 200mg tab* 44
*nevirapine 400mg er tab* 44
NEXLETOL 180MG TAB 24
NEXLIZET 180-10MG TAB 24
NEXPLANON 68MG IMPLANT 72
*niacin 1000mg er tab* 24
*niacin 500mg er tab* 24
*niacin 750mg er tab* 24
NICOTROL 10MG/ML NASAL INHALER 5
*nifedipine 30mg er tab* 50
*nifedipine 30mg osmotic er tab* 50
*nifedipine 60mg er tab* 50
*nifedipine 60mg osmotic er tab* 50
*nifedipine 90mg er tab* 50
*nifedipine 90mg osmotic er tab* 50
*nikki tab 28-day pack* 72
*nilotinib 150mg cap* 34
*nilotinib 200mg cap* 34
*nilotinib 50mg cap* 34
NILUTAMIDE 150MG TAB 30
*nimodipine 30mg cap* 50
NINLARO 2.3MG CAP 34
NINLARO 3MG CAP 34
NINLARO 4MG CAP 34
*nintedanib 100mg cap* 80
*nintedanib 150mg cap* 80
*nitazoxanide 500mg tab* 37
*nitro-bid 2% topical ointment* 53
*nitrofurantoin macro/nitrofurantoin mono 100mg cap* 8
*nitrofurantoin macrocrystals 100mg cap* 8
*nitrofurantoin macrocrystals 50mg cap* 8
*nitroglycerin 0.1mg/hr patch* 53
*nitroglycerin 0.2mg/hr patch* 53
*nitroglycerin 0.3mg sl tab* 53
*nitroglycerin 0.4% rectal ointment* 5
*nitroglycerin 0.4mg sl tab* 53
*nitroglycerin 0.4mg/hr patch* 53
*nitroglycerin 0.6mg sl tab* 53
*nitroglycerin 0.6mg/hr patch* 53
NIVESTYM 300MCG/0.5ML SYRINGE 63
NIVESTYM 300MCG/ML INJ 63
NIVESTYM 480MCG/0.8ML SYRINGE 63
NIVESTYM 480MCG/1.6ML INJ 63
*nora-be 0.35mg tab 28-day pack* 72
NORDITROPIN 10MG/1.5ML PEN INJ 59
NORDITROPIN 15MG/1.5ML PEN INJ 59
NORDITROPIN 5MG/1.5ML PEN INJ 59
*norelgestromin/ethinyl estradiol 150-35 mcg/24hr patch* 72
*norethindrone 0.35mg tab 28-day pack* 72
*norethindrone acetate 5mg tab* 74
*nortrel 0.5/35 tab 28-day pack* 72
*nortrel 1/35 tab 21-day pack* 72

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*nortrel 1/35 tab 28-day pack* 72
*nortrel 7/7/7 tab 28-day pack* 72
*nortriptyline 10mg cap* 19
*nortriptyline 25mg cap* 19
*nortriptyline 2mg/ml oral soln* 19
*nortriptyline 50mg cap* 19
*nortriptyline 75mg cap* 19
NOVOLIN MIX (70/30) 100UNIT/ML INJ 21
NOVOLIN MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML) 21
NOVOLIN N 100UNIT/ML INJ 21
NOVOLIN N FLEXPEN 100UNIT/ML PEN INJ (3ML) 21
NOVOLIN R 100UNIT/ML INJ 21
NOVOLIN R FLEXPEN 100UNIT/ML PEN INJ (3ML) 21
NOVOLOG 100UNIT/ML CARTRIDGE 21
NOVOLOG 100UNIT/ML INJ 21
NOVOLOG FLEXPEN 100UNIT/ML PEN INJ (3ML) 21
NOVOLOG MIX (70/30) 100UNIT/ML INJ 21
NOVOLOG MIX (70/30) FLEXPEN 100UNIT/ML PEN INJ (3ML) 22
NUBEQA 300MG TAB 30
NUCALA 100MG INJ 47
NUCALA 100MG/ML AUTO-INJECTOR 47
NUCALA 100MG/ML SYRINGE 47
NUCALA 40MG/0.4ML SYRINGE 47
NUPLAZID 10MG TAB 39
NUPLAZID 34MG CAP 39
NUTRILIPID 20% INJ 69
*nyamyc 100000unit/gm topical powder* 54
*nylia 1/35 tab 28-day pack* 72
*nylia 7/7/7 tab 28-day pack* 72
*nystatin 100000unit/gm topical ointment* 54
*nystatin 100000unit/gm topical powder* 54
*nystatin 100000unit/ml oral susp* 53
*nystatin 100000unit/ml topical cream* 54
*nystatin 500000unit tab* 23
*nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical cream* 54
*nystatin/triamcinolone acetonide 100000-0.1unit/gm-% topical ointment* 54
*nystop 100000unit/gm topical powder* 54

**O**

*octreotide 0.05mg/ml inj* 59
*octreotide 0.1mg/ml inj* 59
*octreotide 0.2mg/ml inj* 59
*octreotide 0.5mg/ml inj* 59
*octreotide 1mg/ml inj* 59
ODEFSEY 200-25-25MG TAB 44
ODOMZO 200MG CAP 30
OFEV 100MG CAP 80
OFEV 150MG CAP 80
*ofloxacin 0.3% ophth soln* 75
*ofloxacin 0.3% otic soln* 76
OGSIVEO 100MG TAB 7-DAY PACK (14) 34
OGSIVEO 150MG TAB 7-DAY PACK (14) 34
OJEMDA 100MG TAB PACK (400MG ONCE WEEKLY) (16) 34
OJEMDA 100MG TAB PACK (500MG ONCE WEEKLY) (20) 34
OJEMDA 100MG TAB PACK (600MG ONCE WEEKLY) (24) 34
OJEMDA 25MG/ML POWDER FOR ORAL SUSP 34
OJJAARA 100MG TAB 34
OJJAARA 150MG TAB 34
OJJAARA 200MG TAB 34
*olanzapine 10mg inj* 41
*olanzapine 10mg odt* 41
*olanzapine 10mg tab* 41
*olanzapine 15mg odt* 41
*olanzapine 15mg tab* 41
*olanzapine 2.5mg tab* 41
*olanzapine 20mg odt* 41
*olanzapine 20mg tab* 41
*olanzapine 5mg odt* 41
*olanzapine 5mg tab* 41
*olanzapine 7.5mg tab* 41
*olmesartan medoxomil 20mg tab* 26
*olmesartan medoxomil 40mg tab* 26
*olmesartan medoxomil 5mg tab* 26
*olopatadine 0.6% (0.665mg/act) nasal inhaler* 68
OLUMIANT 1MG TAB 2
OLUMIANT 2MG TAB 2
OLUMIANT 4MG TAB 2
*omega-3 acid ethyl esters (usp) 1gm cap* 24

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*omeprazole 10mg dr cap* 62
*omeprazole 20mg dr cap* 62
*omeprazole 40mg dr cap* 62
OMNITROPE 10MG/1.5ML CARTRIDGE 59
OMNITROPE 5.8MG INJ 59
OMNITROPE 5MG/1.5ML CARTRIDGE 59
*ondansetron 0.8mg/ml oral soln* 22
*ondansetron 4mg odt* 22
*ondansetron 4mg tab* 23
*ondansetron 8mg odt* 23
*ondansetron 8mg tab* 23
ONUREG 200MG TAB 29
ONUREG 300MG TAB 29
OPIPZA 10MG ORAL FILM 42
OPIPZA 2MG ORAL FILM 42
OPIPZA 5MG ORAL FILM 42
OPVEE 2.7MG/0.1ML NASAL SPRAY 5
ORENCIA 125MG/ML SYRINGE 47
ORENCIA 50MG/0.4ML SYRINGE 47
ORENCIA 87.5MG/0.7ML SYRINGE 47
ORENCIA CLICKJECT 125MG/ML AUTO-INJECTOR 47
ORGOVYX 120MG TAB 30
ORKAMBI 125-100MG ORAL GRANULES 80
ORKAMBI 125-100MG TAB 80
ORKAMBI 125-200MG TAB 80
ORKAMBI 188-150MG ORAL GRANULES 80
ORKAMBI 94-75MG ORAL GRANULES 80
*orphenadrine citrate 100mg er tab* 43
*orquidea 0.35mg tab 28-day pack* 72
ORSERDU 345MG TAB 30
ORSERDU 86MG TAB 30
*oseltamivir 30mg cap* 46
*oseltamivir 45mg cap* 46
*oseltamivir 6mg/ml oral susp* 46
*oseltamivir 75mg cap* 46
OTEZLA 10/20/30MG TAB 28-DAY STARTER PACK (55) 55
OTEZLA 10/20MG TAB 28-DAY STARTER PACK (55) 55
OTEZLA 20MG TAB 55
OTEZLA 30MG TAB 55
OTEZLA XR 75MG TAB 55
OTEZLA/OTEZLA XR 28-DAY 10/20/30/75MG STARTER PACK (41) 55
*oxacillin 100mg/ml inj* 10
*oxacillin 1gm inj* 10
*oxacillin 2gm inj* 10
*oxcarbazepine 150mg tab* 14
*oxcarbazepine 300mg tab* 14
*oxcarbazepine 600mg tab* 14
*oxcarbazepine 60mg/ml oral susp* 14
*oxybutynin chloride 10mg er tab* 62
*oxybutynin chloride 15mg er tab* 62
*oxybutynin chloride 1mg/ml oral soln* 62
*oxybutynin chloride 5mg er tab* 62
*oxybutynin chloride 5mg tab* 62
*oxycodone 10mg tab* 4
*oxycodone 15mg tab* 4
*oxycodone 1mg/ml oral soln* 4
*oxycodone 20mg tab* 4
*oxycodone 30mg tab* 4
*oxycodone 5mg tab* 4
*oxycodone/acetaminophen 10-325mg tab* 4
*oxycodone/acetaminophen 2.5-325mg tab* 4
*oxycodone/acetaminophen 5-325mg tab* 4
*oxycodone/acetaminophen 7.5-325mg tab* 4
OZEMPIC 1.5MG TAB 20
OZEMPIC 2MG/3ML PEN INJ 20
OZEMPIC 4MG TAB 20
OZEMPIC 4MG/3ML PEN INJ 20
OZEMPIC 8MG/3ML PEN INJ 20
OZEMPIC 9MG TAB 20

**P**

*paliperidone 1.5mg er tab* 40
*paliperidone 3mg er tab* 40
*paliperidone 6mg er tab* 40
*paliperidone 9mg er tab* 40
PANRETIN 0.1% TOPICAL GEL 55
*pantoprazole 20mg dr tab* 62
*pantoprazole 40mg dr tab* 62
*paricalcitol 1mcg cap* 57
*paricalcitol 2mcg cap* 58
*paricalcitol 4mcg cap* 58
*paroxetine 10mg tab* 17
PAROXETINE 10MG/5ML ORAL SUSP 17
*paroxetine 12.5mg er tab* 17
*paroxetine 20mg tab* 17
*paroxetine 25mg er tab* 17
*paroxetine 30mg tab* 17
*paroxetine 37.5mg er tab* 17
*paroxetine 40mg tab* 17

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

PAXLOVID 150MG/100MG TAB PACK (20) 46
PAXLOVID 150MG/100MG TAB PACK (30) 46
PAXLOVID 300MG/100MG AND 150MG/100MG TAB DOSE PACK (11) 46
*pazopanib 200mg tab* 34
PEDIARIX SYRINGE 65
PEDVAXHIB 7.5MCG/0.5ML INJ 65
*peg 3350 powder for oral soln (100gm moviprep equiv)* 61
*peg 3350/electrolyte powder for oral soln* 61
*peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln* 61
PEGASYS 180MCG/0.5ML SYRINGE 45
PEGASYS 180MCG/ML INJ 45
PEMAZYRE 13.5MG TAB 34
PEMAZYRE 4.5MG TAB 34
PEMAZYRE 9MG TAB 34
PENBRAYA INJ 65
*penicillamine 250mg tab* 22
*penicillin g potassium 1000000unit/ml inj* 10
PENICILLIN G SODIUM 100000UNIT/ML INJ 10
*penicillin v potassium 250mg tab* 10
PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN 10
*penicillin v potassium 500mg tab* 10
PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN 10
PENMENVY INJ 65
PENTACEL INJ 65
*pentamidine isethionate 300mg inj* 37
*pentamidine isethionate 300mg/6ml inh soln* 37
*pentoxifylline 400mg er tab* 51
*perampanel 0.5mg/ml oral susp* 14
*perampanel 10mg tab* 14
*perampanel 12mg tab* 14
*perampanel 2mg tab* 14
*perampanel 4mg tab* 14
*perampanel 6mg tab* 14
*perampanel 8mg tab* 14
PERINDOPRIL ERBUMINE 2MG TAB 25
*perindopril erbumine 4mg tab* 25
PERINDOPRIL ERBUMINE 8MG TAB 25
*periogard 0.12% mouthwash* 53
*permethrin 5% topical cream* 57
*perphenazine 16mg tab* 42
*perphenazine 2mg tab* 42
*perphenazine 4mg tab* 42
*perphenazine 8mg tab* 42
PHENELZINE 15MG TAB 16
PHENOBARBITAL 100MG TAB 14
PHENOBARBITAL 15MG TAB 14
PHENOBARBITAL 16.2MG TAB 14
PHENOBARBITAL 30MG TAB 14
PHENOBARBITAL 32.4MG TAB 14
PHENOBARBITAL 4MG/ML ORAL SOLN 14
PHENOBARBITAL 60MG TAB 14
PHENOBARBITAL 64.8MG TAB 14
PHENOBARBITAL 97.2MG TAB 14
*phenytek 200mg er cap* 14
*phenytek 300mg er cap* 14
*phenytoin 25mg/ml oral susp* 14
*phenytoin 50mg chew tab* 14
*phenytoin sodium 100mg er cap* 14
PIFELTRO 100MG TAB 44
*pilocarpine 1% ophth soln* 75
*pilocarpine 2% ophth soln* 75
*pilocarpine 4% ophth soln* 75
*pilocarpine 5mg tab* 53
*pilocarpine 7.5mg tab* 53
*pimecrolimus 1% topical cream* 57
*pimozide 1mg tab* 78
*pimozide 2mg tab* 78
*pimtrea tab 28-day pack* 72
*pindolol 10mg tab* 49
*pindolol 5mg tab* 49
*pioglitazone 15mg tab* 20
*pioglitazone 30mg tab* 20
*pioglitazone 45mg tab* 20
*piperacillin/tazobactam 2000-250mg inj* 10
*piperacillin/tazobactam 3000-375mg inj* 10
*piperacillin/tazobactam 36-4.5gm inj* 10
*piperacillin/tazobactam 4000-500mg inj* 10
PIQRAY TAB 200MG DAILY DOSE PACK (28) 34

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

PIQRAY TAB 250MG DAILY DOSE PACK (56) 34
PIQRAY TAB 300MG DAILY DOSE PACK (56) 34
*pirfenidone 267mg cap* 80
*pirfenidone 267mg tab* 80
*pirfenidone 801mg tab* 80
*piroxicam 10mg cap* 3
*piroxicam 20mg cap* 3
PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR 77
PLEGRIDY 125MCG/0.5ML SYRINGE 77
*plenamine 15% inj* 69
PODOFILOX 0.5% TOPICAL SOLN 57
*polymyxin b/trimethoprim 10000unit/ml-0.1% ophth soln* 75
*pomalidomide 1mg cap* 31
*pomalidomide 2mg cap* 31
*pomalidomide 3mg cap* 31
*pomalidomide 4mg cap* 31
POMALYST 1MG CAP 31
POMALYST 2MG CAP 31
POMALYST 3MG CAP 31
POMALYST 4MG CAP 31
*portia tab 28-day pack* 72
*posaconazole 100mg dr tab* 23
*posaconazole 40mg/ml oral susp* 23
*potassium chloride 1.33meq/ml oral soln* 69
*potassium chloride 10meq er cap* 69
*potassium chloride 10meq er tab* 69
*potassium chloride 10meq micro er tab* 69
POTASSIUM CHLORIDE 10MEQ/100ML INJ 69
POTASSIUM CHLORIDE 15MEQ ER TAB 69
*potassium chloride 15meq micro er tab* 69
*potassium chloride 2.67meq/ml oral soln* 69
*potassium chloride 20meq er tab* 69
*potassium chloride 20meq micro er tab* 69
*potassium chloride 20meq powder for oral soln* 69
POTASSIUM CHLORIDE 20MEQ/100ML INJ 69
*potassium chloride 2meq/ml (20ml) inj* 69
*potassium chloride 2meq/ml inj* 69
*potassium chloride 8meq er cap* 69
*potassium chloride 8meq er tab* 69
*potassium chloride/sodium chloride 20meq-0.45% inj* 69
*potassium chloride/sodium chloride 40meq-0.9% inj* 69
*potassium citrate 10meq er tab* 63
*potassium citrate 15meq er tab* 63
*potassium citrate 5meq er tab* 63
*pramipexole 0.125mg tab* 38
*pramipexole 0.25mg tab* 38
*pramipexole 0.5mg tab* 38
*pramipexole 0.75mg tab* 38
*pramipexole 1.5mg tab* 38
*pramipexole 1mg tab* 38
*prasugrel 10mg tab* 12
*prasugrel 5mg tab* 12
*pravastatin sodium 10mg tab* 24
*pravastatin sodium 20mg tab* 24
*pravastatin sodium 40mg tab* 24
*pravastatin sodium 80mg tab* 24
*praziquantel 600mg tab* 37
*prazosin 1mg cap* 26
*prazosin 2mg cap* 26
*prazosin 5mg cap* 26
PREDNISOLONE 1% OPHTH SOLN 75
*prednisolone 1mg/ml oral soln* 58
*prednisolone 3mg/ml oral soln* 58
*prednisolone 5mg/ml oral soln* 58
*prednisolone acetate 1% ophth susp* 75
*prednisone 10mg tab* 58
*prednisone 10mg tab (21)* 58
*prednisone 10mg tab pack (48)* 58
*prednisone 1mg tab* 58
PREDNISONE 1MG/ML ORAL SOLN 58
*prednisone 2.5mg tab* 58
*prednisone 20mg tab* 58
*prednisone 50mg tab* 58
*prednisone 5mg tab* 59
*prednisone 5mg tab pack (21)* 59
*prednisone 5mg tab pack (48)* 59
*pregabalin 100mg cap* 14
*pregabalin 150mg cap* 14
*pregabalin 200mg cap* 15
*pregabalin 20mg/ml oral soln* 15
*pregabalin 225mg cap* 15
*pregabalin 25mg cap* 15

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*pregabalin 300mg cap* 15
*pregabalin 50mg cap* 15
*pregabalin 75mg cap* 15
PREMARIN 0.625MG/GM VAGINAL CREAM 74
PREMPHASE TAB 28-DAY PACK 74
PREMPRO 0.3/1.5MG TAB 28-DAY PACK 74
PREMPRO 0.45/1.5MG TAB 28-DAY PACK 74
PREMPRO 0.625/2.5MG TAB 28-DAY PACK 74
PREMPRO 0.625/5MG TAB 28-DAY PACK 74
PRETOMANID 200MG TAB 28
PREVYMIS 120MG ORAL PELLET 46
PREVYMIS 240MG TAB 46
PREVYMIS 480MG TAB 46
PREZCOBIX 150-675MG TAB 44
PREZCOBIX 150-800MG TAB 44
PREZISTA 100MG/ML ORAL SUSP 44
PREZISTA 150MG TAB 44
PREZISTA 75MG TAB 44
PRIMAQUINE PHOSPHATE 26.3MG TAB 37
*primidone 250mg tab* 15
*primidone 50mg tab* 15
PRIORIX INJ 65
PRIVIGEN 20GM/200ML INJ 65
*probenecid 500mg tab* 63
*prochlorperazine 10mg tab* 42
*prochlorperazine 25mg rectal supp* 42
*prochlorperazine 5mg tab* 42
*procto-med hc 2.5% perianal cream* 5
*proctosol 2.5% perianal cream* 5
*proctozone hc 2.5% perianal cream* 5
*progesterone 100mg cap* 74
*progesterone 200mg cap* 74
PROGRAF 0.2MG GRANULES FOR ORAL SUSP 64
PROGRAF 1MG GRANULES FOR ORAL SUSP 64
PROLASTIN-C 1000MG INJ 80
*promethazine 1.25mg/ml oral soln* 78
*promethazine 12.5mg tab* 78
*promethazine 25mg tab* 78
*promethazine 50mg tab* 78
*propafenone 150mg tab* 48
*propafenone 225mg er cap* 48
*propafenone 225mg tab* 48
*propafenone 300mg tab* 48
*propafenone 325mg er cap* 48
*propafenone 425mg er cap* 48
*propranolol 10mg tab* 49
*propranolol 120mg er cap* 49
*propranolol 160mg er cap* 49
*propranolol 20mg tab* 49
*propranolol 20mg/5ml oral soln* 49
*propranolol 40mg tab* 49
*propranolol 60mg er cap* 49
*propranolol 60mg tab* 49
*propranolol 80mg er cap* 49
*propranolol 80mg tab* 49
PROPRANOLOL 8MG/ML ORAL SOLN 49
*propylthiouracil 50mg tab* 58
PROQUAD INJ 65
PROSOL 20% INJ 69
*protriptyline 10mg tab* 19
*protriptyline 5mg tab* 19
*prucalopride 1mg tab* 61
*prucalopride 2mg tab* 61
PULMOZYME 2.5MG/2.5ML NEB SOLN 81
*pyrazinamide 500mg tab* 28
*pyridostigmine bromide 60mg tab* 43
*pyrimethamine 25mg tab* 37

**Q**

QINLOCK 50MG TAB 34
QUADRACEL INJ 65
QUADRACEL SYRINGE 65
*quetiapine 100mg tab* 41
*quetiapine 150mg er tab* 41
*quetiapine 200mg er tab* 41
*quetiapine 200mg tab* 41
*quetiapine 25mg tab* 41
*quetiapine 300mg er tab* 41
*quetiapine 300mg tab* 41
*quetiapine 400mg er tab* 41
*quetiapine 400mg tab* 41
*quetiapine 50mg er tab* 41
*quetiapine 50mg tab* 41
*quinapril 10mg tab* 25
*quinapril 20mg tab* 25
*quinapril 40mg tab* 25
*quinapril 5mg tab* 25
QUINIDINE SULFATE 200MG TAB 48
QUINIDINE SULFATE 300MG TAB 48
*quinine sulfate 324mg cap* 37
QULIPTA 10MG TAB 67
QULIPTA 30MG TAB 67
QULIPTA 60MG TAB 67

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

QVAR 40MCG REDIHALER 78
QVAR 80MCG REDIHALER 78

**R**

RABAVERT 2.5UNIT/ML INJ 65
*rabeprazole sodium 20mg dr tab* 62
RADICAVA 105MG/5ML ORAL SUSP 67
RALDESY 10MG/ML ORAL SOLN 17
*raloxifene 60mg tab* 59
*ramelteon 8mg tab* 81
*ramipril 1.25mg cap* 25
*ramipril 10mg cap* 25
*ramipril 2.5mg cap* 25
*ramipril 5mg cap* 25
*ranolazine 1000mg er tab* 51
*ranolazine 500mg er tab* 51
*rasagiline 0.5mg tab* 38
*rasagiline 1mg tab* 38
*reclipsen tab 28-day pack* 72
RECOMBIVAX 10MCG/ML INJ 65
RECOMBIVAX 40MCG/ML INJ 65
RECOMBIVAX 5MCG/0.5ML INJ 65
RECOMBIVAX HB 10MCG/ML SYRINGE 65
RECOMBIVAX HB 5MCG/0.5ML SYRINGE 66
REDEMPLO 25MG/0.5ML SYRINGE 58
RELENZA DISKHALER 5MG/BLISTER POWDER INHALER 46
*repaglinide 0.5mg tab* 20
*repaglinide 1mg tab* 20
*repaglinide 2mg tab* 20
REPATHA 140MG/ML SYRINGE 24
REPATHA SURECLICK 140MG/ML AUTO-INJECTOR 24
RETACRIT 10000UNIT/ML INJ 63
RETACRIT 20000UNIT/2ML INJ 63
RETACRIT 20000UNIT/ML INJ 63
RETACRIT 2000UNIT/ML INJ 63
RETACRIT 3000UNIT/ML INJ 64
RETACRIT 40000UNIT/ML INJ 64
RETACRIT 4000UNIT/ML INJ 64
RETEVMO 120MG TAB 34
RETEVMO 160MG TAB 34
RETEVMO 40MG TAB 34
RETEVMO 80MG TAB 34
REVCOVI 2.4MG/1.5ML INJ 58
REVUFORJ 110MG TAB 36
REVUFORJ 160MG TAB 36
REVUFORJ 25MG TAB 36
REXULTI 0.25MG TAB 42
REXULTI 0.5MG TAB 42
REXULTI 1MG TAB 42
REXULTI 2MG TAB 42
REXULTI 3MG TAB 42
REXULTI 4MG TAB 43
REYATAZ 50MG ORAL POWDER 45
REZDIFFRA 100MG TAB 67
REZDIFFRA 60MG TAB 67
REZDIFFRA 80MG TAB 68
REZLIDHIA 150MG CAP 34
REZUROCK 200MG TAB 68
RHAPSIDO 25MG TAB 68
RHOPRESSA 0.02% OPHTH SOLN 75
RIBAVIRIN 200MG CAP 45
RIBAVIRIN 200MG TAB 45
*rifabutin 150mg cap* 28
*rifampin 150mg cap* 28
*rifampin 300mg cap* 28
*rifampin 600mg inj* 29
*rifapentine 150mg tab* 29
*rilpivirine 25mg tab* 45
*riluzole 50mg tab* 68
RIMANTADINE 100MG TAB 46
RINVOQ 15MG ER TAB 2
RINVOQ 1MG/ML ORAL SOLN 2
RINVOQ 30MG ER TAB 2
RINVOQ 45MG ER TAB 2
*risedronate sodium 150mg tab* 57
*risedronate sodium 30mg tab* 57
*risedronate sodium 35mg tab* 57
*risedronate sodium 35mg tab pack (12)* 57
*risedronate sodium 35mg tab pack (4)* 57
*risedronate sodium 5mg tab* 57
RISPERIDONE 0.25MG ODT 40
*risperidone 0.25mg tab* 40
*risperidone 0.5mg odt* 40
*risperidone 0.5mg tab* 40
*risperidone 1mg odt* 40
*risperidone 1mg tab* 40
*risperidone 1mg/ml oral soln* 40
*risperidone 2mg odt* 40
*risperidone 2mg tab* 40
*risperidone 3mg odt* 40
*risperidone 3mg tab* 40
*risperidone 4mg odt* 40
*risperidone 4mg tab* 40
*risperidone microspheres 12.5mg inj* 40

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*risperidone microspheres 25mg inj* 40
*risperidone microspheres 37.5mg inj* 40
*risperidone microspheres 50mg inj* 40
*ritonavir 100mg tab* 45
*rivaroxaban 2.5mg tab* 12
*rivastigmine 1.5mg cap* 76
*rivastigmine 13.3mg/24hr patch* 76
*rivastigmine 3mg cap* 76
*rivastigmine 4.5mg cap* 76
*rivastigmine 4.6mg/24hr patch* 76
*rivastigmine 6mg cap* 76
*rivastigmine 9.5mg/24hr patch* 77
*rizatriptan 10mg odt* 67
*rizatriptan 10mg tab* 67
*rizatriptan 5mg odt* 67
*rizatriptan 5mg tab* 67
ROCKLATAN 0.02-0.005% OPHTH SOLN 75
*roflumilast 250mcg tab* 81
*roflumilast 500mcg tab* 81
ROMVIMZA 14MG CAP 34
ROMVIMZA 20MG CAP 34
ROMVIMZA 30MG CAP 34
*ropinirole 0.25mg tab* 38
*ropinirole 0.5mg tab* 38
*ropinirole 1mg tab* 38
*ropinirole 2mg tab* 38
*ropinirole 3mg tab* 38
*ropinirole 4mg tab* 38
*ropinirole 5mg tab* 38
*rosuvastatin calcium 10mg tab* 24
*rosuvastatin calcium 20mg tab* 24
*rosuvastatin calcium 40mg tab* 25
*rosuvastatin calcium 5mg tab* 25
ROTARIX 667000UNIT/ML ORAL SUSP 66
ROTATEQ ORAL SUSP 66
*roweepra 500mg tab* 15
ROZLYTREK 100MG CAP 34
ROZLYTREK 200MG CAP 34
ROZLYTREK 50MG ORAL PELLET 34
RUBRACA 200MG TAB 34
RUBRACA 250MG TAB 34
RUBRACA 300MG TAB 35
*rufinamide 200mg tab* 15
*rufinamide 400mg tab* 15
*rufinamide 40mg/ml oral susp* 15
RUKOBIA 600MG ER TAB 45
RYDAPT 25MG CAP 35

**S**

*sacubitril/valsartan 24-26mg tab* 51
*sacubitril/valsartan 49-51mg tab* 51
*sacubitril/valsartan 97-103mg tab* 51
*salmon calcitonin 200unit/act nasal spray* 57
SANTYL 250UNIT/GM TOPICAL OINTMENT 57
*sapropterin 100mg powder for oral soln* 58
*sapropterin 100mg tab* 58
*sapropterin 500mg powder for oral soln* 58
SCEMBLIX 100MG TAB 35
SCEMBLIX 20MG TAB 35
SCEMBLIX 40MG TAB 35
*scopolamine 1mg/72hr patch* 23
SECUADO 3.8MG/24HR PATCH 41
SECUADO 5.7MG/24HR PATCH 41
SECUADO 7.6MG/24HR PATCH 41
*selegiline 5mg cap* 38
*selegiline 5mg tab* 38
SELENIUM SULFIDE 2.5% SHAMPOO 57
*sertraline 100mg tab* 17
*sertraline 20mg/ml oral soln* 17
*sertraline 25mg tab* 17
*sertraline 50mg tab* 17
*setlakin tab 91-day pack* 72
*sevelamer carbonate 800mg tab* 68
*sharobel 0.35mg tab 28-day pack* 72
SHINGRIX 50MCG/0.5ML INJ 66
SHINGRIX 50MCG/0.5ML SYRINGE 66
SIGNIFOR 0.3MG/ML INJ 59
SIGNIFOR 0.6MG/ML INJ 59
SIGNIFOR 0.9MG/ML INJ 59
*sildenafil 20mg tab* 80
*silodosin 4mg cap* 63
*silodosin 8mg cap* 63
*silver sulfadiazine 1% topical cream* 57
SIMBRINZA 0.2-1% OPHTH SUSP 74
SIMLANDI 20MG/0.2ML SYRINGE 47
SIMLANDI 40MG/0.4ML AUTO-INJECTOR 47
SIMLANDI 40MG/0.4ML SYRINGE 47
SIMLANDI 80MG/0.8ML AUTO-INJECTOR 47
*simvastatin 10mg tab* 25
*simvastatin 20mg tab* 25

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*simvastatin 40mg tab* 25
*simvastatin 5mg tab* 25
*simvastatin 80mg tab* 25
*sirolimus 0.5mg tab* 64
*sirolimus 1mg tab* 64
*sirolimus 1mg/ml oral soln* 64
*sirolimus 2mg tab* 64
SIRTURO 100MG TAB 29
SIRTURO 20MG TAB 29
*sitagliptin phosphate 100mg tab* 20
*sitagliptin phosphate 25mg tab* 20
*sitagliptin phosphate 50mg tab* 20
SKYRIZI 150MG/ML AUTO-INJECTOR 47
SKYRIZI 150MG/ML SYRINGE 47
SKYRIZI 180MG/1.2ML CARTRIDGE 47
SKYRIZI 360MG/2.4ML CARTRIDGE 47
SKYRIZI 55MG/0.37ML SYRINGE 47
*sodium chloride 0.45% inj* 70
*sodium chloride 0.9% inj* 70
*sodium chloride 0.9% irrigation soln* 63
*sodium chloride 3% inj* 70
*sodium chloride 50mg/ml inj* 70
*sodium oxybate 500mg/ml oral soln* 81
*sodium phenylbutyrate 3gm/tsp oral powder* 58
*sodium polystyrene sulfonate 15000mg powder for oral susp* 68
*sodium polystyrene sulfonate 15gm/60ml oral susp* 68
*sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit* 61
*sodium sulfate/potassium sulfate/magnesium sulfate 17.5-3.13-1.6 gm/177ml oral soln prep kit (480ml)* 61
SOFOSBUVIR/VELPATASVIR 400-100MG TAB 45
*solifenacin succinate 10mg tab* 62
*solifenacin succinate 5mg tab* 62
SOLTAMOX 10MG/5ML ORAL SOLN 30
SOMAVERT 10MG INJ 59
SOMAVERT 15MG INJ 59
SOMAVERT 20MG INJ 59
SOMAVERT 25MG INJ 59
SOMAVERT 30MG INJ 59
*sorafenib 200mg tab* 35
*sotalol 120mg tab* 49
*sotalol 160mg tab* 50
*sotalol 240mg tab* 50
*sotalol 80mg tab* 50
*sotalol af 120mg tab* 50
*sotalol af 160mg tab* 50
*sotalol af 80mg tab* 50
SPIRIVA RESPIMAT 1.25MCG/ACT INHALER 78
*spironolactone 100mg tab* 52
*spironolactone 25mg tab* 52
*spironolactone 50mg tab* 52
*sprintec tab 28-day pack* 72
SPRITAM 250MG TAB FOR ORAL SUSP 15
SPRITAM 500MG TAB FOR ORAL SUSP 15
*sps 15gm/60ml oral susp* 68
*ssd 1% topical cream* 57
STARJEMZA 45MG/0.5ML INJ 47
STARJEMZA 45MG/0.5ML SYRINGE 47
STARJEMZA 90MG/ML SYRINGE 47
STIOLTO RESPIMAT 2.5-2.5MCG/ACT INHALER 79
STIVARGA 40MG TAB 35
STREPTOMYCIN 1GM INJ 6
STRIBILD 150-150-200-300MG TAB 45
STRIVERDI RESPIMAT 2.5MCG/ACT INHALER 79
SUBVENITE 10MG/ML ORAL SUSP 15
*sucralfate 1000mg tab* 62
*sucralfate 100mg/ml oral susp* 62
SUFLAVE ORAL SOLN PACK 61
SULFACETAMIDE SODIUM 10% OPHTH SOLN 75
*sulfacetamide sodium 10% topical lotion* 54
SULFACETAMIDE/PREDNISOLONE 10-0.25% OPHTH SOLN 75
*sulfadiazine 500mg tab* 8
*sulfamethoxazole/trimethoprim 200-40mg/5ml oral susp* 8
*sulfamethoxazole/trimethoprim 400-80mg tab* 8
*sulfamethoxazole/trimethoprim 800-160mg tab* 8
*sulfasalazine 500mg dr tab* 66
*sulfasalazine 500mg tab* 66
*sulindac 150mg tab* 3
*sulindac 200mg tab* 3
*sumatriptan 100mg tab* 67

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*sumatriptan 20mg/act nasal spray* 67
*sumatriptan 25mg tab* 67
*sumatriptan 50mg tab* 67
*sumatriptan 5mg/act nasal spray* 67
*sumatriptan 6mg/0.5ml auto-injector* 67
*sumatriptan 6mg/0.5ml inj* 67
*sunitinib malate 12.5mg cap* 35
*sunitinib malate 25mg cap* 35
*sunitinib malate 37.5mg cap* 35
*sunitinib malate 50mg cap* 35
SUNLENCA 300MG TAB 45
SUNLENCA 300MG TAB THERAPY PACK (4) 45
SUNLENCA 300MG TAB THERAPY PACK (5) 45
SUNOSI 150MG TAB 81
SUNOSI 75MG TAB 81
SUTAB 225-188-1479MG TAB 61
*syeda tab 28-day pack* 72
SYMDEKO TAB 4-WEEK PACK (56) 81
SYMDEKO TAB 50-75MG/75MG PACK (56) 81
SYMPAZAN 10MG ORAL FILM 13
SYMPAZAN 20MG ORAL FILM 13
SYMPAZAN 5MG ORAL FILM 13
SYMTUZA 150-800-200-10MG TAB 45
SYNTHROID 100MCG TAB 60
SYNTHROID 112MCG TAB 60
SYNTHROID 125MCG TAB 60
SYNTHROID 137MCG TAB 60
SYNTHROID 150MCG TAB 60
SYNTHROID 175MCG TAB 60
SYNTHROID 200MCG TAB 60
SYNTHROID 25MCG TAB 60
SYNTHROID 300MCG TAB 60
SYNTHROID 50MCG TAB 60
SYNTHROID 75MCG TAB 60
SYNTHROID 88MCG TAB 60

**T**

TABLOID 40MG TAB 29
TABRECTA 150MG TAB 35
TABRECTA 200MG TAB 35
*tacrolimus 0.03% topical ointment* 57
*tacrolimus 0.1% topical ointment* 57
*tacrolimus 0.5mg cap* 64
*tacrolimus 1mg cap* 64
*tacrolimus 5mg cap* 64
*tadalafil 2.5mg tab* 63
*tadalafil 20mg tab (pah)* 80
*tadalafil 5mg tab* 63
TAFINLAR 10MG TAB FOR ORAL SUSP 35
TAFINLAR 50MG CAP 35
TAFINLAR 75MG CAP 35
TAGRISSO 40MG TAB 30
TAGRISSO 80MG TAB 30
TALZENNA 0.1MG CAP 35
TALZENNA 0.25MG CAP 35
TALZENNA 0.35MG CAP 35
TALZENNA 0.5MG CAP 35
TALZENNA 0.75MG CAP 35
TALZENNA 1MG CAP 35
*tamoxifen 10mg tab* 31
*tamoxifen 20mg tab* 31
*tamsulosin 0.4mg cap* 63
*tarina fe 1/20 tab 28-day pack* 72
TARPEYO 4MG DR CAP 59
*tazarotene 0.1% topical cream* 55
*tazicef 1gm inj* 9
*tazicef 2gm inj* 9
TAZICEF 6GM INJ 9
*telmisartan 20mg tab* 26
*telmisartan 40mg tab* 26
*telmisartan 80mg tab* 26
*temazepam 15mg cap* 81
*temazepam 30mg cap* 81
TENIVAC 4-10UNIT/ML INJ 66
TENIVAC 4-10UNIT/ML SYRINGE 66
*tenofovir disoproxil fumarate 300mg tab* 45
TEPMETKO 225MG TAB 35
*terazosin 10mg cap* 26
*terazosin 1mg cap* 26
*terazosin 2mg cap* 26
*terazosin 5mg cap* 26
*terbinafine 250mg tab* 23
*terconazole 0.4% vaginal cream* 23
*terconazole 0.8% vaginal cream* 23
*terconazole 80mg vaginal insert* 23
*teriflunomide 14mg tab* 77
*teriflunomide 7mg tab* 77
*teriparatide 560mcg/2.24ml pen inj* 57

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*testosterone 1% (12.5mg/act) topical gel pump* 4
*testosterone 1% (25mg/2.5gm) topical gel packet* 4
*testosterone 1% (50mg/5gm) topical gel packet* 4
*testosterone 1.62% (20.25mg/act) topical gel pump* 4
*testosterone 30mg/act topical soln* 4
*testosterone cypionate 100mg/ml inj* 4
*testosterone cypionate 200mg/ml (1ml) inj* 4
*testosterone cypionate 200mg/ml inj* 4
TESTOSTERONE ENANTHATE 200MG/ML INJ 5
*tetrabenazine 12.5mg tab* 77
*tetrabenazine 25mg tab* 77
*tetracycline 250mg cap* 8
*tetracycline 500mg cap* 8
THALOMID 100MG CAP 31
THALOMID 50MG CAP 31
THEOPHYLLINE 100MG ER TAB 81
THEOPHYLLINE 200MG ER TAB 81
*theophylline 300mg er tab* 81
*theophylline 400mg er tab* 81
*theophylline 450mg er tab* 81
*theophylline 600mg er tab* 81
*thioridazine 100mg tab* 42
*thioridazine 10mg tab* 42
*thioridazine 25mg tab* 42
*thioridazine 50mg tab* 42
*thiothixene 10mg cap* 39
*thiothixene 1mg cap* 39
*thiothixene 2mg cap* 39
*thiothixene 5mg cap* 39
*tiadylt 120mg er (24hr) cap* 50
*tiadylt 180mg er (24hr) cap* 50
*tiadylt 240mg er (24hr) cap* 50
*tiadylt 300mg er (24hr) cap* 51
*tiadylt 360mg er (24hr) cap* 51
*tiadylt 420mg er (24hr) cap* 51
TIAGABINE 12MG TAB 15
TIAGABINE 16MG TAB 15
*tiagabine 2mg tab* 16
*tiagabine 4mg tab* 16
TIBSOVO 250MG TAB 35
*ticagrelor 60mg tab* 12
*ticagrelor 90mg tab* 12
TICOVAC 1.2MCG/0.25ML SYRINGE 66
TICOVAC 2.4MCG/0.5ML SYRINGE 66
*tigecycline 50mg inj* 8
*timolol 0.25% ophth gel* 74
*timolol 0.25% ophth soln* 74
*timolol 0.5% ophth gel* 74
*timolol 0.5% ophth soln* 74
*timolol 10mg tab* 50
TIMOLOL 5MG TAB 50
*tinidazole 250mg tab* 8
*tinidazole 500mg tab* 8
TIVICAY 50MG TAB 45
TIVICAY 5MG TAB FOR ORAL SUSP 45
*tizanidine 2mg tab* 43
*tizanidine 4mg tab* 43
TOBI PODHALER 28MG PACK (224) 6
*tobramycin 0.3% ophth soln* 75
TOBRAMYCIN 10MG/ML INJ 6
*tobramycin 300mg/5ml neb soln* 6
*tobramycin 80mg/2ml inj* 6
*tofacitinib 10mg tab* 2
*tofacitinib 11mg er tab* 2
*tofacitinib 1mg/ml oral soln* 2
*tofacitinib 22mg er tab* 2
*tofacitinib 5mg tab* 2
*tolterodine tartrate 1mg tab* 62
*tolterodine tartrate 2mg er cap* 62
*tolterodine tartrate 2mg tab* 62
*tolterodine tartrate 4mg er cap* 62
*tolvaptan 15mg tab (jynarque equiv)* 59
*tolvaptan 15mg tab therapy pack (56)* 59
*tolvaptan 15mg/30mg tab pack (56)* 59
*tolvaptan 15mg/45mg tab pack (56)* 59
*tolvaptan 30mg tab (jynarque equiv)* 59
*tolvaptan 30mg/60mg tab pack (56)* 59
*tolvaptan 30mg/90mg tab pack (56)* 59
*topiramate 100mg tab* 15
*topiramate 15mg cap* 15
*topiramate 200mg tab* 15
*topiramate 25mg cap* 15
*topiramate 25mg tab* 15
*topiramate 25mg/ml oral soln* 15

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*topiramate 50mg tab* 15
*toremifene 60mg tab* 31
*torsemide 100mg tab* 52
*torsemide 10mg tab* 52
*torsemide 20mg tab* 52
*torsemide 5mg tab* 52
TPN ELECTROLYTES IN. 70
TRADJENTA 5MG TAB 20
*tramadol 100mg er tab* 4
*tramadol 200mg er tab* 4
*tramadol 300mg er tab* 4
*tramadol 50mg tab* 4
*tramadol/acetaminophen 37.5-325mg tab* 4
*trandolapril 1mg tab* 25
*trandolapril 2mg tab* 25
*trandolapril 4mg tab* 26
*tranexamic acid 650mg tab* 68
*tranylcypromine 10mg tab* 16
TRAVASOL 10% INJ 70
*travoprost 0.004% ophth soln* 76
*trazodone 100mg tab* 17
*trazodone 150mg tab* 17
*trazodone 50mg tab* 17
TRELEGY ELLIPTA 100-62.5-25MCG POWDER INHALER 79
TRELEGY ELLIPTA 200-62.5-25MCG POWDER INHALER 79
TRELSTAR MIXJECT 11.25MG INJ 31
TRELSTAR MIXJECT 22.5MG INJ 31
TRELSTAR MIXJECT 3.75MG INJ 31
TREMFYA 100MG/ML AUTO-INJECTOR 47
TREMFYA 100MG/ML SYRINGE 47
TREMFYA 200MG/2ML AUTO-INJECTOR 47
TREMFYA 200MG/2ML AUTO-INJECTOR INDUCTION PACK FOR CROHNS (2) 47
TREMFYA 200MG/2ML SYRINGE 47
TRESIBA 100UNIT/ML INJ 22
TRESIBA FLEXTOUCH 100UNIT/ML PEN INJ (3ML) 22
TRESIBA FLEXTOUCH 200UNIT/ML PEN INJ (3ML) 22
*tretinoin 0.01% topical gel* 54
*tretinoin 0.025% topical cream* 54
*tretinoin 0.025% topical gel* 54
*tretinoin 0.05% topical cream* 54
*tretinoin 0.1% topical cream* 54
*tretinoin 10mg cap* 36
*triamcinolone acetonide 0.025% topical cream* 56
TRIAMCINOLONE ACETONIDE 0.025% TOPICAL LOTION 56
*triamcinolone acetonide 0.025% topical ointment* 56
*triamcinolone acetonide 0.1% oral paste* 53
*triamcinolone acetonide 0.1% topical cream* 56
*triamcinolone acetonide 0.1% topical lotion* 56
*triamcinolone acetonide 0.1% topical ointment* 56
*triamcinolone acetonide 0.5% topical cream* 56
*triamcinolone acetonide 0.5% topical ointment* 56
*trientine 250mg cap* 22
*tri-estarylla tab 28-day pack* 72
*trifluoperazine 10mg tab* 42
*trifluoperazine 1mg tab* 42
*trifluoperazine 2mg tab* 42
*trifluoperazine 5mg tab* 42
TRIFLURIDINE 1% OPHTH SOLN 75
*trihexyphenidyl 2mg tab* 37
*trihexyphenidyl 5mg tab* 37
TRIKAFTA 100-50-75MG/150MG TAB PACK (84) 81
TRIKAFTA 100-50-75MG/75MG ORAL GRANULES PACK (56) 81
TRIKAFTA 50-37.5-25MG/75MG TAB PACK (84) 81
TRIKAFTA 80-40-60MG/59.5MG ORAL GRANULES PACK (56) 81
*tri-lo-estarylla tab 28-day pack* 72
*tri-lo-sprintec tab 28-day pack* 72
*trimethoprim 100mg tab* 8
*tri-mili tab 28-day pack* 72
*trimipramine 100mg cap* 19
*trimipramine 25mg cap* 19
*trimipramine 50mg cap* 19
TRINTELLIX 10MG TAB 17
TRINTELLIX 20MG TAB 17
TRINTELLIX 5MG TAB 17
*tri-sprintec tab 28-day pack* 72
TRIUMEQ 600-50-300MG TAB 45

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

TRIUMEQ 60-5-30MG TAB FOR ORAL SUSP 45
*tri-vylibra lo tab 28-day pack* 72
*tri-vylibra tab 28-day pack* 72
*trospium chloride 20mg tab* 62
TRULICITY 0.75MG/0.5ML AUTO-INJECTOR 20
TRULICITY 1.5MG/0.5ML AUTO-INJECTOR 20
TRULICITY 3MG/0.5ML AUTO-INJECTOR 20
TRULICITY 4.5MG/0.5ML AUTO-INJECTOR 20
TRUMENBA SYRINGE 66
TRUQAP 160MG TAB 35
TRUQAP 200MG TAB 35
TRYNGOLZA 50MG/0.8ML AUTO-INJECTOR 58
TRYNGOLZA 80MG/0.8ML AUTO-INJECTOR 58
TUKYSA 150MG TAB 36
TUKYSA 50MG TAB 36
TURALIO 125MG CAP 35
*turqoz tab 28-day pack* 72
TWINRIX SYRINGE 66
TYENNE 162MG/0.9ML AUTO-INJECTOR 47
TYENNE 162MG/0.9ML SYRINGE 47
TYMLOS 3120MCG/1.56ML PEN INJ 57
TYPHIM VI 25MCG/0.5ML SYRINGE 66

**U**

UBRELVY 100MG TAB 67
UBRELVY 50MG TAB 67
*ursodiol 250mg tab* 68
*ursodiol 300mg cap* 68
*ursodiol 500mg tab* 68

**V**

*valacyclovir 1000mg tab* 46
*valacyclovir 500mg tab* 46
VALCHLOR 0.016% TOPICAL GEL 55
*valganciclovir 450mg tab* 46
*valganciclovir 50mg/ml oral soln* 46
*valproic acid 250mg cap* 16
*valproic acid 50mg/ml oral soln* 16
*valsartan 160mg tab* 26
*valsartan 320mg tab* 26
*valsartan 40mg tab* 26
*valsartan 80mg tab* 26
VALTOCO 10MG (10MG/0.1ML) NASAL SPRAY DOSE PACK 13
VALTOCO 15MG (7.5MG/0.1ML) NASAL SPRAY DOSE PACK 13
VALTOCO 20MG (10MG/0.1ML) NASAL SPRAY DOSE PACK 13
VALTOCO 5MG (5MG/0.1ML) NASAL SPRAY DOSE PACK 13
*valtya 1/35 tab 28-day pack* 72
VALTYA 1/50 TAB 28-DAY PACK 72
*vancomycin 100mg/ml inj* 8
*vancomycin 125mg cap* 8
*vancomycin 1gm inj* 8
*vancomycin 250mg cap* 8
*vancomycin 500mg inj* 8
*vancomycin 750mg inj* 8
VANFLYTA 17.7MG TAB 35
VANFLYTA 26.5MG TAB 35
VAQTA 25UNIT/0.5ML INJ 66
VAQTA 25UNIT/0.5ML SYRINGE 66
VAQTA 50UNIT/ML INJ 66
VAQTA 50UNIT/ML SYRINGE 66
*varenicline tab 0.5mg/1mg first month pack (53)* 5
*varenicline tartrate 0.5mg tab* 5
*varenicline tartrate 1mg tab* 5
*varenicline tartrate 1mg tab pack (56)* 5
VARIVAX 1350PFU/0.5ML INJ 66
VAXCHORA ORAL SUSP 66
VELIVET TAB 28-DAY PACK 72
VELSIPITY 2MG TAB 68
VENCLEXTA 100MG TAB 36
VENCLEXTA 10MG TAB 36
VENCLEXTA 50MG TAB 36
VENCLEXTA TAB STARTER PACK (42) 36
*venlafaxine 100mg tab* 18
*venlafaxine 150mg er cap* 18
*venlafaxine 25mg tab* 18
*venlafaxine 37.5mg er cap* 18
*venlafaxine 37.5mg tab* 18
*venlafaxine 50mg tab* 18
*venlafaxine 75mg er cap* 18
*venlafaxine 75mg tab* 18
*verapamil 120mg er cap* 51
*verapamil 120mg er tab* 51
*verapamil 120mg tab* 51
*verapamil 180mg er cap* 51
*verapamil 180mg er tab* 51
*verapamil 240mg er cap* 51
*verapamil 240mg er tab* 51


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

*verapamil 40mg tab* 51
*verapamil 80mg tab* 51
VERQUVO 10MG TAB 51
VERQUVO 2.5MG TAB 51
VERQUVO 5MG TAB 51
VERSACLOZ 50MG/ML ORAL SUSP 41
VERZENIO 100MG TAB 35
VERZENIO 150MG TAB 35
VERZENIO 200MG TAB 35
VERZENIO 50MG TAB 35
*vestura tab 3-0.02mg 28-day pack* 72
*vienva tab 28-day pack* 72
*vigabatrin 500mg powder for oral soln* 16
*vigabatrin 500mg tab* 16
*vilazodone 10mg tab* 17
*vilazodone 20mg tab* 18
*vilazodone 40mg tab* 18
VIMKUNYA 40MCG/0.8ML SYRINGE 66
*viorele tab 28-day pack* 72
VIRACEPT 250MG TAB 45
VIRACEPT 625MG TAB 45
VIREAD 150MG TAB 45
VIREAD 200MG TAB 45
VIREAD 250MG TAB 45
VIREAD 40MG/GM ORAL POWDER 45
VITRAKVI 100MG CAP 35
VITRAKVI 20MG/ML ORAL SOLN 35
VITRAKVI 25MG CAP 35
VIVITROL 380MG INJ 5
VIVOTIF DR CAP 66
VONJO 100MG CAP 35
VOQUEZNA 500-20MG DUAL THERAPY PACK (112) 62
VOQUEZNA 500-500-20MG TRIPLE THERAPY PACK (112) 62
VORANIGO 10MG TAB 35
VORANIGO 40MG TAB 35
*voriconazole 200mg inj* 23
*voriconazole 200mg tab* 23
*voriconazole 40mg/ml oral susp* 23
*voriconazole 50mg tab* 23
VOSEVI 400-100-100MG TAB 45
VOWST 30000000UNIT CAP 68
VRAYLAR 0.5MG CAP 39
VRAYLAR 0.75MG CAP 39
VRAYLAR 1.5MG CAP 39
VRAYLAR 3MG CAP 39
VRAYLAR 4.5MG CAP 39
VRAYLAR 6MG CAP 39
*vylibra tab 28-day pack* 72

**W**

*warfarin sodium 10mg tab* 12
*warfarin sodium 1mg tab* 12
*warfarin sodium 2.5mg tab* 12
*warfarin sodium 2mg tab* 12
*warfarin sodium 3mg tab* 12
*warfarin sodium 4mg tab* 12
*warfarin sodium 5mg tab* 12
*warfarin sodium 6mg tab* 12
*warfarin sodium 7.5mg tab* 12
WEGOVY 0.25MG/0.5ML AUTO-INJECTOR 51
WEGOVY 0.5MG/0.5ML AUTO-INJECTOR 51
WEGOVY 1.5MG TAB 51
WEGOVY 1.7MG/0.75ML AUTO-INJECTOR 51
WEGOVY 1MG/0.5ML AUTO-INJECTOR 51
WEGOVY 2.4MG/0.75ML AUTO-INJECTOR 51
WEGOVY 25MG TAB 51
WEGOVY 4MG TAB 51
WEGOVY 9MG TAB 51
WELIREG 40MG TAB 36
WINREVAIR 45MG INJ 80
WINREVAIR 45MG INJ (2 VIAL PACK) 80
WINREVAIR 60MG INJ 80
WINREVAIR 60MG INJ (2 VIAL PACK) 80
*wixela 100-50mcg powder inhaler* 79
*wixela 250-50mcg powder inhaler* 79
*wixela 500-50mcg/act powder inhaler* 79

**X**

XALKORI 150MG ORAL PELLET 35
XALKORI 200MG CAP 35
XALKORI 20MG ORAL PELLET 35
XALKORI 250MG CAP 35
XALKORI 50MG ORAL PELLET 35
XARELTO 10MG TAB 12
XARELTO 15MG TAB 12
XARELTO 20MG TAB 12
XATMEP 2.5MG/ML ORAL SOLN 29
XCOPRI 100MG TAB 15
XCOPRI 150MG TAB 15
XCOPRI 200MG TAB 15
XCOPRI 25MG TAB 15
XCOPRI 50MG TAB 15
XCOPRI TAB 100/150MG MAINTENANCE PACK (56) 15
XCOPRI TAB 12.5/25MG TITRATION PACK (28) 15
XCOPRI TAB 150/200MG PACK (56) 15
XCOPRI TAB 150/200MG TITRATION PACK (28) 15
XCOPRI TAB 50/100MG TITRATION PACK (28) 15

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

XDEMVY 0.25% OPHTH SOLN 75
XERMELO 250MG TAB 61
XIFAXAN 200MG TAB 8
XIFAXAN 550MG TAB 8
XIIDRA 5% OPHTH SOLN 75
XOFLUZA 40MG TAB 46
XOFLUZA 80MG TAB 46
XOLAIR 150MG INJ 47
XOLAIR 150MG/ML AUTO-INJECTOR 48
XOLAIR 150MG/ML SYRINGE 48
XOLAIR 300MG/2ML AUTO-INJECTOR 48
XOLAIR 300MG/2ML SYRINGE 48
XOLAIR 75MG/0.5ML AUTO-INJECTOR 48
XOLAIR 75MG/0.5ML SYRINGE 48
XOSPATA 40MG TAB 35
XPOVIO TAB 100MG ONCE WEEKLY CARTON (8) 36
XPOVIO TAB 40MG ONCE WEEKLY CARTON (16) 36
XPOVIO TAB 40MG TWICE WEEKLY CARTON (8) 36
XPOVIO TAB 60MG ONCE WEEKLY CARTON (4) 36
XPOVIO TAB 60MG TWICE WEEKLY CARTON (24) 36
XPOVIO TAB 80MG ONCE WEEKLY CARTON (4) 36
XPOVIO TAB 80MG ONCE WEEKLY CARTON (8) 36
XPOVIO TAB 80MG TWICE WEEKLY CARTON (32) 36
XTANDI 40MG CAP 31
XTANDI 40MG TAB 31
XTANDI 80MG TAB 31
XTRENBO 120MG/1.7ML INJ 57
*xulane 150-35mcg/24hr patch* 72

**Y**

YESINTEK 45MG/0.5ML INJ 48
YESINTEK 45MG/0.5ML SYRINGE 48
YESINTEK 90MG/ML SYRINGE 48
YF-VAX INJ 66
*yulithira 10mg tab* 36
*yulithira 2.5mg tab* 36
*yulithira 5mg tab* 36
*yulithira 7.5mg tab* 36
*yuvafem 10mcg vaginal insert* 74

**Z**

*zafemy 150-35mcg/24hr patch* 72
*zafirlukast 10mg tab* 78
*zafirlukast 20mg tab* 78
*zaleplon 10mg cap* 81
*zaleplon 5mg cap* 81
ZAVZPRET 10MG/ACT NASAL SPRAY 67
ZEJULA 100MG TAB 36
ZEJULA 200MG TAB 36
ZEJULA 300MG TAB 36
ZELBORAF 240MG TAB 36
*zenatane 10mg cap* 54
*zenatane 20mg cap* 54
*zenatane 30mg cap* 54
*zenatane 40mg cap* 54
ZENBEXUS 0.75MG CAP 31
ZENBEXUS 1MG CAP 31
ZENPEP 105000-25000-79000UNIT DR CAP 68
ZENPEP 14000-3000-10000UNIT DR CAP 68
ZENPEP 24000-5000-17000UNIT DR CAP 68
ZENPEP 252600-60000-189600UNIT DR CAP 68
ZENPEP 40000-126000-168000UNIT DR CAP 68
ZENPEP 42000-10000-32000UNIT DR CAP 68
ZENPEP 63000-15000-47000UNIT DR CAP 68
ZENPEP 84000-20000-63000UNIT DR CAP 68
*zidovudine 100mg cap* 45
*zidovudine 10mg/ml oral soln* 45
*zidovudine 300mg tab* 45
*ziprasidone 20mg cap* 39
*ziprasidone 20mg inj* 39
*ziprasidone 40mg cap* 39
*ziprasidone 60mg cap* 39
*ziprasidone 80mg cap* 39
ZOLINZA 100MG CAP 36
*zolmitriptan 2.5mg tab* 67
*zolmitriptan 5mg tab* 67
*zolpidem tartrate 10mg tab* 81
*zolpidem tartrate 12.5mg er tab* 81
*zolpidem tartrate 5mg tab* 81
*zolpidem tartrate 6.25mg er tab* 81


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

| | |
|---|---|
| ZONISADE 100MG/5ML ORAL SUSP | 15 |
| *zonisamide 100mg cap* | 15 |
| *zonisamide 25mg cap* | 15 |
| *zonisamide 50mg cap* | 15 |
| *zovia 1/35 tab 28-day pack* | 72 |
| ZTALMY 50MG/ML ORAL SUSP | 15 |
| ZURNAI 1.5MG/0.5ML AUTO-INJECTOR | 5 |
| ZURZUVAE 20MG CAP | 16 |
| ZURZUVAE 25MG CAP | 16 |
| ZURZUVAE 30MG CAP | 16 |
| ZYKADIA 150MG TAB | 36 |
| ZYMFENTRA 120MG/ML PEN INJ | 48 |
| ZYMFENTRA 120MG/ML SYRINGE | 48 |


You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

# Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

**English:** We have free interpreter services to answer any questions you may have about our health or drug plan. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. To get an interpreter, just call us at 1-855-855-0668 (TTY 711). Someone who speaks English can help you. This is a free service.

**Spanish:** Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. *También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles.* Para hablar con un intérprete, por favor llame al 1-855-855-0668 (TTY 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

**Chinese Mandarin:** 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。我们还免费提供适当的辅助工具和服务，以可访问的格式提供信息。如果您需要此翻译服务，请致电 1-855-855-0668 (TTY 711)。我们的中文工作人员很乐意帮助您。 这是一项免费服务。

**Chinese Cantonese:** 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。我們還免費提供適當的輔助工具和服務，以無障礙格式提供資訊。如需翻譯服務，請致電 1-855-855-0668 (TTY 711)。我們講中文的人員將樂意為您提供幫助。這 是一項免費服務。

**Tagalog:** Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-855-855-0668 (TTY 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-855-855-0668 (TTY 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Các dịch vụ và hỗ trợ bổ sung phù

hợp nhằm cung cấp thông tin ở định dạng dễ tiếp cận đều có sẵn miễn phí. Nếu quí vị cần thông dịch viên xin gọi 1-855-855-0668 (TTY 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quí vị. Đây là dịch vụ miễn phí .

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Unsere Dolmetscher erreichen Sie unter 1-855-855-0668 (TTY 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 답해 드리고자 무료 통역 서비스를 제공하고 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 통역 서비스를 이용하려면 전화 1-855-855-0668 (TTY 711)번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-855-855-0668 (TTY 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

**Arabic:** إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. كما تتاح الوسائل والخدمات المساعدة اللازمة لتوفير المعلومات بصيغ ميسَّرة بدون أي تكلفة. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على 1-855-855-0668 (TTY 711) سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

**Hindi:** हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. ज़रूरी टूल्स और सेवाएं भी बिल्कुल मुफ़्त में उपलब्ध कराए जाते हैं, ताकि जानकारी आप तक आसानी से पहुँच पाए। एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-855-855-0668 (TTY 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari utili a fornire informazioni in formati accessibili. Per un interprete, contattare il numero 1-855-855-0668 (TTY 711). Un nostro incaricato che parla italiano vi fornirà l'assistenza necessaria. È un servizio gratuito.

**Portuguese:** Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação.

Também estão disponíveis gratuitamente recursos e serviços auxiliares adequados para fornecer informações em formatos acessíveis. Para obter um intérprete, contacte-nos através do número 1-855-855-0668 (TTY 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

**French Creole:** Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Èd oksilyè ak sèvis apwopriye pou bay enfòmasyon nan fòma aksesib disponib tou gratis. Pou jwenn yon entèprèt, jis rele nou nan 1-855-855-0668 (TTY 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

**Polish:** Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Odpowiednie pomoce i usługi pomocnicze zapewniające dostęp do informacji w formatach dostępnych dla osób z niepełnosprawnością są również dostępne bezpłatnie. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-855-855-0668 (TTY 711). Ta usługa jest bezpłatna.

**Japanese:** 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがありますございます。アクセシブル（誰もが利用できるよう配慮された）な形式で情報を提供するための 適切な補助支援やサービスも無料でご利用いただけます。 通訳をご用命になるには、1-855-855-0668 (TTY 711) にお電話ください。日本語を話す人 者 が支援いたします。これは無料のサー ビスです。

This formulary was updated on 10/01/2026. For more recent information or other questions, please contact PruittHealth Premier D-SNP (HMO D-SNP) Member Service at 1-855-855-0668 (TTY users should call 711), 8 a.m. to 8 p.m., seven days a week (except Thanksgiving and Christmas) from October 1 through March 31, and Monday to Friday (except holidays) from April 1 through September 30, or visit PruittHealthPremier.com.